



Pertussis(WhoopingCough)Information forChildCareSettings

What is pertussis?

Pertussis, or whooping cough, is a disease that affects the lungs. It is caused by bacteria that can be spread through the air. A person with pertussis develops a severe cough that usually lasts 4 to 6 weeks or longer. Pertussis can be very serious, especially in infants.

What are the symptoms?

The first symptoms of pertussis are similar to a cold: sneezing, runny nose, possibly a low-grade fever, and a cough. After one or two weeks, the cough becomes severe:

- The cough occurs in sudden, uncontrollable bursts where one cough follows the next without a break to take a breath.
- Many children will make a high-pitched whooping sound when breathing in after a coughing episode. (Whooping is less common in infants and adults.)
- A coughing spell may cause vomiting.
- The person's face or lips may look blue from lack of oxygen.
- The cough is often worse at night.
- Between coughing spells, the person may seem well.
- Coughing episodes gradually become less frequent, but may continue for several weeks or months until the lungs heal.

What are the complications?

- Pertussis in infants is often severe, and infants are more likely than older children or adults to develop complications.
- The most common complication of pertussis is bacterial pneumonia.
- Rare complications include seizures, inflammation of the brain, and death.

Who gets pertussis?

- Anyone of any age can get pertussis.
- Teenagers and adults account for more than half of reported cases.

- Cases in school-age children are increasing.
- Older children and adults usually have less severe illness, but they can still spread the disease to infants and young children.

How is pertussis spread?

The bacteria are found in fluids from the mouth and nose of someone with pertussis. Pertussis spreads when a person with pertussis coughs or sneezes near you and those fluids containing the bacteria get in your nose or mouth.

The period between exposure to the bacteria and the start of symptoms is usually seven to 10 days but may be as long as 21 days.

Can pertussis be treated?

Pertussis can be treated with antibiotics, but treatment may not cure the symptoms. However, antibiotics will reduce the spread of disease.

Antibiotics lessen the symptoms if given during the early stages of illness. When antibiotics are started later in the illness, the damage from pertussis is already done and the cough will last until the lungs heal. Pertussis bacteria die off naturally after three weeks of coughing. If antibiotics are not started within that time, they are no longer recommended.

Antibiotics can also be given to close contacts of persons with pertussis to prevent or lessen the symptoms.

Is there a vaccine to help prevent pertussis?

Yes. There are two pertussis vaccines (DTaP and Tdap); your age determines which vaccine you should receive. Both vaccines are given in combination with tetanus and diphtheria. DTaP is given to children under 7 years of age. Tdap is given to adolescents and adults, especially those who have close contact with children under 1 year of age.

What should I do if I think a child or staff member has pertussis?

Consider pertussis if you have a child or staff member who has a cough lasting more than two weeks or a severe cough that occurs in sudden, uncontrollable bursts, especially if followed by vomiting. Take these action steps:

- Encourage them to see a health care provider.
- Health care providers must report all suspected and confirmed cases of pertussis to Alaska Section of Epidemiology (SOE) at (907)269-8000.

Public health will work with you and the child (or parent/guardian) to address questions and concerns, plan appropriate notifications, and implement prevention and control measures, as needed.

Do I need to exclude the child or staff member?

Individuals with pertussis are infectious for the first 21 days or through the first 5 days of antibiotics. (Note: The cough will generally last longer than 3 weeks until the lungs are healed.) Exclude children and/or staff:

- Until completion of 5 days of appropriate antibiotics, **or**
- Through the first 21 days of cough.

During this time, the person should not participate in child care or community activities.

Do I need to close the child care facility due to pertussis?

No. We do not recommend closing child care due to outbreaks of pertussis. There is no evidence that it prevents the spread of disease, as children may gather in other settings.

What else can be done to keep pertussis from spreading?

- Promote Tdap vaccine for staff, room helpers, and volunteers.
- Remind parents about the importance of keeping their children up-to-date on the DTaP vaccine series.
- Encourage hand washing and covering of coughs. Find posters to use in your facility: <http://www.dhss.alaska.gov/dph/Epi/id/Documents/influenza/fluinfo/CoverYourCough.pdf>
- Remind staff and children (via parents) to stay home if ill. For recommendations on how long someone should stay home, see: <http://www.dhss.alaska.gov/dph/Epi/id/Documents/dod/pertussis/PertussisSchoolExclusion.pdf>
- Have staff and children seek medical attention if they develop pertussis-like symptoms or have been exposed to someone with pertussis.

Public Health will help child care settings:

- **Identify** close contacts of the case.
- **Determine** if close contacts should receive antibiotics.
- **Inform** others in your child care about pertussis -- especially if pertussis in the facility generates a lot of questions and concerns or if a cluster or outbreak of cases occurs.

If you have questions or concerns:

Contact the Alaska Section of Epidemiology at: 907-269-8000 or see:

<http://www.dhss.alaska.gov/dph/Epi/id/Pages/dod/pertussis/pertussis.aspx>

Fact sheet adapted from Minnesota Department of Health

<http://www.health.state.mn.us/divs/idepc/diseases/pertussis/index.html>

(Reviewed 2/3/16)