

Rising pertussis cases

We are providing an update on pertussis and pertussis management to prepare for an expected increase in cases this upcoming fall and school year. Pertussis has expected cyclical peaks occurring every 2 to 5 years. The last peak in British Columbia (BC) occurred in 2016, followed by a period of low activity likely prolonged by pandemic restrictions. Currently, pertussis is increasing in Canada as part of the expected cyclical peak of the disease. The increasing cases in 2024 has been large in some provinces, where Quebec has seen more than 12,000 cases to date; while in BC the increase has been smaller, with 72 cases (1.3 per 100,000 as of July 2024). Specifically on Vancouver Island, in August 2024, 16 cases (1.6 cases per 100,000) of pertussis were reported, 1 case among infants (17.3 per 100,000). The majority of the 16 cases were unimmunized. More information is available from BCCDC (tinyurl.com/BCCDCpertussis) and PHAC (tinyurl.com/PHACpertussis).

Pertussis vaccination is the best defense

- Pertussis vaccine is recommended for everyone, especially pregnant people and infants, with the purpose to **protect infants; all of the 17 pertussis deaths in Canada between 2005 and 2019 were among infants.**
- Vaccination is very effective for protecting infants against infection (85% after primary series, 90% after booster). Island Health has approximately 84% infant up to date pertussis vaccine coverage (at 12 months).
- To get **infants/children** vaccinated, refer eligible children to a local health unit (tinyurl.com/ISLHhealthunits) or provide directly in clinic (see tinyurl.com/ISLHcyp). Publicly funded Tdap vaccine is also available for:
 - Pregnant people in every pregnancy, ideally provided between 27-32 weeks gestation
 - Unvaccinated or incompletely vaccinated adults
 - Individuals born in 1989 or later who missed getting their adolescent dose of Tdap
- Publicly funded vaccine for eligible adults can be administered in a pharmacy or public health unit.

Thinking pertussis?

When to consider

- Highest suspicion in infants, under/unvaccinated individuals, even if another cause is identified.
- One or more of the following:
 - Paroxysmal cough of any duration, OR
 - Cough with inspiratory "whoop", OR
 - Cough ending in vomiting or gagging, or associated with apnea

Testing if suspecting pertussis

- Perform NP swab (tinyurl.com/PertussisKit) using the green-top bacterial culture swab kits available from the Public Health Laboratory (tinyurl.com/PHLorder). You may test through LifeLabs (write "pertussis" under "additional testing") or use the PHL requisition (tinyurl.com/PHLreq)
- If urgent results needed (within one day), please consult with a Medical Health Officer

Treatment and family advice

- Advise unimmunized families, **especially if they have an infant**, to receive vaccine; advise for booster in third trimester of pregnancy.
- A macrolide antibiotic (azithromycin) is the preferred antimicrobial for treatment.
- Monitor for worsening illness, especially dehydration, lethargy, shortness of breath; seek urgent medical care if any of these develop.

Reporting and consultation

If suspicious enough to test or if seeking expedited testing, please contact us at:

South Island	250-388-2225
Central Island	250-740-2615
North Island	250-331-8555
Afterhours/weekends	1-800-204-6166

Island Health Medical Health Officers

Chief MHO: Dr. Réka Gustafson 250-519-3406; North Island: Dr. Charmaine Enns 250-331-8591

Central Island: 250-739-6304; Cowichan Region: 250-737-2020

South Island: Dr. Mike Benusic, Dr. Murray Fyfe, Dr. Dee Hoyano, Dr. Christina Kay 250-519-3406

islandhealth.ca/about-us/medical-health-officers