Protect your child from Pertussis

What is pertussis?

Pertussis, or whooping cough, is a serious respiratory illness caused by a type of bacteria called *Bordetella pertussis*. Early symptoms of pertussis are similar to a common cold, including runny or stuffy nose, fever, or mild cough. However, a week or two later, uncontrollable, violent coughing may occur and last for weeks. A high-pitched "whoop" noise may be heard when someone with pertussis gasps for air after a coughing fit. Babies may not cough at all, but instead have trouble breathing. They can experience life-threatening pauses in breathing, called apnea, which may also cause their lips and skin to turn blue.

Why does my child need protection against pertussis?

Pertussis often causes serious complications in infants and young children, including pneumonia (lung infection), seizures, encephalopathy (brain damage) or death. Sadly, 1 in 100 infants with pertussis will die from their complications. Other complications can include ear infections, as well as dehydration and weight loss from difficulty eating or drinking due to coughing fits. About 1 in 3 infants who get pertussis will need to be hospitalized for treatment or to receive supportive care, like oxygen or intravenous (IV) fluids.

What are DTaP and Tdap?

DTaP and Tdap are vaccines that protect against diphtheria, tetanus, and pertussis. Children are recommended to get DTaP at 2 months, 4 months, 6 months, 15-18 months, and 4-6 years of age. Booster doses of Tdap are recommended for adolescents 11-18 years of age, and every 10 years for adults. Pregnant women should receive a dose of Tdap between 27 and 36 weeks of each pregnancy. Antibodies from the pregnant woman are passed to the infant before birth, providing critical short-term protection until they are old enough to be vaccinated. Additionally, vaccinating the mother and those around an infant reduces the risk of spreading pertussis to the infant before they are fully protected.

Are they safe?

DTaP and Tdap vaccines are safe. Side effects of the vaccines occur infrequently, but most commonly include soreness or swelling at the injection site, feeling tired, fussiness or fever.

Are they effective?

DTaP and Tdap are very effective, but their protection decreases over time, which is why children need multiple doses to ensure prolonged protection throughout their childhood and why adults need boosters. When children receive all 5 doses of DTaP on schedule, the vaccine is 98% effective at preventing pertussis within the year following the last dose of DTaP and 71% effective within 5 years. When Tdap is given during pregnancy, the vaccine prevents about 78% of pertussis cases and 90% of hospitalizations in infants younger than 2 months of age.

If you have any questions about pertussis or the DTaP and Tdap vaccines, please talk to your child's doctor.

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