

# WHOOPING COUGH

(Pertussis)



## BASIC INFORMATION

### DESCRIPTION

A serious, contagious infection of the nose, throat, and lungs. Pertussis is the medical name for whooping cough. It can affect all ages, but most often occurs in children. Use of a vaccine has greatly reduced the occurrence of the disease.

### FREQUENT SIGNS AND SYMPTOMS

*Early stages:*

- Runny nose.
- Dry cough that leads to a cough with thick sputum.
- Slight fever.

*Late stages:*

- Severe, ongoing coughing bouts that last up to 1 minute. The face turns red or blue from lack of oxygen while coughing. At the end of each coughing effort, the person gasps for breath with a "whooping" sound.
- Vomiting and diarrhea.
- Little or no fever.

### CAUSES

*Bordetella pertussis* bacteria. Germs are spread by contact with an infected person, breathing in germs in the air, or touching an object with germs on it. The time from being exposed to the germs to having symptoms is about 7 to 10 days, and not more than 21 days.

### RISK INCREASES WITH

- Children who have not been immunized or have not completed the whole series of vaccine shots needed.
- The vaccine protection fades as children get older. Teens and adults can easily get the infection if exposed.
- A person who does not know they have the infection may spread the germs. This can happen during the first 21 days of their cough.

### PREVENTIVE MEASURES

- Pertussis vaccine starting in infancy is the best way.
- Adult forms of the vaccine are being tested.
- Keep infants away from anyone with a cough illness.

### EXPECTED OUTCOMES

Usually curable in about 6 weeks with treatment (may range from 3 weeks to 3 months). The usual course of illness is: 2 weeks with the cough; 2 weeks with bouts of the "whooping" cough; and 2 weeks for recovery. Some persistent coughs may continue for months.

### POSSIBLE COMPLICATIONS

- Children under age one are at high risk for complications. They are less likely in older children and adults.
- Complications include severe ear infection, nosebleeds, dehydration, pneumonia, convulsions, and in rare cases, brain damage and death.



## DIAGNOSIS & TREATMENT

### GENERAL MEASURES

- Your health care provider will do a physical exam. The diagnosis can be made based on the symptoms and knowing about contact with an infected person. Medical tests are usually done to confirm the diagnosis.
- Treatment depends on how severe the symptoms are.
- Severely ill infants will need hospital care.
- Children can usually be treated at home. They should get extra rest, drink plenty of fluids, take any prescribed drugs, and be watched for any complications.
- Keep an ill person at home and away from others when possible. Return to daycare, school, or work is permitted after taking antibiotics for five days. Without antibiotics, it will be 3 to 4 weeks after the start of symptoms.

### MEDICATIONS

- An antibiotic, most often erythromycin, is usually prescribed. If started early in the infection, it helps improve symptoms. It also reduces the risk of spreading germs.
- Close contacts of an infected person are usually prescribed antibiotics to help prevent the infection (even if they have had the vaccine).

### ACTIVITY

Resume normal activity after symptoms get better.

### DIET

- Drink extra fluids, such as fruit juice, tea, carbonated drinks, and clear soups.
- No special diet. Small, frequent meals may decrease vomiting.



## NOTIFY OUR OFFICE IF

- You or a family member has symptoms of whooping cough or has been exposed to anyone with it.
- Your child's coughing is severe.
- Vomiting persists more than 1 or 2 days.
- You are concerned about any symptoms that occur.

Special notes:

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More notes on the back of this page