

Pickering, 2012). Infants younger than 6 months old may not come in to the practitioner with the typical cough; in this age group, apnea is a common presenting manifestation ([American Academy of Pediatrics Committee on Infectious Diseases and Pickering, 2012](#)). Likewise, older children are known to manifest the disease with a persistent cough and the absence of the characteristic whoop (see [Table 6-1](#) for signs, symptoms, and management of pertussis). The incidence is highest in the spring and summer months, and a single attack confers lifetime immunity.

The resurgence of pertussis in the United States, particularly among children 10 years old and older, has prompted concerns of the long-term effects of the pertussis vaccine. Two acellular pertussis booster vaccines are available for children: tetanus, diphtheria, acellular pertussis vaccine (Boostrix) for people 10 to 64 years old and Adacel for people 10 to 64 years old. (See also [Immunizations, Chapter 6](#).)

Most children with pertussis can be managed at home; care is supportive in nature, including encouraging adequate hydration and administering antipyretics. When coughing spasms occur in small children, they can be frightening for the parent and family in an unvaccinated child. Admission to the hospital occurs if respiratory symptoms are severe or if apnea occurs. Diagnosis is obtained via culture or *B. pertussis* polymerase chain reaction (PCR) test on specimens obtained with a nasopharyngeal swab. Treatment with antibiotics (erythromycin, clarithromycin, or azithromycin) in the catarrhal stage may result in a milder form of the infection, but treatment also prevents spread to others ([American Academy of Pediatrics Committee on Infectious Diseases and Pickering, 2012](#)). Patients are considered infectious until at least 5 days of antibiotics have been completed or for 3 weeks if no antibiotics have been administered. Family and other contacts, such as children in child care or school, may also be treated prophylactically. Symptoms can develop up to 3 weeks after exposure to pertussis. Symptoms usually last for 6 to 10 weeks but may persist for longer. Inpatients must be placed on droplet precautions.

Tuberculosis

Tuberculosis (TB) along with human immunodeficiency virus is the