

Dear Healthcare Professional Colleague-

Pertussis – a vaccine-preventable disease - is killing vulnerable infants.

Pertussis (“whooping cough”) outbreaks are occurring all over the country, but most notably in California. Newborns and infants are especially hard hit by this disease. While disease can occur in all ages, infants less than 12 months are at highest risk for severe disease and death.

Infants begin their pertussis immunization series (Diphtheria-Tetanus-Acellular Pertussis or “DTaP”) at two months, however full immunity is not achieved until the series is completed. Adolescents and adults are recommended to be immunized with a booster dose - “Tdap” – for adolescents this is preferably given at age 11-12 years.

Vaccinate parents, siblings, grandparents and caregivers of infants with Tdap.

The Centers for Disease Control and Prevention’s Advisory Committee on Immunization Practices (ACIP) recently made significant changes on the use of the adolescent and adult pertussis vaccine in order to increase vaccine coverage and protect vulnerable infants. This letter supports those recommendations, and is a call to action for healthcare professionals to heed them.

ACIP now recommends use of Tdap in adults age 65 years and older and undervaccinated children ages 7 to 10 years and, recommends giving Tdap regardless of interval since last tetanus or diphtheria containing vaccine. By being vaccinated, close contacts of infants create a protective “cocoon” for newborns and infants who either cannot yet be vaccinated or have not completed their initial vaccine series. Studies have indicated that 75%-83% of infant pertussis cases with a known source exposure were caused by an infected household member. Parents and siblings are the most common source, with 55% of cases in infants linked to an infected parent.

Educate the families you care for about why it’s important to be up-to-date with Tdap vaccinations and where Tdap can be obtained. Offer Tdap vaccine especially to post-partum women and families, and if possible, before discharge from the hospital or birthing center. According to ACIP and the American College of Obstetricians and Gynecologists, a clinician may choose to administer Tdap to a pregnant woman in certain circumstances, such as during a community pertussis outbreak.

Protect your patients – be vaccinated with Tdap yourself!

Previous outbreaks in newborn populations have been linked to exposure from infected healthcare workers. As healthcare professionals, we have a duty to promote patient safety and public health. Do not risk the health of your most vulnerable patients – get your Tdap vaccine, too.

Pertussis Vaccine Dosing Guide

Age Group	Vaccine Type	Recommended Dosing Schedule
Infants & Children [up to age 7 years]	DTaP	Primary Series - 2, 4, 6, 15-18 months; booster - 4-6 years
Children [age 7 through 10 years]	Tdap	Catch up – (or for unknown pertussis vaccine history) – Give single dose of Tdap in place of Td in catch-up series
Adolescents [age 11 to 18 years]	Tdap	Booster – Give single dose Tdap, preferably at age 11-12 years
Adults [age 19 to 64 years]	Tdap	Booster – Give single dose of Tdap in place of Td, especially if in contact with infant age <12 months
Adults [age 65 years and older]	Tdap	Booster – Give single dose of Tdap in place of Td, especially if in contact with infant <12 month
Pregnant women*	Tdap	Special Circumstance (i.e. community pertussis outbreak) – Single dose Tdap may be given in 2 nd or 3 rd trimester when protection needed urgently
Postpartum and breastfeeding women	Tdap	Booster – Give single dose of Tdap, preferably before discharge from hospital or birthing facility

Note: Adult Tdap recommendations apply to persons that have not yet received Tdap.

Chart content based on vaccine information from the [Centers for Disease Control and Prevention](#), as well as [recommendations on use of pertussis vaccine from the Advisory Committee on Immunization Practices](#).

Atkinson W., Wolfe S., Hamborsky J., McIntyre L., eds. (2009). Chapter 14 - Pertussis. *Epidemiology and Prevention of Vaccine Preventable Diseases, 11th Ed.* (199-216). Centers for Disease Control and Prevention. Washington, DC: Public Health Foundation.

Centers for Disease Control and Prevention. (2010). Updated Recommendations for Use of Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis (Tdap) Vaccine from the Advisory Committee on Immunization Practices, 2010. *Morbidity and Mortality Weekly Report, 60*(1), 13-15.

*[Based on American College of Obstetricians and Gynecologists' committee opinion.](#)

American College of Obstetricians and Gynecologists. (2009). ACOG committee opinion No. 438: Update on immunization and pregnancy: Tetanus, diphtheria, and pertussis vaccination. *Obstetrics & Gynecology, 114*(2), 398-400.