



PERTUSSIS (WHOOPIING COUGH)

Whooping cough is another name for pertussis (per-TUSS-iss). It is an infection of the respiratory tract caused by bacteria. The bacteria are easily spread by breathing in droplets from an infected person who coughs or sneezes. It can occur at any age, but is most common and severe in infants and children younger than 4 who have not been immunized (had their "baby shots"). Adults may not be immune to pertussis. They can be infected if they have contact with a child who has the disease. Adults can also be carriers. They do not have the symptoms but are able to infect others.

SYMPTOMS OF PERTUSSIS

- **Cold-like symptoms** - These usually occur first. There is little or no fever.
- **Coughing spells** begin about the second week of the illness. It is called "whooping cough" because the coughing spells may end with a "whoop" sound. (Not all children do this.) Instead of the "whoop", some children make choking sounds. The coughing spells last 2 to 6 weeks, but the child may still have a cough or "whoop" from time to time for a year afterwards.
- The child will probably cough up large amounts of thick, stringy mucus after the coughing spell is over. Vomiting is also common during and after the coughing spell.
- Some children have up to 50 coughing spells a day. The spells may be brought on by eating, drinking, yawning, sneezing, or breathing in cold air. They can occur at any time.



Picture 1 Holding the child in this position will help remove the mucus.

WHAT YOU MAY SEE

During the coughing spell, your child will seem to be choking, gagging, or not able to catch his breath. His face may be red or bluish in color. Very young children may have a pause in breathing (apnea) as the main symptom. Skin color may get dusky or blue.

WHAT TO DO

1. Pertussis is often scary for both the child and the parent. Try to stay calm.
2. Stay with your child during the coughing spell.
3. Place your child on his tummy with his face turned to the side. The head should be slightly lower than his abdomen (Picture 1). This helps the child cough up the mucus without choking on it.
4. Keep a bulb syringe ready to remove the mucus. Refer to the Helping Hand HH-II-24, *Suctioning the Nose with a Bulb Syringe*.
5. Give your child small amounts of liquids often. Clear liquids are usually better to give than milk or formulas. Some examples of clear liquids are 7-Up, Pedialyte®, Hi-C, Popsicles, flavored gelatin, and clear broth. Often your child will eat better after coughing and spitting up the mucus.

WHEN TO GET EMERGENCY HELP

Call 911 or take your child to the Emergency Room if:

- Your child stops breathing.
- Your child turns blue with coughing spells.

WHEN TO CALL THE DOCTOR

Call your child's doctor if your child has:

- Coughing spells that last longer and happen more often.
- Fever over 100.4°F
- Decreased appetite.
- Trouble drinking liquids or keeping fluids down.

TREATMENT AND PREVENTION

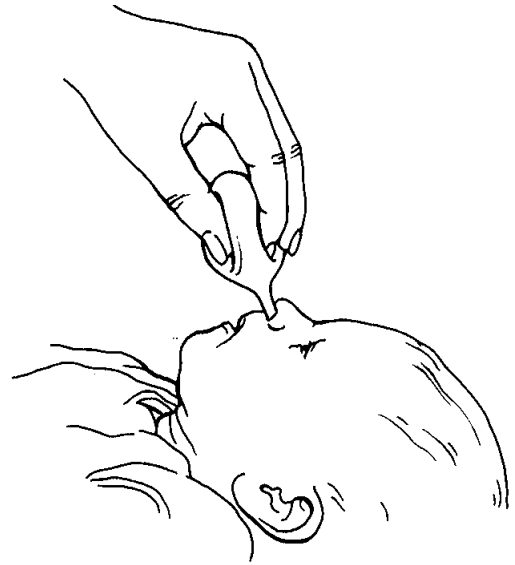
Your child's doctor should prescribe an antibiotic. **It is important to start the medicine right away and give it for the prescribed number of days, even if your child seems better.**

- Anyone who has had direct contact with the child may need to be treated to prevent infection.
- Pertussis can be prevented by immunizing babies with the DTaP vaccine. Your doctor can talk with you about this.

WHAT TO EXPECT IF YOUR CHILD IS HOSPITALIZED

- The doctor will order a test done on mucous gathered from the back of your child's nose. This is done by placing a small cotton-tipped swab into the back of the nose.
- At first, your child will be in Droplet Precautions. This means you will need to wear a mask when having close contact with your child.
- Your child may be given extra oxygen to help him breathe easier.
- A heart monitor may be attached to your child because sometimes a child's pulse may lower during a coughing spell.
- Your child will be given liquids through an IV if he is vomiting or not taking liquids well by mouth.
- A nurse or nurse assistant will check on your child often.

If you have any questions, be sure to ask your doctor or nurse, or call _____.



Picture 2 Keep a bulb syringe ready to remove mucus.