

TO: Health Care Providers, Hospitals, Ambulatory Care Centers and School Nurses

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PERTUSSIS ADVISORY: INCREASED PERTUSSIS ACTIVITY

Growing Number of Pertussis Cases

A cluster of pertussis cases has been identified in the St. Albans (Franklin County) area within the last week. All but one of the cases have been among school-aged children. Families are notified when cases are identified in schools or child care settings.

Consider Pertussis When Evaluating Cough Illnesses

Consider pertussis as a diagnosis for anyone who has at least one of the following conditions, regardless of vaccination history:

- Cough illness of any duration in a person who has been exposed to pertussis, including anyone who has been notified of potential exposure at a school or other setting.
- Cough illness lasting ≥ 1 week with either paroxysms, inspiratory whoop, or post-tussive vomiting/gagging; OR cough illness lasting ≥ 1 week with apnea (with or without cyanosis) in infants.
- Prolonged cough illness lasting ≥ 2 weeks in the absence of a more likely diagnosis.

When the patient has close contact with an infant or others at increased risk for pertussis complications, have a lower threshold for considering pertussis.

Report all suspected and confirmed cases to the Vermont Department of Health Infectious Disease - Epidemiology program at 802-863-7240.

Test for Pertussis

- Obtain a nasopharyngeal (NP) swab from **all** suspected cases for testing by PCR and culture. Do not test persons who are not symptomatic.
- Use a flexible polyester (Dacron® or rayon) or nylon-flocked swab. Cotton-tipped or calcium alginate swabs are not acceptable. Leave swab inserted for up to 10 seconds. Place swab into Regan-Lowe transport medium, ensuring the tip is completely covered. Only one swab is needed for both PCR and culture.
- Health Department Laboratory can run tests for both PCR and culture from one specimen. Both tests must be requested using the lab requisition form:
http://healthvermont.gov/enviro/ph_lab/documents/Laboratory_Clinical_Test_Request_Form.pdf.
- A negative result does not rule out *B. pertussis* infection.

For questions about testing or to order specimen collection kits, call the Health Department Laboratory at 802-338-4724.

Treat Suspected and Confirmed Cases as Indicated

Treatment guidelines:

<http://healthvermont.gov/prevent/pertussis/documents/pertussistreatment.pdf>

- Patients with suspected pertussis should be treated and advised to stay home for five days, even before getting a test result, or even if a test is not done.
- Close household-type contacts of cases should receive postexposure antimicrobial prophylaxis (PEP).
- Empiric treatment is especially recommended for high-risk contacts in the household (infants, pregnant woman, etc.).
- If 21 days have already elapsed since onset of cough: the patient is no longer infectious and treatment is not recommended because it will not improve outcome.
- Prescribe PEP (same regimen as treatment) to close contacts of pertussis cases and if exposure occurred within the previous 21 days (maximum incubation period for pertussis).
- Symptomatic contacts should be evaluated for pertussis. Asymptomatic contacts receiving PEP do not need to be excluded from their usual activities.

For questions about treatment, call the Vermont Department of Health Infectious Disease - Epidemiology program at 802-863-7240.

Stop Transmission

Exclude – Inform patients with suspected pertussis to stay at home and avoid close contact with others until they have completed the fifth day of antibiotic treatment - OR - had cough symptoms for at least three weeks.

Provide Post-exposure Prophylaxis – Ensure close contacts of all cases are identified and treated, as indicated, with PEP.

Vaccinate – Vaccination is the best protection against pertussis. Because immunity from childhood pertussis vaccination wanes over time, the adolescent/adult pertussis booster vaccine (Tdap) is essential to reduce the risk of contracting pertussis, and can decrease severity of disease.

- Under-immunized contacts of pertussis cases should be brought up to date with vaccinations.
- A single dose of Tdap vaccine is recommended for everyone age 11 or older.
- Pregnant women should receive a dose of Tdap during each pregnancy.
- There is no minimal time interval between doses of Td and Tdap.

Providers participating in the Vermont VFC/VFA program: Contact the Department of Health Immunization program at 802-863-7240 for information about ordering vaccine.

Pertussis Information for Clinicians

Resources for clinicians: <http://healthvermont.gov/prevent/pertussis/providers.aspx>.

For more information: Contact the Vermont Department of Health Infectious Disease Epidemiology program at 802-863-7240.