INFORMATION FOR SCHOOLS WITH A CASE OF WHOOPING COUGH (PERTUSSIS)

This information sheet is for schools that have been informed by a parent or health professional that a child attending the school has whooping cough.

Auckland is currently experiencing an outbreak of whooping cough which is now widespread in the community. Whooping cough is most serious for young children, especially those under 12 months.

Auckland Regional Public Health Service (ARPHS) can no longer contact all schools directly if a case has been identified at the school. We ask that you take action should a case come to your attention. We have created these guidelines and an array of resources to assist you to limit the spread of whooping cough through your school, provide advice to parents, and help protect those most at risk of developing whooping cough. If you have any questions please do not hesitate to contact Auckland Regional Public Health Service on the number at the end of these guidelines.

Identification of Children with Whooping Cough at School

By a Parent or Health Professional

- If informed by a parent or health professional, the unwell child should be considered a case of whooping cough even in the absence of laboratory confirmation of the diagnosis
- This child should have been notified to ARPHS
- This child MUST be excluded from school as described below

By a Staff Member

- Any child with the following symptoms should be sent home with a parent with the advice to see their GP for assessment for whooping cough before returning to school:
  - a cough that has lasted for more than two weeks
  - a cough that ends in a whooping noise, gagging, or vomiting, that disturbs sleep, or that causes any breathing difficulties
- Keep unwell children separate from others until they can be collected from school

Exclusion of Children with Whooping Cough from School

Children with whooping cough are to be excluded from school in accordance with the Health (Infectious and Notifiable Diseases) Regulations 1966 in order to limit the spread of infection.

- Children with whooping cough are infectious from the time they first become unwell until three weeks after the bad coughing attacks start
- Exclude children with whooping cough from school:
  - for three weeks from the start of the bad coughing attacks if they are not taking antibiotics
  - or until they have completed at least five days of the course of antibiotics
- Children who have had at least 5 days of antibiotics are no longer infectious although they will still cough. To stop whooping cough returning, they must complete all the antibiotics prescribed.

Other Children/Staff who were Exposed to Whooping Cough at School (Contacts)

- Anyone who is exposed can get whooping cough because immunity (protection) to whooping cough decreases over time even if you have been immunised or have had whooping cough infection before
Generally a person needs to be in close contact with someone with whooping cough – this means face to face contact for more than one hour while that person was infectious.

**Antibiotic Recommendations**

- A course of antibiotics (chemoprophylaxis) after exposure reduces the risk of a person catching whooping cough.
- Antibiotics are not 100% effective for preventing whooping cough but are strongly recommended for close contacts who are at greatest risk of severe disease or who may put others at risk:
  - Children under 12 months, unimmunised or partially immunised children under 5 years, pregnant women, those over 65 years, anyone with a chronic illness or weak immune system.
  - Anyone who lives or works with babies, young children, pregnant women in their third trimester or sick people (e.g. early childhood education workers, nurses, midwives, doctors).
- For more information about taking antibiotics, parents/staff should see their GP.

**Exclusion of Contacts from School**

- ARPHS is NOT currently recommending exclusion of well contacts from school.
- **Close contacts who are now unwell** – any close contact of the child with whooping cough who is now unwell with a runny nose, fever, or cough should be sent home, even if they are immunised. These children/staff should be assessed by their GP before they return to school.

**Advise Parents and Staff**

- Inform all parents and staff that there has been a child with whooping cough at the school. You may like to copy and use the following text in your school newsletter:

Auckland is experiencing a large outbreak of whooping cough. There have been X cases of whooping cough at the school this week. A letter has been sent home with children who were in close contact with a child with whooping cough.

Whooping cough is a highly infectious bacterial disease that spreads easily by coughing and sneezing. It commonly causes bouts of severe coughing that can disturb sleep and can last for up to 3 months. It is especially severe in young infants under 12 months old, who often require hospital admission and who occasionally die. Anyone can get whooping cough because protection (immunity) after immunisation or natural infection decreases over 4-6 years.

**Key messages for parents from Auckland Regional Public Health (ARPHS)**

- Ensure your children are up to date with their immunisations to best protect them.
- If you have a young child at home (under 12 months) or are pregnant consider being immunised. This should be discussed with your GP or Practice Nurse.
- Teach children to cover coughs, and to wash and dry their hands well.
- Keep coughs away from young babies.

For more information about whooping cough see the ARPHS website [www.arphs.govt.nz](http://www.arphs.govt.nz), phone Healthline on 0800 611 116 or visit your family doctor. For immunisation information, phone the Immunisation Advisory Centre on 0800 IMMUNE (0800 466 863) or visit their website [www.immune.org.nz](http://www.immune.org.nz).
Inform any children/staff who were close contacts that extra precautions are recommended in some situations. Close contacts of a child with whooping cough will generally be the children and teacher in the child’s class and any of the child’s close friends. A template letter with more detailed recommendations for close contacts is available for your use from the ARPHS website here.

Other resources that you can print out and provide parents/staff are available from the ARPHS website (www.arphs.govt.nz) these include:
- Whooping cough fact sheet
- Information for people with whooping cough
- Information for contacts of people with whooping cough

Other Actions your School can Take

1. Primary Schools can ensure that their Immunisation Register is up to date: In the event of further cases at the school you may be advised to exclude unimmunised / incompletely immunised children. Keeping an immunisation register is a legal requirement and will help staff identify and exclude children as necessary.

2. Encourage Immunisation: Immunisation is the best means of protection. Encourage parents of children who are not up-to-date with their immunisations to discuss this with their GP or practice nurse, particularly the 4 and 11 year old booster immunisations. Immunisation is recommended in pregnancy and helps protect both mother and the baby. Adults, including staff, can also be immunised against whooping cough. Immunisation during childhood is free, however adult immunisation is not.

3. Promote cough etiquette: Use tissues to cover coughs and sneezes and throw the tissue away in the bin afterwards.

4. Hand washing: Encourage frequent hand washing with soap and warm water for 20 seconds followed by drying for 20 seconds with a clean dry towel.

What is Whooping Cough

- Whooping cough (pertussis) is a bacterial infection that usually starts with a runny nose, fever, and dry cough – not unlike a cold
- Whooping cough spreads very easily through coughing and sneezing. One person with whooping cough will pass it on to an average of 15 other people
- The cough gradually gets worse and last for weeks, often developing into long coughing attacks that can last for up to three months
- In babies and young children, coughing attacks often end with a ‘whoop’ sound at the intake of breath, or with vomiting or gagging. The cough is often worse at night and disturbs sleep.
- Babies with whooping cough can turn blue or stop breathing altogether – if this happens see a doctor immediately
- The disease is usually milder in teenagers and adults, however some will get pneumonia, and severe coughing can cause sleep disturbance, incontinence, vomiting, and broken ribs
Who is most at risk?

- **Infants under 12 months old**, especially those under 6 months old, have the highest risk of severe disease
  - For every 100 infants under 12 months old with whooping cough, around 70 will be hospitalised, seven will require intensive care and there is a small but real risk of permanent medical complications or death
  - Delay in getting immunised against whooping cough at 6 weeks, 3 months, or 5 months increases the risk of being hospitalised with whooping cough by 4-5 times in the first year of life
  - 80% of infants catch whooping cough from a parent, caregiver, or older brother or sister

- **Pregnant women**: Whooping cough in pregnancy is not dangerous for the mother or infant unless the mother is still infectious when the baby is born. Treatment after exposure to whooping cough is recommended for women in their third trimester of pregnancy to reduce the risk to their newborn.

- **People with a chronic illness, weak immune system, or aged over 65 years** have an increased risk of complications if they get whooping cough, especially of pneumonia

For more information visit the Auckland Regional Public Health Service website ([www.arphs.govt.nz](http://www.arphs.govt.nz)) or call on (09) 623 4600