Pertussis (Whooping Cough)

As you may have been hearing in the media there have been reported cases throughout the Miami Valley. The following is an informational sheet that explains pertussis/whooping cough.

What is pertussis?

Pertussis, or whooping cough, is a highly contagious respiratory infection caused by the bacteria Bordetella pertussis.

Who gets pertussis?

Pertussis can occur at any age. Although most of the reported cases occur in children under five years, the number of cases in adolescents and adults is increasing, probably due to waning of vaccine immunity. Adolescents and adults and those partially protected by the vaccine may have milder disease which is not diagnosed as pertussis. Pertussis is thought to account for up to 7% of cough illnesses per year in adults.

How is pertussis spread?

Pertussis is primarily spread by direct contact with the discharges from the nose and throat of infected individuals. Frequently, older siblings or other adult household members who may be harboring the bacteria in their nose and throat can bring the disease home and infect an infant in the household.

What are the symptoms of pertussis?

Pertussis begins as a mild upper respiratory infection. Initially, symptoms resemble those of a common cold, including sneezing, runny nose, low-grade fever and a mild cough. Within two weeks, the cough becomes more severe and is characterized by episodes of numerous rapid coughs followed by a crowing or high-pitched whoop. A thick, clear mucous may be discharged with the coughing. These episodes may recur for one to two months, and are more frequent at night. Young infants, adolescents, and adults do not have these typical coughing spells. Older people or partially immunized children may have milder symptoms.

How soon after infection do symptoms appear?

The incubation period is usually 7 to 10 days, with a range of 4 to 21 days.

When and for how long is a person able to spread pertussis?

A person can transmit pertussis from the onset of symptoms to three weeks after the onset of coughing episodes. The period of communicability can be reduced to five days after appropriate antibiotic therapy is begun.

Does past infection with pertussis make a person immune?

One attack usually confers immunity comparable to that provided by vaccine.

What are the complications associated with pertussis?

Young infants are at the greatest risk for complications. Serious complications of pertussis include pneumonia, seizures, encephalopathy (disorders of the brain), and death. Less serious complications include ear infections, loss of appetite, and dehydration.

What is the vaccine for pertussis?

Children should be immunized with the DTaP (diphtheria toxoid in combination with tetanus toxoid and acellular pertussis) vaccine at 2, 4, 6 and 15 to 18 months of age and between 4 and 6 years of age. Older children and adults who have completed the primary series should receive Td (tetanus/diphtheria) boosters every 10 years. It is recommended that for both adolescents (11-18 years of age) and adults <65 years of age, Tdap (tetanus/diphtheria/acellular pertussis) be used for one of those boosters to provide protection against pertussis. See the Centers for Disease Control and Prevention (CDC) for the most current Advisory Committee on Immunization Practices (ACIP) recommendations on vaccination and control measures.

What can be done to prevent the spread of pertussis?

The single most effective control measure is maintaining the highest possible level of immunization in the community. The treatment of cases of pertussis with the appropriate antibiotic is important, as is the treatment of close contacts of cases. In addition, medical professionals should consider the diagnosis of pertussis in adolescents and adults with persistent coughs. People who have or may have pertussis (including those with a persistent cough) should stay away from young children and infants until properly evaluated by a physician.