



To help protect your baby, ask your close family and friends to get vaccinated¹ Whooping cough is always in our community²



What is whooping cough?

Whooping cough (also known as pertussis) is a highly contagious (easy to catch) disease. It is generally thought of as a childhood illness, but can also affect adults and adolescents.^{1,3,4}

Whooping cough, as the name suggests, causes a severe, persistent cough that can last up to 100 days and lead to other serious complications.^{3,4}

In newborn babies, these complications can result in life-threatening sickness and hospitalisation.^{3,5}

What are the symptoms

Whooping cough often starts just like a cold – with a runny nose, tiredness and sometimes a mild fever. Coughing then develops, usually in bouts, followed by a deep gasp or ‘whoop’ (but not everyone has the classic whooping sound). Severe, persistent coughing is the most common symptom in adults and adolescents.^{1,6,7}

Whooping cough can be serious and sometimes even life-threatening for babies.³

What can happen to my baby?³

- Hospitalisation
- Seizures
- Pneumonia
- Brain damage
- Death

What can happen to me?⁸

- Sleeping problems
- Time off work or school
- Vomiting
- Fainting
- In more serious cases, a stay in hospital

Take action

If you are pregnant

- Talk to your healthcare professional about getting a booster to help protect your baby. *Boostrix* is funded for pregnant women from 28 to 38 weeks gestation.¹

Check that all other adults in close contact with your newborn have had their booster vaccination as recommended (but not funded) in the Immunisation Handbook!

If you have had a baby in the last 5 months

- Use the vaccination reminders below to give to your family, whanau and friends to help you protect your baby. Their immunity to whooping cough may have waned, meaning they're at risk of catching it and passing it on.^{1,10,11}

How can I help protect myself and my baby?

Ensure your partner, family, friends, and anyone else who will be in close contact with your newborn are vaccinated against whooping cough.¹

- Babies are at greatest risk from whooping cough in their first months of life.¹⁻³
- Parents and close family pass on over 70% of infant cases. Infected family members may give whooping cough to a newborn baby without even knowing, because the symptoms of the disease are difficult to identify.^{9,11,12}

Who needs to be vaccinated against whooping cough?¹

- New and prospective parents
- Adult household members and other close contacts e.g. grandparents, carers
- Adults working with young children e.g. childcare workers
- All healthcare workers

If you fall into any of these groups, *Boostrix* can be given at 45 and 65 years of age in place of the usual tetanus, diphtheria booster. Please note that this is not funded.

Everybody who will be in contact with your newborn should be vaccinated against whooping cough to protect themselves and your baby.¹



1. Ministry of Health. Immunisation Handbook 2014 – 2nd edition, April 2016. Available at <http://immunisation.book.health.govt.nz/> Accessed 13 October 2016 2. Institute of Environmental Science and Research Limited. Monthly Notifiable Disease Surveillance Report - Aug 2016. Available https://surv.esr.cri.nz/PDF_surveillance/MthSurvRpt/2016/201608AugRpt.pdf Accessed 14 October 2016 3. Mattoo S and Cherry JD. *Clin Microbiol Rev* 2005;18:326–382. 4. Marchant CD. *Clin Infect Dis*. 2004;39:1581–82. 5. Forsyth KD et al. *Vaccine*. 2007;25:2634–42. 6. Hamden A et al. *BMJ*. 2006;333(7560):174–7. 7. Cherry JD. *Clin Infect Dis*. 1999;28:S112. 8. Lee GM et al. *Clin Infect Dis*. 2004; 39:1572–1580. 9. Miller E et al. *Commun Dis Public Health*. 2000;3:132–134. 10. Wendelboe AM et al. *Pediatr Infect Dis J*. 2005;24(Suppl 5):S58–S61. 11. Zepp F et al. *Lancet Infect Dis*. 2011;11:557–570. 12. Wendelboe AM et al. *Pediatr Dis J*. 2007;26:293–99.

Boostrix® (combined diphtheria, tetanus, and acellular pertussis (dTpa or Tdap) vaccine) is available as an injection. *Boostrix* is for booster immunisation of people aged 4 years and older against diphtheria, tetanus, and pertussis (whooping cough). *Boostrix* is government funded for 11 year olds as part of the national immunisation schedule, and for pregnant women between 28 and 38 weeks gestation (Category B1). It is also available as a private-purchase prescription medicine – you will have to pay normal doctor's visit fees and a prescription charge. A trained pharmacist can also administer *Boostrix* to a person aged 18 years and older. A 0.5 mL dose contains not less than 2.5 LfU of diphtheria toxoid, not less than 5 LfU of tetanus toxoid, and three purified antigens of *Bordetella pertussis* (8mcg of pertussis toxoid, 8 mcg of filamentous haemagglutinin, and 2.5 mcg of 69 kDa outer membrane protein). Tell your healthcare professional if you are pregnant or breastfeeding to be informed of the benefits and risks of *Boostrix*. ***Boostrix* should not be administered** if you or your child are hypersensitive to any component of this vaccine or similar vaccines, or have had swelling or disease of the brain after previous pertussis (whooping cough) vaccination, or any problems with blood clotting or the nervous system (such as spasms, epilepsy and brain disease) after earlier immunisation against diphtheria or tetanus. **Common side effects** include fever, irritability, fatigue, malaise, headache, loss of appetite, vomiting and diarrhoea, and local reactions such as pain, redness, bruising, itching, or swelling at the injection site. If you or your child have side effects, see your doctor, pharmacist, or health professional. Additional Consumer Medicine Information for *Boostrix* is available at www.medsafe.govt.nz. **Ask your doctor if *Boostrix* is right for you or your child.** *Boostrix* is a registered trade mark of the GlaxoSmithKline group of companies. Marketed by GlaxoSmithKline NZ Limited, Auckland. **Adverse events involving GSK products should be reported to GSK Medical Information on 0800 808 500 TAPS NA9117/17MY/ BOO/0004 GSK00514**