

Whooping Cough (Pertussis)

Pertussis is an infection of the respiratory system caused by germs (bacteria). It causes severe coughing that can be followed by a high-pitched 'whooping' sound.

How Pertussis Spreads

Pertussis can spread from someone who already has it that coughs, sneezes, laughs, or talks close to you. It can also be spread by touching something with pertussis germs on it. Anyone, at any age, can carry these germs even if they don't look sick.

Pertussis is most common and severe in babies and children younger than 4 years old. It's more dangerous in the first 6 months of life. Children who have not had all their shots (vaccines) are at greater risk.

Signs and Symptoms

- Choking, gagging, or can't catch their breath while coughing
- Bluish color in the face while coughing (cyanosis)
- Pauses in breathing (apnea)
- Throwing up (vomiting) after coughing
- Coughing up large amounts of thick, stringy mucus
- Coughing more often at night or just after waking up
- Coughing spell that lasts over 1 minute

Stages of Pertussis

There are usually 3 stages to pertussis:

- Stage 1: For the first 2 to 7 days, your child will have symptoms of a cold, like a runny nose, sneezing, and a slight cough. There is little or no fever.

- Stage 2: The next 7 to 13 days is when the ‘whoop’ coughing may start. Some children may make choking sounds instead of whooping. This stage may last up to 6 weeks.
- Stage 3: Your child may cough or ‘whoop’ for weeks to months.

Prevention

- Pertussis can be prevented with these 2 vaccines:
 - **DTaP** (5 total doses)
 - 3 shots (doses) are recommended at ages 2, 4, and 6 months of age.
 - 1 dose is recommended between 15 to 18 months of age.
 - 1 dose is recommended again at 4 to 6 years of age.
 - **Tdap**
 - Is a booster shot for DTaP.
 - It is first given between 11 to 12 years of age. Then every 10 years after.
 - If you’re pregnant, you should get a Tdap shot with each pregnancy. This helps protect the baby some for the first 6 months of life.
- Stop the spread of germs by:
 - Teaching your child to cough or sneeze into a tissue or their elbow. Not their hand.
 - Teaching them to wash their hands with soap and water after coughing.
 - Disinfecting your child’s toys and other objects with soap and water or household disinfectant (Lysol® or Clorox®).
 - Not sharing drinking cups, forks, spoons, napkins, or other personal items.

When to Call 911

Call 911 for emergency help or go to the emergency room if your child:

- Stops breathing.
- Turns blue with coughing spells.
- Has a seizure.

Care at Home

- Stay with your child while they're coughing. Watch for more serious breathing problems and call 911 if needed.
- Keep a bulb syringe or NoseFrida[®] to remove mucus from the nose.
- For eating and drinking:
 - Give your child small amounts of food and drinks often.
 - Clear liquids are usually better to give than milk or formulas. Examples include water, Pedialyte[®], watered-down Gatorade[®], and clear soup broth.
 - Your child may eat better after coughing and spitting up some mucus.

Medicine Treatment

- Your child may be ordered (prescribed) an antibiotic to kill the pertussis germs. Always give your child the antibiotic exactly as prescribed.
 - Your child may seem better after a few days. Do not stop the antibiotic. Finish as prescribed by your child's doctor or health care provider.
 - Anyone living in the home must also take an antibiotic. This is usually prescribed by the same doctor or health care provider who saw your child.
 - Do not give your child cough or cold medicine without asking their doctor or health care provider. It will not help the cough and may be harmful.
- Your child's doctor or health care provider may suggest medicine to lower their fever, like acetaminophen (Tylenol[®]) or ibuprofen (Motrin[®] or Advil[®]).
- **DO NOT** give ibuprofen to children under 6 months of age.
- **DO NOT** give aspirin or products that contain aspirin to children of any age.

When to Call the Doctor

Call your child's doctor or health care provider if they have:

- A worsening cough (spells that last longer and happen more often) even after taking the prescribed antibiotic.

- A fever:

Child's Age	Where to Take	Temperature
3 months or younger	• Bottom (rectal)	100.4° F (38° C) or higher
3 months to 6 months	• Forehead (temporal) • Bottom	102° F (38.8° C) or higher
6 months to 3 years	• Armpit (axillary) • Bottom • Ear (tympanic) • Forehead	102° F (38.8° C) for more than 24 hours
4 years or older	• Mouth (oral) • Ear	102° F (38.8° C) for more than 3 days

Call for any age that has a fever of 104° F (40° C) or higher.

- Signs of not drinking enough (dehydration):
 - Dry or sticky mouth
 - No tears when crying
 - No peeing or wet diapers for more than 8 hours
 - Sunken soft spot (fontanel) for children under 18 months old
 - Very weak and difficult to wake up

Hospital Stays

Your child may have to be admitted to the hospital for extra treatment. This is rare. It's more common for children 6 months or younger because their lungs are not as developed. While in the hospital, your child may get extra oxygen, intravenous (IV) fluids, heart monitoring, and special isolation precautions.

Returning to School or Daycare

- Ask your child's doctor or health care provider when they can return to school or childcare.
- Children who don't take antibiotics must wait 21 days from when the cough started before returning to school.
- Tell the school or childcare that your child has pertussis and what symptoms to look for. Pertussis is a notifiable disease. This means the local health department must keep track of how many people have positive tests. Parents or caregivers do not have to report this themselves. Personal information is not tracked.