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## Debate: Adjunctive corticosteroids for acute bacterial meningitis in Africa – do we need more evidence?

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In high-income countries, based on available trial and observational data, national and international guidelines generally recommend adjunctive corticosteroid therapy for children and adults with community acquired bacterial meningitis. There is less evidence of benefit in low- and middle-income countries, and antibiotic regimens used in trials in LMICs were more variable. Supportive care during and after meningitis is often less well-resourced in LMICs. Additionally, no trials of adjunctive corticosteroid therapy have been performed in the African meningitis belt.

Based on the current evidence, corticosteroid adjunctive therapy is currently not recommended as empiric treatment for bacterial meningitis in many African countries. Given recent changes in meningitis epidemiology, greater standardization of treatment regimens, and an increased focus on prevention of sequelae, the question arises whether we should reconsider steroids as adjunctive therapy in LMICs, particularly in the African meningitis belt. That is the question – with audience participation, this lively debate will answer it.