



## ALAMANCE COUNTY

### Health Department

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Dear Parent or Guardian:

As you are probably aware, over the past few weeks, the Alamance County Health Department has investigated several cases of pertussis at schools throughout the county. We suspect that you have many questions about pertussis. We are **not** writing to inform you of a suspected or confirmed case of pertussis at your child's school. The purpose of this letter is to address some of the most commonly asked questions we have received.

#### ***What is pertussis? Is this the same as whooping cough?***

Pertussis, commonly known as whooping cough, is a bacterial infection that often starts with typical cold symptoms (runny nose, low grade fever, and possibly cough) and over one to two weeks, usually develops into prolonged bursts of coughing, often with a whooping noise at the end. To hear audio clips of what this sounds like, visit <http://www.whoopingcough.net/symptoms.htm> (*the sound file links are located to the far right of the page*). The person usually feels well between attacks. Some people with this infection may just have a cough that lasts a number of weeks. Parents should not be alarmed as this infection is rarely a cause of serious disease or hospitalization in school age children (or adults).

#### ***How is pertussis spread?***

Pertussis is most often spread from an infected individual through coughing and, less frequently, by touching a surface with pertussis bacteria on it.

#### ***How would I know if my child(ren) have pertussis? How would I know if I have pertussis?***

It is often difficult to know, even for doctors, if someone has pertussis. In the first week, it may seem exactly like the typical cold. Over time, people with pertussis usually develop coughing in a particular pattern: they cough 5 to 15 times without a breath in between and may make a whooping noise at the end of the coughing. They may also vomit or turn blue after this prolonged series of coughs. If you or your child(ren) have the above symptoms or any concern for pertussis, please see your physician for evaluation.

#### ***Who needs preventative antibiotics?***

Preventative antibiotics are recommended for persons having close contact to an individual diagnosed as having pertussis. These preventative antibiotics reduce the chances that the person would develop pertussis. (*See below for the definition of "close contact."*)

#### ***What do you mean by "close contact?"***

Close contact is defined as sitting or standing within three (3) feet for fifteen (15) or more minutes of the sick individual, during the period that they were able to transmit the infection.



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***If my child is advised to start preventive antibiotics, shouldn't the other people who live in our house be given antibiotics too?***

First of all, if it is determined that your child would benefit from preventive antibiotics, please begin these promptly. If your child does not have symptoms of illness, you do not need to be concerned that other household members might develop pertussis due to being around your child. Pertussis can only be passed from one person to another, if the child is ill with pertussis.

***How can I prevent pertussis?***

The best prevention is to make sure both you and your child are up to date with their vaccines. The Centers for Disease Control and Prevention (CDC) recommends that infants and children get DTaP vaccine at 2 months, 4 months, 6 months, between 15 and 18 months, and between 4 and 5 years of age. The CDC also recommends another vaccine, the Tdap vaccine, ideally at 11 or 12 years of age, which protects against whooping cough and tetanus. In North Carolina, it is mandatory for all students entering the sixth grade to receive the Tdap vaccine. Adults who did not receive Tdap as preteens should get one dose now. This will help prevent infection not only in children and adults, but also in infants. For adults planning to have a family, it is especially important to prevent pertussis. Ultimately, receiving the Tdap vaccine significantly decreases the risk of pertussis in newborns and infants.

***Do I need to worry if my child(ren) get pertussis? Do I need to worry if I get pertussis?***

Pertussis infection, for most children and adults, causes a very uncomfortable illness with significant coughing for up to six weeks or more. If antibiotics are started within 1-2 weeks of the beginning of symptoms, the symptoms will likely improve faster. Pertussis rarely leads to hospitalization in otherwise healthy children and adults. On the other hand, pertussis can be a dangerous infection for babies, particularly those who are less than 6 months of age. Pertussis in infants may lead to hospitalization and sometimes causes death. By keeping immunizations up to date, older children and adults can protect babies from infection.

***Are we having pertussis because some families are not getting their children immunized?***

State law mandates that children entering school are appropriately vaccinated. There are rare exceptions to this (medical or religious exceptions). In the case of the schools in Alamance County, we have not identified any relationship between the pertussis infections. The vaccine is nearly 100% effective in preventing disease when the child has completed their initial vaccine series at 5 years of age, but decreases in effectiveness to about 70% over the next five years. Getting the booster Tdap prior to entering the sixth grade (or as an adult) is very important, due to this decrease in vaccine effectiveness over time.

***How can I get more information about pertussis?***

For further information, please refer to the CDC website at: <http://www.cdc.gov/pertussis/>.

If you have additional questions, please call the Alamance County Health Department Communicable Disease Hotline at **(336) 516-7715**. If you are unable to reach a nurse on duty, please leave a message and your contact number. Your call will be returned as soon as possible.



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***¿A qué se refiere por “contacto cercano?”***

Contacto cercano se define como estar sentado o parado dentro de tres (3) pies por quince (15) minutos o más de la persona enferma, durante el período en que fue capaz de transmitir la infección.

***¿Si le recomiendan a mi hijo(a) que comience a tomar antibióticos preventivos, no deben también las otras personas que viven en nuestro hogar tomar los antibióticos?***

En primer lugar, si se determina que su hijo(a) se beneficiaría de los antibióticos preventivos, por favor comience este tratamiento con prontitud. Si su hijo(a) no tiene síntomas de la enfermedad no es necesario preocuparse de que otros miembros del hogar puedan desarrollar la tos ferina debido a tener contacto con su hijo(a). La tos ferina sólo puede transmitirse de una persona a otra, si el niño(a) está enfermo con la tos ferina.

***¿Cómo se puede prevenir la tos ferina?***

La mejor prevención es asegurarse de que tanto usted como su hijo(a) estén al día con sus vacunas. Los Centros para el Control y Prevención de Enfermedades (CDC por sus siglas en inglés) recomiendan que los bebés y los niños reciban la vacuna DTaP a los 2 meses, 4 meses, 6 meses, entre 15 y 18 meses, y entre 4 y 5 años de edad. El CDC también recomienda otra vacuna, la Tdap, idealmente a la edad de los 11 o 12 años, la cual protege contra la tos ferina y el tétanos. En Carolina del Norte, es obligatorio para todos los estudiantes que ingresan en el sexto grado recibir la vacuna Tdap. Los adultos que no recibieron la vacuna Tdap cuando fueron pre-adolescentes deben recibir una dosis ahora. Esto ayudará a prevenir la infección no sólo en los niños y adultos, sino también en los bebés. Para los adultos que piensen en tener familia, es especialmente importante para prevenir la tos ferina. En última instancia, recibir la vacuna Tdap disminuye significativamente el riesgo de la tos ferina en los recién nacidos y en los bebés.

***¿Debo preocuparme si mi hijo(a) desarrolla la tos ferina? ¿Debo preocuparme si desarrollo la tos ferina?***

La infección de la tos ferina, para la mayoría de los niños y adultos, causa una enfermedad muy incómoda con una tos significativa por seis semanas o más. Si se comienzan con los antibióticos dentro de 1 a 2 semanas de comenzar los síntomas, es probable que los síntomas mejoren más rápido. La tos ferina rara vez lleva a la hospitalización de los niños y adultos sanos. Por otro lado, la tos ferina puede ser una infección peligrosa para los bebés, especialmente los que tienen menos de 6 meses de edad. La tos ferina en los bebés puede conducir a la hospitalización y en ocasiones causa la muerte. Los niños mayores y los adultos pueden proteger a los bebés contra la infección al mantener las vacunas al día.

***¿Estamos adquiriendo la tos ferina porque algunas familias no están vacunando a sus hijos?***

La ley estatal exige que los niños que ingresan a la escuela estén debidamente vacunados. Hay raras excepciones a esto (excepción médica o religiosa). En el caso de las escuelas en el condado de Alamance, no hemos identificado ninguna relación entre las infecciones de la tos ferina. La vacuna es casi 100% eficaz en la prevención de la enfermedad cuando el niño(a) ha completado su serie inicial de vacunas a los 5 años de edad, pero disminuye la eficacia alrededor de 70% en los próximos cinco años. Es muy importante recibir la vacuna Tdap antes de entrar al sexto grado (o para los adultos), debido a esta disminución en la efectividad de la vacuna a través del tiempo.

***¿Cómo puedo obtener más información acerca de la tos ferina?***

Para más información, consulte el sitio web del CDC: <http://www.cdc.gov/pertussis/> .

Si tiene preguntas adicionales, por favor llame al Departamento de Enfermedades Transmisibles del Condado de Alamance al **(336) 516-7715**. Si usted no puede contactar a una enfermera en guardia, por favor deje un mensaje y el número de teléfono para contactarlo. Se le devolverá la llamada con prontitud.