

# PERTUSSIS (WHOOPING COUGH) ALERT

Information for NSW General Practitioners & Aboriginal Medical Services

Please distribute this information to all staff

1. The pertussis outbreak previously reported in NSW is continuing with more than 3,000 cases reported in October & November 2015.
2. Vaccination is recommended for pregnant women during the third trimester of each pregnancy. The vaccine is safe and provided free by NSW Health.
3. Azithromycin, trimethoprim + sulfamethoxazole, or clarithromycin are the recommended antibiotics for treatment of pertussis & prevention in contacts.
4. Erythromycin is no longer recommended due to lower tolerability and reduced compliance.

## Summary

There is currently an epidemic of pertussis in NSW. Young infants are the most at risk of severe complications but can be protected with maternal vaccination – NSW is providing free pertussis vaccine for pregnant women preferably at 28 weeks gestation.

## Protect - Vaccination during pregnancy

- The National Health & Medical Research Council recommends that all pregnant women receive pertussis vaccination in the third trimester of each pregnancy (preferably at 28 weeks).
- Vaccination in the third trimester provides highly effective protection to infants with the passive transfer of antibodies likely to provide protection from birth until they develop immunity from the primary vaccine course, which begins at 6 weeks of age.
- An evidence summary is on the NSW Health website: [www.health.nsw.gov.au/protectnewborns](http://www.health.nsw.gov.au/protectnewborns).
- NSW Health provides free Boostrix® vaccine for women in the third trimester of pregnancy via GPs, Aboriginal Medical Services, and hospital antenatal clinics. Please order vaccines with your routine monthly order at [nsw.csldirect.com.au](http://nsw.csldirect.com.au).

## Identify - Suspect & Test

- Suspect pertussis in patients presenting with persistent cough, even in fully vaccinated people.
- Nasopharyngeal swab or aspirate for bacterial PCR is the preferred diagnostic method.
- Asymptomatic patients should **not** be tested

## Prevent – Antibiotics & Isolation

Therapeutic guidelines for pertussis have been amended to only three recommended agents:

<b>Azithromycin</b>	under 6 months: 10 mg/kg orally, daily for 5 days 6 months or older: 10 mg/kg up to 500 mg orally on day 1, then 5 mg/kg up to 250 mg daily for a further 4 days
<b>Trimethoprim+sulfamethoxazole</b>	from 2 months of age: 4+20mg/kg (up to 160+800mg) twice a day for 7 days
<b>Clarithromycin</b>	7.5 mg/kg up to 500 mg orally, twice a day for 7 days

- **Erythromycin and roxithromycin are NOT recommended for pertussis in any age group.**
- Advise patients with suspected pertussis to stay away from childcare, school, work, pregnant women, and babies until no longer infectious (after 5 days of treatment, or 3 weeks after onset of cough) and advise your public health unit immediately if your patient has high risk contacts (including infants and those who may transmit pertussis to them).

## Further Information:

- Contact your local public health unit on **1300 066 055**
- NSW pertussis website: [www.health.nsw.gov.au/protectnewborns](http://www.health.nsw.gov.au/protectnewborns)

Yours sincerely,

  
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