



Pertussis Advisory

September 12, 2016

This is to advise you that we have been notified of additional cases of pertussis among students who attend Cranston High School East. **Your child may have been exposed during the school year or while spending time with CHSE students over the summer.** You should be aware of the signs and symptoms of pertussis, know what to do if your child develops symptoms of pertussis, and when you should keep your child at home. If you contact your healthcare provider, please be sure to share this advisory with him or her.

Although the school year has ended, it is important to be attentive to possible symptoms and contact your health care provider if symptoms are observed, especially if your child is engaging in group activities during summer vacation, such as summer camp, college orientation, family gatherings, or going to work.

What parents need to do:

- **If your child *is* coughing**
 1. Call your child's doctor and ask to have your child checked and tested for pertussis.
 2. If your doctor says your child might have pertussis, keep your child home from all activities (e.g., work, summer school, day camps) until he/she has taken antibiotics for pertussis for five days in a row. After five days, your child can return to his/her activities even if the pertussis test results are not back yet.
 3. If your doctor says your child doesn't have pertussis, your child can go to his/her activities.
- **If your child *is not* coughing and has a weakened immune system and/or lives with a high-risk individual** (A high-risk individual is a baby who is younger than one year of age, any woman who is in the third trimester of pregnancy, or anyone with a weakened immune system.)
 1. Your child should get preventive antibiotics so he/she does not get sick and so he/she does not spread the illness to other people. To get a prescription for the preventive antibiotics, call your child's healthcare provider and tell him/her about this advisory.
 2. Your child does not need to stay home from activities.
- **If your child *is not* coughing, and does not have a weakened immune system, and does not live with a high-risk individual**
 1. Watch your child for symptoms of pertussis for three weeks. (See symptoms below.)
 2. Preventive antibiotics are not recommended for your child.
 3. Your child does not need to stay home from his/her activities.

About Pertussis

Pertussis is a bacterial infection that affects the lungs and a person's breathing. Pertussis is also called "whooping cough" because people who have pertussis can make a "whooping" sound when they cough.

- **Symptoms**
 - Pertussis usually starts with cold-like symptoms: coughing, sneezing, and a runny nose. The dry cough can last one to six weeks or more. The coughing fits can make it difficult for a person to breathe. It is often diagnosed after a cough lasts more than one or two weeks.
 - The cough is usually not harmful to adults and older children, but can be dangerous for babies. Sometimes, children have a hard time catching their breath and they will spit up, throw up, or be very tired after coughing. Infants might also have problems breathing or develop pneumonia, seizures, or brain damage.
- **How pertussis spreads**
 - Pertussis is spread when a person with pertussis sneezes, coughs, or breathes. The germs that

cause pertussis live in a sick person's nose, mouth, and throat and are in droplets of mucous or saliva. A person can get pertussis when droplets from the sick person get into their mouth, nose, or eyes.

- Pertussis can be passed to another person during the cold-like symptom stage until two weeks after coughing starts.
- If you are exposed to someone who has pertussis, you may have symptoms of pertussis in 7 to 10 days after being exposed. It can be as long as 21 days before you get sick.
- **Diagnosing pertussis**
 - A doctor may think a patient has pertussis based on his/her symptoms; however, a lab test is the only way to be sure. A culture is taken by swabbing the back of the nose and then sent to the lab for testing.
- **Pertussis Vaccine**
 - Make sure your child is up to date on his/her pertussis shots. The pertussis vaccine for infants and pre-school children is called DTaP, and the pertussis booster vaccine for adolescents and adults is called Tdap. (Both vaccines protect a person from pertussis, diphtheria, and tetanus.)
 - Tdap is required for all Rhode Island students entering Grade 7 because protection from the early childhood DTaP usually decreases in late childhood.
 - Pregnant women should get the Tdap vaccine during the third trimester of each pregnancy (after 27 weeks). If a pregnant woman does not get the pertussis vaccine while she is pregnant, then she should receive a dose of Tdap before leaving the birthing hospital
 - Pertussis is very harmful to babies, so everyone around the newborn needs to get a pertussis vaccination to help protect the baby.

Healthcare Provider Guidance and Recommendations

For an exposed child who presents with cough illness, with or without paroxysms, whoop, or post-tussive vomiting, and no alternative diagnosis:

- Collect nasopharyngeal swabs for pertussis PCR testing and culture. (Call the State Health Laboratories at 401-222-5600 if testing supplies are needed.)
- Treat the child with antibiotics appropriate for pertussis while waiting for laboratory results.
- Isolate the child until five days of antibiotic treatment has been completed.
- Report case to the Rhode Island Department of Health at 401-222-2577.
- Strongly consider antibiotic prophylaxis (prior to test results) for all household members who are immunocompromised, younger than 12 months of age, or in the third trimester of pregnancy.

**Note: If the child has been coughing for 21 days or longer, he/she is no longer infectious. Testing, treatment, and isolation are not necessary. Antibiotic prophylaxis is of limited value, but should be considered for household, high-risk contacts (immunocompromised, younger than 12 months, third trimester of pregnancy).*

For exposed child who presents without cough illness:

- Prescribe targeted antibiotic prophylaxis only if the child has a weakened immune system or a chronic condition, or if the child has a household member who is immunocompromised, younger than 12 months of age, or is in the third trimester of pregnancy.
- If antibiotic prophylaxis is not indicated, parent should watch for symptoms and return if symptoms develop.

For all exposed children:

- Review vaccine records.
- Give Tdap vaccine to a child age 11 or older who has not been previously vaccinated with Tdap.
- Give age-appropriate vaccination(s) to a child age 11 or younger, according to the current schedule.
- Antibiotic treatment and/or prophylaxis can be done at the same time as vaccination.

Clinical and laboratory guidance:

<http://health.ri.gov/publications/guidelines/treatmentmanagementandreporting/Pertussis.pdf> or
<http://www.cdc.gov/pertussis>.

If you have any questions, please contact your child's health care provider or the Rhode Island Department of Health at (401) 222-2577.