



COUNTY OF IMPERIAL

PUBLIC HEALTH DEPARTMENT

July 31, 2019

PUBLIC HEALTH ADVISORY

Increase in Pertussis Cases in Imperial County

An increase in cases of pertussis, also known as whooping cough, has been reported countywide in recent weeks. Twenty-one lab-confirmed cases have been reported in Imperial County since January. Cases range in age from eight months to 80 years (median age: 3 years).

The number of cases reported so far in 2019 is significantly higher than in previous years, exceeding year-end totals over the past decade in this county. Half of the cases were reported in June and July.

Pertussis is a highly contagious bacterial disease that can be spread by coughing. People with pertussis have severe coughing attacks that can last for months.

Pertussis vaccines offer the best protection against this contagious disease. Completion of the series is important. Some of the children recently diagnosed with whooping cough had not completed the appropriate doses of vaccine.

Infants too young for vaccination are at greatest risk for life-threatening cases of pertussis. To protect newborns, pregnant women are recommended to receive Tdap vaccine (whooping cough booster) in their third trimester of every pregnancy (between 27-36 weeks, at the earliest opportunity). A booster is also required for students entering 7th grade in California.

Recommendations for Clinicians

Vaccinate

- Immunize all women, irrespective of their immunization history, with Tdap during every pregnancy between 27 and 36 weeks of gestation to optimize antibody transfer and protection of infants at birth. Tdap during pregnancy has not been found to be associated with an increased risk of adverse events in vaccinated women or their infants.

- Postpartum vaccination does not provide transplacental antibodies to newborns but may prevent maternal acquisition and transmission of pertussis. If the postpartum mother has never received Tdap, promptly administer Tdap before discharge home.
- Advise women during pregnancy and delivery that other adults in contact with the newborn, such as fathers, grandparents, older siblings, and babysitters, should also be up to date with their Tdap vaccine.
- Immunize young infants promptly with DTaP. During a community outbreak, the first dose of DTaP can be given as early as 6 weeks of age, especially to infants whose mothers did not receive Tdap during pregnancy. The primary DTaP vaccine series reduces severe disease in young infants, and even the first dose may offer some protection against fatal disease.
- Encourage all persons to be up to date with current pertussis vaccination recommendations. As part of the “cocooning” strategy, all close contacts of infants (e.g., family members, child care providers, etc.) and all health-care personnel should be immunized against pertussis, particularly those who work with infants or pregnant women.

Test and treat

- Diagnosing pertussis in young infants is challenging, as they may have little or no cough, whoop, or fever. Mild illness may quickly progress to respiratory distress, apnea, cyanosis, or seizures. Delays in treatment may increase the risk of a fatal outcome. A white blood cell count of $\geq 20,000$ cells/mm³ with $\geq 50\%$ lymphocytes is a strong indication of pertussis.
- Consider pertussis even in recently vaccinated people when evaluating patients with symptoms compatible with pertussis. Immunity after immunization wanes within a few years.
- Consider pertussis regardless of age in patients with persistent cough. Symptoms are generally milder in teens and adults, especially in those who have received Tdap. Adults may report sweating episodes or feeling as if they’re choking.
- For testing by PCR or culture, obtain a nasal aspirate (preferable) or nasopharyngeal swab. Serologic testing for pertussis is not recommended.
- Initiate antibiotic treatment prior to obtaining test results, especially in infants and pregnant women or those who are in close contact with them. Azithromycin is preferred because of efficacy and compliance.
- Instruct patients with pertussis to stay home from work, school or day care until they have received 5 days of antibiotics and to avoid contact with infants and pregnant women.

- Provide antibiotic prophylaxis to household contacts, caregivers, and other persons who have had direct contact with respiratory, oral, or nasal secretions and aerosols from a symptomatic case, especially when there is an infant or pregnant woman in the home. The dosage and duration for antibiotic prophylaxis is the same as treatment and should not be shortened.
- Report all suspected pertussis cases to the local health department. Contact the Epidemiology section of the Public Health Department by calling (442) 265-1464.

For more information go to:

California Department of Public Health

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/pertussis.aspx#>

Centers for Disease Control and Prevention (CDC)

<http://www.cdc.gov/vaccines/pubs/pinkbook/downloads/pert.pdf>

###