

# Pertussis is on the Rise

Think, Test, Treat,  
Tell, and Terminate  
Transmission

Source: CDC



Van Buren/Cass District  
Health Department

## Think Pertussis

- In contacts to pertussis that have a cough of any duration
- Those with a paroxysmal cough of any duration
- Those with a cough that have inspiratory whooping, post-tussive vomiting, gagging, or syncope, and/or apnea
- Those with a cough lasting more than 10 days with no other known cause

If you do think pertussis: Use [droplet precautions](#) and isolate patient if possible.

## Test for Pertussis

- Obtain a nasopharyngeal (NP) swab or aspirate for PCR testing. For more information, see <https://www.cdc.gov/pertussis/php/laboratories>.

## Treat Pertussis

- Start antimicrobial therapy right away if the clinical history is suggestive of pertussis or the patient is at high risk of severe or complicated disease
- Azithromycin is the appropriate first-line choice for treatment and for post-exposure prophylaxis (PEP)

## Tell Public Health about Pertussis

- Report any suspected and confirmed cases of pertussis to the local health department. Find contact information for your local health department at [www.malph.org/resources/directory](http://www.malph.org/resources/directory).

## Terminate the Transmission of Pertussis

- Confirmed and suspected cases should isolate from others until completing at least 5 days of antibiotics or for 3 weeks after onset of cough, whichever comes first.
- Judicious use of [antimicrobial post-exposure prophylaxis \(PEP\)](#), regardless of immunization status, is recommended for the following asymptomatic individuals when exposed to a case pertussis within the first 21 days of cough:
  - Household contacts of a pertussis case
  - People at high risk of developing severe pertussis infection (infants, people with health conditions that may be exacerbated by a pertussis infection)
  - Those who will have contact with people at high risk of developing severe pertussis infection (pregnant women in the third trimester, those that work in high-risk settings [i.e., NICU, childcare settings, maternity wards])
- Close contacts who are unimmunized or under immunized should have pertussis immunization initiated or continued as soon as possible.

**Note:** The health department may refer identified contacts in need of PEP to their healthcare provider for prescription and appreciate your collaboration.