To: Buncombe County Medical Providers  
From: Dr. Jennifer Mullendore, Medical Director  
Date: April 14, 2014  
RE: Health Alert: Pertussis

We continue to see an **increase in confirmed pertussis cases in Buncombe County so far this year.**

- Most of these cases of pertussis have been in children, many of whom have been unvaccinated.
- **Number of Cases of Confirmed Pertussis in Buncombe County by Month, 2014 (*as of 4/14/14*)**

<table>
<thead>
<tr>
<th>Month</th>
<th># of confirmed cases of pertussis</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>2</td>
</tr>
<tr>
<td>February</td>
<td>3</td>
</tr>
<tr>
<td>March</td>
<td>8</td>
</tr>
<tr>
<td>April 1st-14th</td>
<td>2</td>
</tr>
<tr>
<td>Total*</td>
<td>15</td>
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</tbody>
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**There were a total of 19 cases in all of 2013.**

- **Per NC law, you must contact the Disease Control staff of your local health department **within 24 hours** if you **SUSPECT** someone of having pertussis.**
  - By doing so, you help us prevent the spread of pertussis in our community.
  - **Bottom line: If you suspect pertussis enough to test or treat for it, you need to call the Health Department!**
    - For Buncombe County Disease Control: call 250-5109, available 24/7
- **Please remember to tell those patients you suspect or know to have pertussis to stay home under respiratory isolation (no work, no school, no extracurricular activities, no grocery shopping, etc.) until they finish their course of antibiotics.**

-MORE-
Most importantly, they should **stay away from unvaccinated infants and all pregnant women in their 3rd trimester.**

Please also continue to **encourage vaccination of your patients with Tdap**, including pregnant women in their 3rd trimester.

If you are unable to provide your patients Tdap in your office, please send them to the Buncombe County Department of Health’s Immunization Clinic (40 Coxe Ave., Monday-Friday, 8am-5pm, no appointment necessary).

**Symptoms of pertussis:** Persons with the following symptoms should be **suspected of having pertussis:**

- **Cough** lasting for >2 weeks **PLUS** 1 of the following
  - **paroxysms** (violent fits of coughing)
  - **inspiratory whooping**
  - **post-tussive vomiting**
- Keep in mind that infants <6 months of age, partially vaccinated children, adolescents and adults frequently do **not** have the characteristic whoop.

**Testing for pertussis:** All persons suspected of having pertussis should have the following 2 tests:

1. **Culture** of nasopharyngeal secretions for pertussis **AND**
2. **PCR** testing of nasopharyngeal secretions for pertussis

**Incubation period:** commonly 7-10 days

**Communicability:** Highly contagious in the first 2 wks; negligible by 3 weeks.

- Patients are no longer contagious after 5 days of treatment with appropriate antibiotics.

**Treatment:** **Azithromycin** (x 5 days), **clarithromycin** (x 7 days) or **erythromycin** (x 14 days) to shorten the period of communicability.

- **Respiratory isolation of suspected or known cases until antibiotic course is completed.**
- Suspected or known cases should stay away from infants & young children, especially unvaccinated infants, until they have completed 5 days of appropriate antibiotics.
- **Suspected cases who do not receive antibiotics should be isolated for 3 weeks after the onset of cough or until the end of the cough, whichever comes first.**

**Prevention:** Encourage **vaccination** against pertussis in all your patients who are not up-to-date!

- All contacts to a pertussis case should have their immunization status verified and brought up-to-date.

-MORE-
Vaccination against pertussis following recent exposure is **not** effective against infection but is recommended to protect the person against further exposure in case he/she has not been infected.

**Let me or the Disease Control staff know if you have any questions regarding pertussis or any other communicable disease issue.**

Thanks for your help,

Jenni

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