

Whooping Cough (Pertussis)



What Is It?

Whooping cough is a serious respiratory infection caused by bacteria that is highly contagious. It gets its name from the whooping sound the child makes when trying to draw breath after a coughing spell. It can be prevented by immunization. It is treated with antibiotics.

What Are the Symptoms?

Symptoms generally include those of a cold, such as runny nose and a cough that gradually worsens. Violent coughing spells frequently end with vomiting. The coughing can lead to severe episodes or fits of coughing in which children gasp (or whoop) for breaths of air. Night time coughing can also disturb sleep. It is a very serious disease for infants, as they may develop other complications that require hospitalization such as pneumonia, ear infections and swelling of the brain. The initial symptoms of pertussis in small infants are often deceptively mild for a few days and then suddenly get worse and cause severe respiratory distress.

Who Gets It and How?

Whooping cough is very contagious and dangerous for infants. It is spread from person to person through the air or by direct contact with respiratory secretions. A person who is not immune to whooping cough becomes infected by breathing air or touching surfaces that have been contaminated with the respiratory discharges of an infected person who has coughed. Adults and partially immunized children get milder symptoms of the disease and can transmit it to children. Infants most often catch pertussis from an older family member or caregiver.

Before vaccines and antibiotics were developed, whooping cough was a common cause of death in young children. Today, it is prevented by vaccines. Children in the United States are now immunized with the whooping cough vaccine at two, four, and six months, and between 12–18 months and 4–6 years of age. All children attending a child care program should be up to date on vaccinations. A booster dose of Tdap is now given to teenagers and adults, since persons who have been infected with pertussis lose

their immunity after 4-20 years and those who are vaccinated lose their immunity after 4-12 years. If children are exposed to whooping cough and it has been more than three years since their last dose of vaccine, they should receive a booster dose of vaccine. Adults caring for infants should also receive a booster dose of Tdap vaccine so they do not pass the illness to infants in their care who are too young to be vaccinated.

When Should People with this Illness Be Excluded?

Exclude the infected person from the program until that person has been on appropriate antibiotics for at least five days. Untreated adults should be excluded for four weeks after onset of coughing.

How Can I Limit the Spread of Whooping Cough?

- Require up-to-date immunization certificates for all children in your care.
- Licensing requires that child care providers report cases of whooping cough to their local public health department and to Community Care Licensing.
- Notify all parents/guardians of children whenever there is a case of whooping cough. Keep the identity of the infected child confidential. It is important that parents monitor their children for any symptoms, especially if the children are not completely immunized against whooping cough.
- Always practice precautions to reduce respiratory infections such as hand washing, coughing into elbow or sleeve or away from people, disinfecting the environment and good ventilation.
- Carefully monitor all children and staff for coughs. Anyone developing a persistent cough should be immediately referred to his or her health care provider.
- Encourage all staff who care for infants to get their booster vaccine against whooping cough.

Protect yourself. Child care providers and families, especially those with young infants, can reduce the spread of whooping cough by getting immunized. Talk to your health care provider or local public health department about getting the Tdap vaccine.