

May 2024

Dear Education Colleagues

Re: Increase in Whooping cough/Bordetella pertussis cases

There has been a significant increase year of whooping cough (pertussis) cases in the UK.

The UK Health Security Agency (UKHSA) has reported an increase in whooping cough cases with 1,319 cases confirmed in March 2024. Tragically, there have been **five infant deaths** related to whooping cough in the first quarter of 2024.

Young infants are at highest risk of severe complications and death from whooping cough.

We are therefore contacting you to offer advice and encourage vigilance.

What is whooping cough?

Whooping cough, also called pertussis is a highly contagious bacterial infection of the lungs and airways.

Babies and young children under six months are usually most severely affected by whooping cough, as they can be at risk from dehydration, breathing difficulties, pneumonia and seizures (fits).

Older children and adults tend to be less severely affected, but may experience problems caused by repeated coughing, such as nosebleeds, bruised ribs, or a hernia.

Whooping cough is spread in the droplets of the coughs or sneezes of someone with the infection.

Symptoms of whooping cough

- The first symptoms of whooping cough are similar to a common cold, with a runny nose and a mild fever.
- After about a week or two, the characteristic cough develops with uncontrolled bouts of intense coughing that can last for several minutes, sometimes causing vomiting.
- Coughing is often worse overnight.

- Coughing fits can cause some people to make a distinctive "whooping" sound as they gasp for breath between coughs.
- Babies under 3 months old who are not fully protected through immunisation are at the highest risk of developing severe complications including pauses in breathing (apnoea), dehydration, pneumonia, or seizures

Diagnosis and notification

Children suspected of having pertussis should be encouraged to visit their GP for a diagnosis and assessment for antibiotic treatment. To confirm diagnosis a nasopharyngeal swab or per nasal swab may be taken for culture by the GP.

If a child is suspected of having whooping cough and is struggling to breathe, their lips, tongue, face, or skin turn blue or grey or they can have seizures, do not delay in obtaining urgent medical attention by calling 999.

Exclusion

Individuals who have been commenced on antibiotics should be excluded from school, nursery, or work for 48 hours. If no antibiotics are commenced, exclusion will be 21 days from onset of cough.

Vaccination

Pertussis is covered in the primary vaccinations for babies from 2 months, as part of the '6-in-1' vaccine. This is offered at 8 weeks, 12 weeks and 16 weeks. Whooping cough/pertussis vaccination is also offered to pregnant women from 16 weeks gestation to protect newborns up until their primary doses. Updated estimates of vaccine effectiveness in pregnancy shows high levels of protection (92%) against infant death, and vaccination can be given from 16 weeks gestation, ideally between 20 to 32 weeks of pregnancy. This same vaccination, a '4-in-1' is also given to children of pre-school age at 3 years and 4 months with MMR.

Please continue to encourage vaccination uptake and signpost parents/carers to NHS guidance to ensure informed choices are made.

It is also useful in a situation where cases of infection such as pertussis are identified to understand which children are up to date with their vaccinations. As such, we would ask schools and childcare settings to consider how this information may be accessed quickly. This may need to be discussed with the school nursing team or posed as a question to parents/carers.

Further information

In order to manage a situation quickly, could we request that at the point a parent or carer calls your setting to inform their child has been diagnosed with whooping cough or other communicable disease (e.g., measles) that permission is gained for the Community Infection Prevention and Control Team to contact the GP or clinician to discuss and clarify if any steps need to be taken. This enables timely follow up and feedback.

Please continue to encourage good respiratory hygiene in pupils and staff- Catch it, Bin it, Kill it – with supplies of tissues available and individuals asked to cover their mouth and nose if coughing or sneezing. If a tissue is not available, cough or sneeze into the inside of the elbow rather than on hands to prevent transmission.

Careful handwashing with liquid soap and water following the correct order: 'WET, SOAP, WASH, RINSE, DRY'. Use paper towels particularly in outbreak situations. Ensure children are reminded to wash their hands after using the toilet / before eating.

For further information please follow the links below:

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/preventing-and-controlling-infections>

Managing specific infectious diseases: A to Z - GOV.UK (www.gov.uk)

Information for individuals diagnosed with whooping cough - GOV.UK (www.gov.uk)

If you have any further queries regarding this information please do not hesitate to contact our health protection team, PHSecretary@salford.gov.uk or by calling 0161 793 3599.

Kind regards

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