

PERTUSSIS
(WHOOPIING COUGH)
(Reportable Disease - Report to Local Health Agency)

IMMUNIZATION: Part of standard childhood immunization schedule.

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

SYMPTOMS: Early symptoms are a cold, 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 states, 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 discharges 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 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 \geq 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 nonimmune infant or young child is or might be at risk.