Pertussis Information for School Health Personnel:

All schools should report suspected or confirmed **pertussis cases immediately to CCPH**.

Introduction

Pertussis, a respiratory illness commonly known as whooping cough, is a very contagious disease caused by a toxin-producing bacterium called *Bordetella pertussis*. Pertussis is characterized by intermittent spasms of severe cough often lasting several weeks. Pertussis is a common disease in the United States, with reported peaks in disease every 3 to 5 years and frequent outbreaks.

Mode of Transmission

Pertussis is a very contagious disease only found in humans that is spread from person to person. Pertussis is usually spread by coughing or sneezing or when spending a lot of time near one another where you share a breathing space. Many babies who get pertussis are infected by older siblings, parents, or caregivers who might not even know they have the disease. The precise duration and intensity of exposure needed to cause infection is unclear. An hour or more in a confined space with a contagious individual is considered a significant exposure.

Incubation Period

7-10 days (up to 3 wks)

Symptoms: 3 phases

Catarrhal (1-2 wks): mild upper respiratory symptoms.
Paroxysmal (1-6 wks): spasms of cough end with a gasp, whoop, or vomiting.
Convalescent (2-6 wks): gradual resolution of paroxysmal coughing.

Duration of Illness

6 weeks or longer

Length of Infectiousness

Persons with pertussis are most infectious during the first 2 weeks after cough onset (catarrhal phase), but may continue for longer if untreated. Therefore, cases are considered contagious from symptom onset to 21 or more days after the start of the paroxysmal cough or until completion of appropriate antibiotic therapy.

Treatment

Pertussis is generally treated with a 5-day course of antibiotics. Early treatment is important and can help prevent spreading the disease to close contacts. Close contacts should also receive post-exposure prophylaxis (the same 5-day course of antibiotics used to treat cases of pertussis).

Diagnosis

To test for pertussis, the nasal passage is swabbed. The material on the swab is then examined in the lab for the presence of the pertussis bacteria. Only persons with symptoms of pertussis should be tested.

Immunity

The duration of immunity after natural infection with *B. pertussis* ranges widely from 4-20 years, but does wane over time. The best way to prevent pertussis among babies, children, teens, and adults is to get vaccinated. There are two acellular pertussis vaccines (DTaP & Tdap) recommended in the United States as part of the child and adolescent vaccination series. While immunity from both the DTaP & Tdap series declines over time, vaccination is still our best tool to provide protection against pertussis.

When to report to Clark County Public Health (CCPH)

Schools are required to report the presence of a contagious disease at the facility to their local health jurisdiction per Washington Administrative Code (WAC) 246-110-020.

Clark County Schools are required to report the following:

- Laboratory confirmed or provider diagnosed cases of pertussis.

Note: *Cases of B. parapertussis do not need to be reported to CCPH. B. pertussis and B. parapertussis are not the same bacteria. B. parapertussis is a less common, non-reportable infection. It does not produce the toxin that causes the damage to the respiratory system and therefore generally causes milder symptoms than pertussis.*

All schools should immediately report suspect and/or confirmed cases of pertussis to the CD Program at (360) 397-8182.

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What to do before you have pertussis in your school
Schools should have policies and procedures in place for: ❑ Tracking the number of individual cases of pertussis in each school setting. ❑ Excluding staff or students with pertussis. See the Infectious Disease Control Guide for School Staff. ❑ Managing staff and student vaccination records. CCPH recommends School District Human Resource Departments maintain vaccine records for all of the district staff and School Health Services maintain vaccine records for all student enrollments. ❑ Implementing notification system for sending parent letters and FAQ sheets. ❑ Communicating with students/families and faculty/staff the importance of being up to date on their recommended vaccines to reduce the risk of illness and absence due to pertussis.
What to do when you have pertussis in your school
❑ Exclude case from school until they have finished a 5 day course of antibiotic therapy. ❑ For confirmed cases, distribute a notification letter and FAQ sheet to groups (e.g. classroom, grade level, whole school) about a possible exposure. If you have questions regarding appropriate audiences for distribution of letters and FAQ's, please call CCPH Communicable Disease at (360) 397-8182. A notification letter template is available at: https://www.clark.wa.gov/public-health/resources ❑ Close contacts of pertussis cases that are asymptomatic and being treated with prophylactic antibiotics do not need to be excluded from school during the course of their antibiotic treatment. ❑ In situations of pertussis outbreaks, consider sending repeated letters every 45 days to exposed groups or posting pertussis information on your school website. ❑ School nurses seeing an increased number of students with a cough illness during a pertussis outbreak should consider using the *Cough Illness Screening Tool* to facilitate communication with families and providers. ❑ Because *B. pertussis* is especially dangerous for infants, be sure to provide pregnant staff members, staff with pregnant spouses, or pregnant students' information about possible exposures. Including information on the importance of receiving a Tdap booster during the third trimester of pregnancy. ❑ Reinforce cough etiquette education and hand hygiene education to reduce the spread of illness in the school.
After an Outbreak
❑ Evaluate your school's response. ❑ Develop action plans to address any identified areas of concern regarding school's readiness and response. ❑ Don't hesitate to use CCPH as a resource for reviewing outbreak response or supporting training needs.

For additional information visit:

- https://www.clark.wa.gov/public-health/resources for resources, tools and templates.
- http://www.cdc.gov/chickenpox/about/index.html