

PERTUSSIS

(WHOOPIING COUGH)

(Reportable Disease – Report to Local Health Agency)

IMMUNIZATION: Part of standard childhood immunization schedule.

INCUBATION PERIOD: From 6-20 days, usually 7-10 days.

SYMPTOMS: Early symptoms are a “cold,” with sneezing and coughing. Within one or two weeks, the characteristic “whoop” begins. Coughing attack may end in vomiting. Coughing can last up to 1-2 months or longer. In infants, apnea is common.

PERIOD OF COMMUNICABILITY: Whooping cough is especially infectious during its early stages, before the “whooping” begins. Decreases thereafter, becoming negligible in about 3 weeks. When treated with erythromycin or other effective antibiotic, infectiousness usually is 5 days or less after onset of therapy.

MODE OF TRANSMISSION: Primarily by direct contact with discharge from respiratory tract of infected persons by airborne route, probably by droplets as well.

SCHOOL ATTENDANCE: Exclusion for 3 weeks after onset of typical paroxysms (whoop), if patient was not treated with antibiotics. If treated with erythromycin, exclude for 5 days after onset of therapy.

CONTACTS/FOLLOW-UP: Exclusion of susceptible children from school and public gatherings for 14 days after last exposure or until case or contact has received 5 days of appropriate antibiotic therapy. • Close contacts under 7 years of age who have not received 4 DTP doses, or have not received a DTP dose within 3 years, should be given a dose as soon after exposure as possible. DTaP may be given to children 15 months of age, but less than 7 years, who have received at least 3 doses of whole -cell vaccine. A 14-day course of erythromycin for household and other close contacts, regardless of immunization status, is recommended.

- A search for early, missed and atypical cases is indicated where a Non - immune infant or young child is or might be at risk.