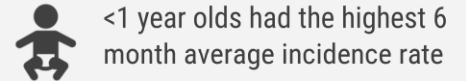
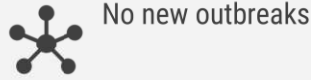
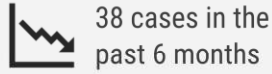
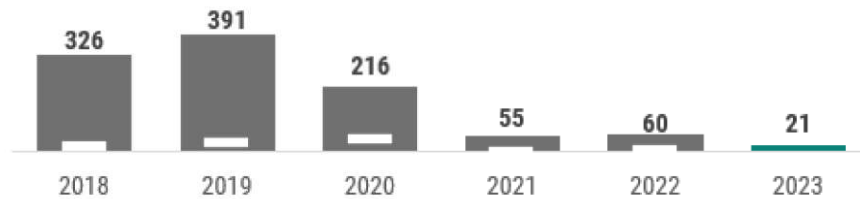


Pertussis Surveillance

March Key Points



In 2023, 21 pertussis cases were reported in 12 counties. There was a **19% increase** in the number of pertussis cases reported between October 2022–March 2023 compared to October 2021–March 2022 (n=32 cases).



*The white bars indicate the total number of cases as of March for each year

The number of pertussis cases reported in March increased from the previous month and was below the previous 5-year average.



In March 2023, 0 pertussis cases were household-associated. In the past 6 months, there was an average of **1 household-associated case** and an average of **6 total cases**. From October 2021– March 2022, there was an average of **0 household-associated cases** and an average of **5 total cases**. For most pertussis cases, exposure to other known cases is not identified and are not able to be linked to outbreaks.

	Household-associated	Outbreak-associated	Total cases
6 Mo Avg Oct 2022- Mar 2023	1		6
6 Mo Avg Oct 2021- Mar 2022	0		5

Pertussis Surveillance



An average of **2 contacts** per case between October 2021 and March 2022 were reported similarly to an average of **2 contact** per case between October 2022 and March 2023. Contacts are classified as people whom antibiotics were recommended to prevent illness. Antibiotics can shorten the amount of time cases are contagious and can also be used to prevent illness in those exposed. Understanding pertussis transmission is a key factor in decreasing pertussis infections. In Florida, transmission setting is not routinely identified for non-outbreak cases, resulting in **69%** of cases reporting unknown setting in the past six months.

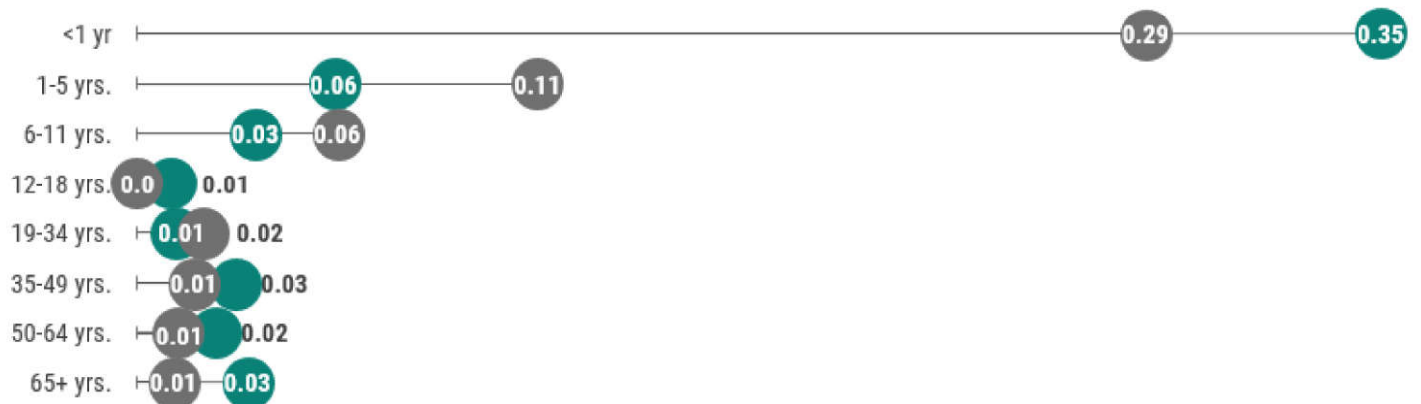
October 2021 to March 2022

October 2022 to March 2023




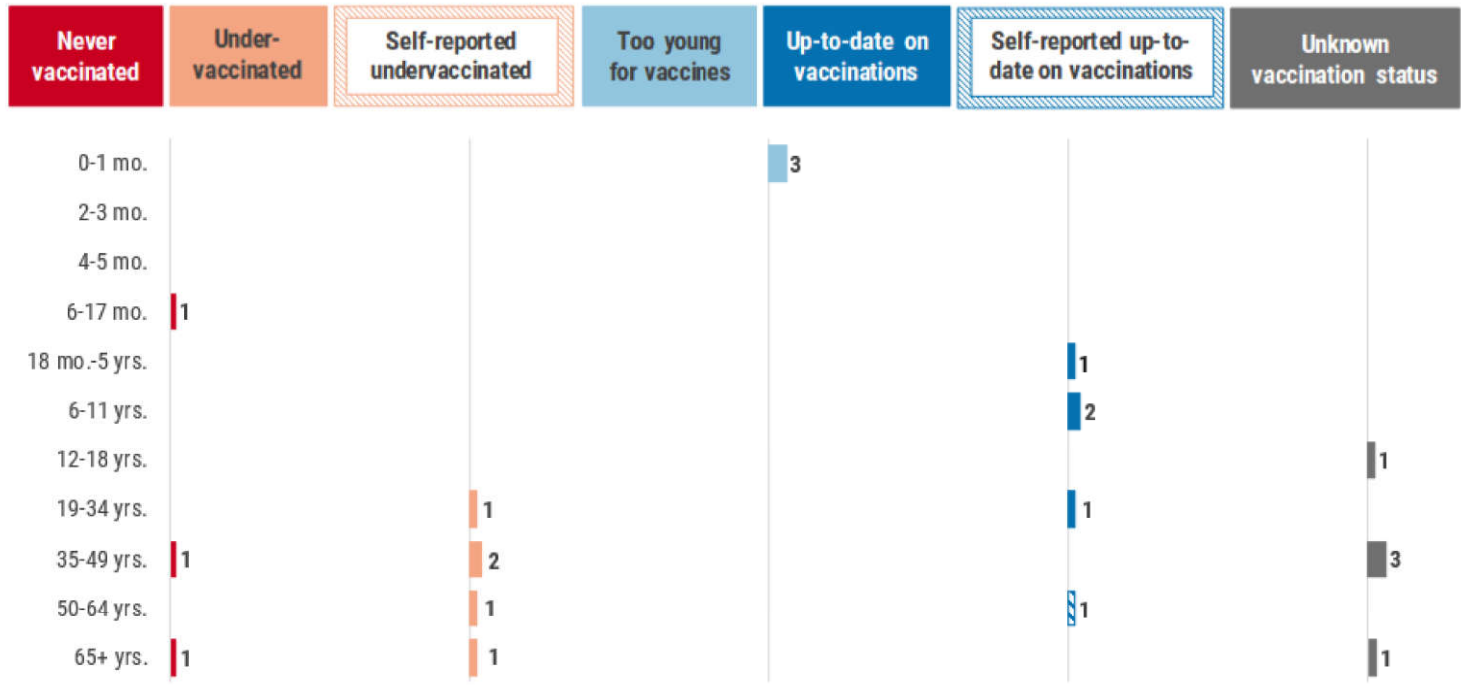
The average incidence rate was highest among **<1 year olds** at **0.35 cases per 100,000 population** between October 2022 and March 2023. Infants experience the greatest burden of pertussis infections, not only in number of cases but also in severity. Infants <2 months old are too young to receive vaccinations against pertussis, which is why vaccination of parents, siblings, grandparents, and other age groups is important in infection prevention among infants.

- October 2021 to March 2022
- October 2022 to March 2023



Pertussis Surveillance

 In 2023, over half of cases reported were not up-to-date on their pertussis vaccinations. **In general, those who have received at least one pertussis vaccination have less severe outcomes than those who have never been vaccinated.** If a person was born before January 1st, 1982, the current pertussis immunization recommendation would not have been implemented when they were receiving their childhood immunizations. Based on the case's age, **9 cases** would not have been vaccinated under the current childhood immunization recommendations.



National activity

The number of pertussis cases gradually increased since the 1980s, peaking in 2012 at levels not seen since the 1950s. Since 2012, the number of pertussis cases started gradually decreasing. Pertussis incidence has remained highest among infants <1 year old and lowest among adults ≥20 years old since the 1990s.

Pertussis surveillance goals

- Identify cases to limit transmission in settings with infants or others who may transmit pertussis to infants
- Identify and prevent outbreaks
- Identify transmission settings in non-outbreak cases to prevent the spread of sporadic cases
- Identify contacts of cases and recommend appropriate prevention measures, including exclusion, antibiotic prophylaxis, and immunization
- Monitor the effectiveness of immunization programs and vaccines

To learn more about pertussis, please visit FloridaHealth.gov/Pertussis. For more information on the data sources used in Florida