



## Pertussis

### Recommendations for Treatment and Prophylaxis of Contacts

All household contacts of a pertussis case should receive antibiotic prophylaxis regardless of immunization status or age. Prophylaxis should be considered for other adults who have had close or extensive contact. Contacts outside the home that are symptomatic should be evaluated and treated as necessary. Asymptomatic contacts outside the home do not require treatment.

Azithromycin is the drug of choice. The newer macrolides, azithromycin or clarithromycin have fewer adverse effects and better compliance. Trimethoprim-sulfamethoxazole is an alternative for patients who cannot tolerate erythromycin or who are infected with an erythromycin-resistant strain.

**Table 1. Dosages of Antibiotics Used for the Treatment and Prevention of Pertussis**

<i>Drug</i>	<i>Children</i>	<i>Adults</i>
<b>Azithromycin</b>	10 to 12 mg/kg/day p.o. in a single dose for 5 days; maximum 600 mg/day	500 mg p.o. in a single dose; then 250 mg p.o. in single doses, on days 2 through 5
<b>Clarithromycin</b>	15 to 20 mg/kg/day p.o. in two divided doses; maximum 1g/d for 7 days	500 mg p.o. twice daily for 10 days
<b>Trimethoprim-Sulfamethoxazole (TMP-SMX)</b>	8 mg (TMP) and 40 mg (SMX) p.o. per kg/day in two divided doses for 14 days; maximum 320 mg/d TMP and 1,600 mg/d SMX	320mg/day (TMP) and 1600mg/day (SMX) p.o. divided twice daily for 14 days.
<b>Erythromycin estolate*</b>	40 to 50 mg/kg/day p.o. in 4 divided doses for 14 days; maximum 2 g/day	500 mg p.o. QID four times daily for 14 days

\* When prescribing erythromycin to newborns providers should inform parents about the possible risks for infantile hypertrophic pyloric stenosis (IHPS) and counsel them about signs of developing IHPS.

The above treatment guidelines are consistent with those outlined in the American Academy of Pediatrics' *2003 Red Book* and with the Centers for Disease Control and Prevention (CDC) as well as the MMWR recommendations and reports of December 9, 2005/54 (RR14); 1-16.

We are asking that physicians maintain a high index of suspicion for pertussis in patients presenting with an acute illness characterized by a prolonged cough.

**Please contact the Douglas County Health Department Epidemiology Section at 444-7214 with questions or to report a case.**