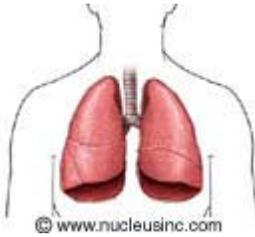




PATIENT EDUCATION HANDOUTS

Whooping Cough (Pertussis)

Topic Overview



What is whooping cough?

Whooping cough (pertussis) is a highly contagious bacterial infection of the upper [respiratory system](#)—specifically, the area where the nasal passages meet the back of the throat (nasopharynx). The infection causes irritation in breathing passages, resulting in severe coughing spells. The illness can have three distinct stages and can last months.

Complications like [pneumonia](#) can result from whooping cough. These kinds of problems can be very serious in young children, especially babies who are born early or who have not been [immunized](#). Older adults are also more likely than other people to have problems caused by whooping cough.

What causes whooping cough?

Whooping cough is caused by infection with *Bordetella pertussis* or *B. parapertussis* bacteria. The infection easily spreads from person to person through respiratory secretions or [mucus](#), which can be emitted during coughing or sneezing. The [incubation period](#) is about 7 to 14 days, meaning that symptoms start about 1 to 2 weeks after exposure to the bacteria.

Getting immunized helps prevent whooping cough infection and the spread of the disease. The whooping cough vaccine is recommended for children, adolescents, and adults. Routine immunization especially helps babies, older adults, and others who are at high risk for problems caused by whooping cough. Caregivers who never got immunized—and may not even know that they have the illness—can spread whooping cough to babies and other people who aren't immunized.

You can get whooping cough more than once. After being immunized or after recovering from whooping cough infection, you are temporarily protected from getting a severe form of the disease again. But this protection does not last. You can get another whooping cough infection years later. You can reduce your risk of infection by getting the recommended booster shot with the pertussis vaccine.

What are the symptoms?

Symptoms of whooping cough typically last 6 to 10 weeks (but may last longer) and can occur in three stages.

- Stage 1: Coldlike symptoms—such as sneezing, runny nose, mild coughing, watery eyes, and sometimes a mild fever—last from several days to 2 weeks. An infected person is most contagious during this stage.
- Stage 2: Coldlike symptoms fade, but the cough gets worse. It changes from a dry, hacking cough to bursts of

uncontrollable, often violent coughing. During a coughing episode, it may be temporarily impossible to take a breath because of the intensity and repetition of coughs. When finally able to breathe, the person may take in a sudden gasp of air through airways narrowed by inflammation, and this sometimes causes a whooping noise. Vomiting and severe exhaustion often follow a coughing spell. But between coughing episodes, the infected person often appears normal. This is the most serious stage of whooping cough, usually lasting from 2 to 4 weeks or longer.

- Stage 3: Although the person improves and gains strength, the cough may become louder and sound worse. Coughing spells may occur off and on for weeks to months and may flare up if a cold or other upper respiratory illness develops. This final stage may last longer in people who have never received the whooping cough vaccine.

Healthy adults who become infected with whooping cough often have a much milder form of the illness compared with children. But adults ages 60 and older are at increased risk of having severe symptoms and developing complications. The severity of symptoms is, in part, influenced by whether a person was immunized against whooping cough and how long ago the immunization was given. The protection against whooping cough provided by the vaccine wears off over time.

How is whooping cough diagnosed?

A person with whooping cough may appear normal between coughing episodes, which often delays a diagnosis or makes it more difficult. But a doctor may suspect whooping cough during an exam when symptoms are present and recent cases have been reported in the community. Sometimes other coughing illnesses, such as the common cold or bronchitis, have specific symptoms that can distinguish them from whooping cough, such as a high fever, a sore throat, or wheezing.

Blood tests or X-rays may be done to rule out other diseases or conditions. A doctor may also collect mucus from the nasopharynx and have it tested for specific types of bacteria that cause whooping cough. Lab results may not be available for up to 10 to 14 days. If whooping cough is suspected, treatment will be started before the lab results are available.

How is it treated?

Whooping cough is treated with [antibiotics](#), primarily to help reduce the spread of infection. If given during the very early stage of the illness, antibiotics may help shorten the illness. [Over-the-counter](#) medicines have not been shown to help relieve symptoms, but other measures, such as a cool-air humidifier, may help reduce discomfort.

Can it be prevented?

You can prevent whooping cough infection or reduce its severity in your child by keeping immunizations up to date. The routine immunizations DTaP (for children) and Tdap (for adolescents and adults) protect against whooping cough. It is also helpful to wash your hands frequently and keep children away from people who have a bad cough.

Frequently Asked Questions

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