INFORMATION FOR PEOPLE WHO HAVE BEEN IN CONTACT WITH SOMEONE WITH WHOOPING COUGH (PERTUSSIS)

You have been in recent contact with someone with infectious whooping cough. This will provide you with some important information that you need to know. Please visit your family doctor (GP) or visit the ARPHS website (www.arphs.govt.nz) if you have any further questions.

WHAT SHOULD CONTACTS OF WHOOPING COUGH DO?

Watch for Signs of Whooping Cough

- See your family doctor as soon as you begin to feel unwell. Treatment early in the illness works best. Tell your doctor that you have been in contact with someone who has whooping cough.
- The early signs of whooping cough include a runny nose, fever, or cough that is often worse at night and gets worse over time turning into long coughing bouts that may end in gagging or vomiting.
- Stay away from babies, children under 12 months, and pregnant women if you become unwell until you have seen your family doctor.
- If three weeks have passed since you were last exposed to someone who was infectious and you have not become unwell, then it is unlikely you will get whooping cough from this exposure. Most people begin to feel unwell 7-10 days after exposure.

Antibiotics

- A 5 day course of azithromycin (antibiotic) may decrease the risk of you getting whooping cough from this exposure.
- Antibiotics are not 100% effective for preventing whooping cough but are strongly recommended for those 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 in the third trimester, and anyone with a chronic illness or weak immune system
  - Anyone who lives or works with babies, young children, pregnant women or sick people (e.g. early childhood education workers, nurses, midwives, doctors)
- Your GP may recommend you take antibiotics and that you stay at home until you have completed at least five days of antibiotics if you live or work with others who are at risk of severe disease.

HOW CAN I PROTECT MYSELF AND OTHERS FROM WHOOPING COUGH

Immunisation offers the best protection against whooping cough during the current epidemic. It is never too late to be immunised. Important things to know about whooping cough immunisation:

- On-time immunisation at six weeks, three months, and five months is free from your family doctor and offers the best protection against whooping cough during the first year of life.
- Booster immunisation at four years and 11 years is free from your family doctors and protects your child during their school years. Check all of your children are up-to-date.
- Immunisation in pregnancy is free from your family doctor and should be given at 7 months of pregnancy. This will provide protection to the mother and her infant until baby is old enough to start their immunisations at six weeks. For more information speak to your GP or look on the ARPHS website at www.arphs.govt.nz
**Adult immunisation:** Whooping cough immunisation is available from GPs and some workplaces, although there may be a cost. It is especially recommended for:
- Healthcare workers who work with/around infants or immuno-compromised individuals (may be funded by some employers) e.g. midwives, neonatal nurses/doctors, practice nurses.
- Household and family contacts of newborns (including older children under 7 years and adults)
- Early childhood service workers

**Other things you can do to protect others from whooping cough**
- Encourage your friends and whānau to be immunised, especially during childhood and pregnancy
- See a doctor without delay if you think you have whooping cough
- Cover coughs and sneezes, and keep away from babies and young children if you are coughing

**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. The cough gradually gets worse and last for weeks, often developing into long coughing attacks that can last for up to 10 weeks
- In babies and young children, coughing attacks often end with a ‘whoop’ sound, 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 can get whooping cough?**
- Anyone who is exposed can get whooping cough because immunity (protection) decreases over time even if you have been immunised or have had the infection before.
- Whooping cough spreads very easily from person to person through coughing and sneezing.
- Someone with whooping cough can pass it on to others for 3-4 weeks after they first begin to feel unwell with cold-like symptoms. They stop being infectious after at least five days of a course of antibiotics, although they may still cough.

**Who is most at risk from whooping cough?**
- **Infants under 12 months old** have the highest risk of severe disease. For every 100 infants with whooping cough, around 70 will be hospitalised, seven will require intensive care and there is a small but real risk of permanent complications or death.
- **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. Antibiotics after exposure to whooping cough is recommended for women in their third trimester to protect 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.