Pertussis (Whooping Cough)

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What is pertussis?
Pertussis (or whooping cough) is a disease caused by infection of the throat with the bacteria *Bordetella pertussis*.

What are the symptoms?
- Pertussis usually begins just like a cold, with a runny nose, tiredness and sometimes a mild fever.
- Coughing then develops, usually in bouts, followed by a deep gasp (or “whoop”). Sometimes people vomit after coughing.
- Pertussis can be very serious in small children. They might go blue or stop breathing during coughing attacks and may need to go to the hospital.
- Older children and adults may have a less serious illness, with bouts of coughing that continue for many weeks regardless of treatment.

How is it spread?
Pertussis is spread to other people by droplets from coughing or sneezing. Untreated, a person with pertussis can spread it to other people for up to three weeks after onset of cough.

The time between exposure and getting sick is usually seven to ten days, but can be up to three weeks.

Who is at risk?
- Anyone can get pertussis.
- People living in the same household as someone with pertussis are more likely to catch it.
- Immunisation greatly reduces your risk of infection, but reinfection can occur.

How is it prevented?

**Immunise your child on time**
- The vaccine does not give lifelong protection against pertussis, and protection is sometimes incomplete.
- Children should be immunised at two, four and six months (the first dose can be given as early as 6 weeks of age).
- Boosters are needed at four years of age and again at 15 years of age.
- Immunisation is available through general practitioners and some local councils.

**Keep your baby away from people who cough**
- Babies need two or three vaccinations before they are protected. For this reason, it is very important to keep people with coughing illnesses away from your baby so they don’t pass on pertussis or other germs.
Get immunised if you are an adult in close contact with small children

A vaccine for adults is available. It is recommended:

- For both parents when planning a pregnancy, or as soon as the baby is born,
- For other adult household members, grandparents and carers of young children, and
- For adults working with young children, especially health care and child care workers.

If you are a close contact of someone with pertussis

- Watch out for the symptoms. If symptoms develop, see your doctor, take this factsheet with you and mention your contact with pertussis.
- Some close contacts at high risk (e.g., children under one year, children not fully vaccinated, and women at the end of their pregnancy) and others who live or work with high-risk people may need to take antibiotics to prevent infection.

If you have pertussis:

- Get treated early.
- While infectious, avoid other people and stay away from young children, e.g., at child care centres, pre-school and school

How is it diagnosed?

If a doctor thinks someone has pertussis, a swab from the back of the nose, or a blood test may be done to help confirm the diagnosis.

How is it treated?

A special antibiotic – usually either erythromycin, clarithromycin, or azithromycin is used to treat pertussis. These antibiotics can prevent the spread of the germ to other people after the full course has been taken.

Coughing often continues for many weeks despite treatment.

What is the public health response?

Doctors and laboratories must confidentially notify cases of pertussis to the local Public Health Unit. Public Health Unit staff can advise on the best way to stop further spread.

Infectious children are restricted from going to pre-school and school. Unimmunised contacts may be excluded from child care unless they take the special antibiotics.