PERTUSSIS

Pertussis, or Whooping Cough, is sometimes referred to as the 100-day cough because of how long the cough can linger. Despite a vaccine being available (Tdap) there are still an estimated 16 million cases of Pertussis diagnosed each year and approximately 195,000 deaths world-wide (cdc.gov).

What is it: **caused** by an infection with a bacterium known as Bordetella pertussis. The bacteria attach to the lining of the airways in the upper respiratory system where it releases toxins that lead to inflammation and swelling.

Who is at risk: Teens and adults are susceptible to the infection during an outbreak because it is thought that the vaccine received as a child eventually wears off. Those 6 months and younger are at risk because children are not fully immune to whooping cough until they've received at least 3 shots.

Contagious: Spread by direct contact with fluids from an infected persons nose or mouth, such as when coughing or sneezing, many people spread the bacterial infection before even knowing they are infected. Pertussis can be spread from the onset of symptoms, which can be as short as 7 to 10 days or as long as 3 weeks. With antibiotic therapy, this contagious period is reduced to about 5 days.

Symptoms: At first, whooping cough has the same symptoms as the average cold. Sneezing, mild cough, nasal drainage and low grade fever. In the second stage, the cough worsens and the patient experiences coughing spasms and will produce a thick mucus like sputum. It is during this stage that the person develops the characteristic "whoop" sound at the end of the coughing spells. This stage can last two to six weeks before the cough gradually begins to lessen.

The third stage, or convalescent stage, lasts for another two to three weeks. This stage is a recovery phase where the cough is less frequent and the patient can seem asymptomatic when not coughing.

How is it diagnosed: Several types of laboratory tests are commonly used for the diagnosis of Bordetella pertussis. Culture is considered the gold standard because it is the only 100% specific method for identification.

Complications: Young infants less than 6 months old are at highest risk for whooping cough and its complications which can include pneumonia, seizures, encephalopathy and dehydration.

Treatment: Pertussis is generally treated with antibiotics and early treatment is very important. Other home care can include the use of a cool mist vaporizer, pushing fluids, encouraging small frequent meals and practicing good handwashing.

Did you know? Immunity to the bacteria starts to wane decreases after five to 10 years following administration of the vaccine. It is now recommended that older children, adolescents and adults need re-vaccinated.

Because many patients calling will not know they have been exposed to Whooping Cough, it is important for the Triage Nurse to recognize the symptoms and be familiar with the characteristic cough

that accompanies Pertussis. While nurses do not diagnose, by knowing the symptoms and cough she can guide the patient to the correct level of care and give appropriate care advice.

Source/s:

www.webmd.com

www.mayoclinic.com

www.medlineplus.gov