PERTUSSIS (Whooping Cough)

What is whooping cough?
Pertussis, also known as “whooping cough”, is a disease of the lungs and throat caused by the bacteria *Bordetella pertussis*. In adults, whooping cough can be as minor as a dry, nagging cough, while in babies and young children the disease is life-threatening.

Whooping cough continues to occur worldwide. In New Brunswick, even though the population is routinely immunized against whooping cough, sporadic cases and outbreaks continue to occur.

It is possible to get whooping cough infection more than once. Immunity from the vaccine decreases over time therefore the vaccine may not protect for life. Adults, whether they have had a whooping cough infection or not, should make sure they receive one dose of Pertussis vaccine during adulthood to remain protected.

What are the symptoms?
Whooping cough starts like a cold with sneezing, runny nose, low-grade fever and mild cough. Over the next week or two, the cough gets worse leading to serious coughing spells that often (but not always) end with a “whoop”. The coughing may be so severe that it makes the person gag or vomit. Sometimes thick clear mucous is spit out. The cough can last up to one or two months and occurs more often at night. Babies may find it difficult to eat, drink or breathe. Symptoms start within 5 to 21 days (usually 7 to 10 days) after someone has been exposed to an infected person.

How is whooping cough spread?
Whooping cough is easily transmitted from person to person, mainly through droplets from the nose, mouth and throat of an infected person. Untreated, a person with whooping cough can spread it to other people for up to three weeks after the onset of cough.

Babies less than six months, teenagers and adults, often do not have the “whoop” sounding cough. Anyone who has a cough that lasts more than one week without getting better should see their health-care provider to make sure the cough is not whooping cough.

How is whooping cough diagnosed?
Diagnosis of whooping cough is based upon symptoms and lab tests. A health-care provider can take a swab from the back of the nose, or a blood test may be done to help confirm the diagnosis.

Who is at risk of whooping cough?
Whooping cough can occur at any age, however it is very serious in babies and young children. It is usually milder in older children and adults. Children who are too young to be fully immunized and those who have not received all their immunizations are at highest risk for severe illness and complications.

People living in the same household as someone with whooping cough are more likely to catch whooping cough. Immunization greatly reduces the risk of infection, but re-infection can occur.

How can whooping cough be prevented?
The best way to protect against whooping cough is to be immunized.

The New Brunswick Routine Immunization Schedule provides whooping cough immunization as part of the routine schedule for children and adults.
Immunization of children
The vaccine is given at 2, 4, 6 and 18 months of age, at age four and as an adolescent as a part of the school program.

Immunization of adults
The routine adult schedule recommends that tetanus and diphtheria boosters be given every ten years and that one of the doses be a pertussis containing vaccine.

Cocooning babies and young children
Whooping cough is most dangerous for babies and young children who are either too young to receive the vaccine or who have not yet received four to five doses of the vaccine. By immunizing parents, siblings and other close contacts of babies and young children, the very young can be surrounded or “cocooned” by those who are immunized. Cocooning protects the very young until they can be protected by the vaccine.

Expectant parents and adults and adolescents in close contact with babies and young children should ensure that their immunization is up-to-date and they receive a vaccine against pertussis.

It is very important to keep people with coughs and colds away from babies and young children.

How is whooping cough treated?
Whooping cough is treated with an antibiotic, and if treated soon enough, the antibiotic may prevent the spread of the germ to other people and decrease the severity of the disease. Even with antibiotics, coughing can last for many weeks.

What is the public health response?
Health-care providers, hospitals and laboratories, schools and childcare centres must report all cases to Public Health. Public health staff may interview the health-care provider and patient (or care-givers) to find out how the infection occurred, identify other people at risk of infection, implement control measures (such as immunization and restriction on attending school or work) and provide other advice.

Further Information
For additional information, contact your health-care provider, local Public Health office or Tele-Care 811.

Useful websites:
- Government of New Brunswick www.gnb.ca/health
- Canadian Coalition for Immunization Awareness and Promotion http://www.immunize.cpha.ca
- Public Health Agency of Canada http://www.phac-aspc.gc.ca
- Canadian Pediatric Society http://www.cps.ca