

**Yukon Communicable Disease Control**

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**MEMORANDUM**

**DATE:** June 27, 2017 **17-05**

**TO:** All Health Care Providers

**FROM:** Chief Medical Officer of Health (CMOH) & Yukon Communicable Disease Control (YCDC)

**SUBJECT: Pertussis Update**

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Dear Colleagues,

Since our announcement of a first pertussis case on June 15, 2017 we have had enough further confirmed positive cases to indicate a pertussis outbreak. Thank you for your collaboration in diagnosing, testing, and treating suspect cases. All four confirmed cases to date have been school aged children in Whitehorse, ranging in age from 10 to 16, and not obviously linked to each other. I expect that over the weeks to come we will see more cases in a wider distribution. In our last outbreak, in the summer of 2012, we had 43 confirmed cases, with the majority affected being between 10 and 19 years of age.

Contact tracing to identify high risk contacts is presently underway by YCDC. In order to help minimize further cases and to protect those most vulnerable to pertussis complications, please keep in mind the following:

- If you suspect pertussis, please continue to **collect a nasopharyngeal (NP) swab**.
- Pertussis swab collection kits (with Amies charcoal transport media) can be ordered from Whitehorse General Hospital laboratory at 867-393-8739. Note that the pertussis swab kit is **not** the same swab or medium used for viral testing. However, we are still receiving sporadic positive influenza results so keep in mind viral etiologies as well and test as you see appropriate. Details on swab collection and other information on pertussis diagnosis and treatment can be found in the Yukon [Pertussis Guideline](#).
- The swab has reasonable yield up to 3 weeks post onset of cough, when bacterial DNA is still said to be present in the nasopharynx, or up to 5 days after commencing antibiotic treatment
- **Please report all suspected pertussis cases to YCDC (667-8323) as soon as soon as possible**, so that we can follow-up on any high risk close contacts for whom antibiotic prophylaxis is recommended: that is, pregnant women in the 3rd trimester and infants under one year of age, as well as those who live with them or who share a group/family daycare with them, regardless of immunization status.
- **Antibiotic treatment** is recommended to reduce both the duration of illness and to reduce the infectious period of pertussis. Please **DO NOT** wait for swab results in order to commence treatment.
- **Suspect cases of pertussis should stay home until after 5 days of antibiotic treatment**. Without antibiotics, patients are infectious for 3 weeks from onset of cough.

**TO HELP PROTECT INFANTS AND THE MOST VULNERABLE, THE FOLLOWING ENHANCED IMMUNIZATION STRATEGY IS EFFECTIVE IMMEDIATELY:**

- We recommend **pertussis immunization of pregnant women**, *regardless of prior immunization history*. Although Tdap can be administered at any time during pregnancy, optimum timing for protection of the newborn is in the third trimester after 26 weeks, particularly between 27 and 36 weeks. <sup>1</sup> Note that this recommendation is new for Yukon and reflects current outbreak guidance according to NACI. <sup>2</sup>
- One dose of Pertussis (Tdap) vaccine is recommended and is publicly funded in Yukon for all adults. Adults living in households with pregnant women or young children are particularly encouraged to be up to date on pertussis vaccination.
- As health care workers you have a responsibility to also ensure that your (and your staff and colleagues') vaccination status is up to date. Please check with your occupational health nurse or health centre if you are unsure of your own status.
- The routine [Yukon immunization schedule](#) includes a childhood series of pertussis containing vaccine at 2-4-6 and 18 months, with a pre-K booster and a booster dose of Tdap in Grade 9. **Please encourage your patients and others to check with their local health centre or Whitehorse Health Centre to confirm their need to update their vaccination.**
- Note that past or recent pertussis infection is not considered to confer durable natural immunity.
- Please note that recent Td vaccine is not a contraindication to receiving Tdap (Td with pertussis) vaccine.

As a review, Bordetella pertussis may present in the following manner:

- Early symptoms (catarrhal stage) of pertussis may be indistinguishable from those of minor respiratory tract infections (nasal congestion, runny nose, sore throat, mild dry cough and minimal or no fever).
- Later symptoms (paroxysmal stage) include prolonged cough or cough with paroxysms, whoop or post-tussive gagging/vomiting. Paroxysms can occur more frequently at night.
- Adolescents and adults may experience atypical manifestations with a cough that is neither paroxysmal nor accompanied by the whoop.

For further questions, please contact YCDC or myself directly.

Sincerely:



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<sup>1</sup> <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6207a4.htm>

<sup>2</sup> <https://www.canada.ca/en/public-health/services/publications/healthy-living/update-pertussis-vaccination-pregnancy.html>