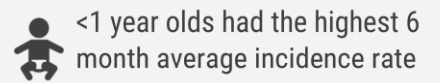
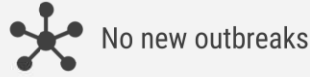
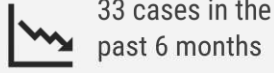
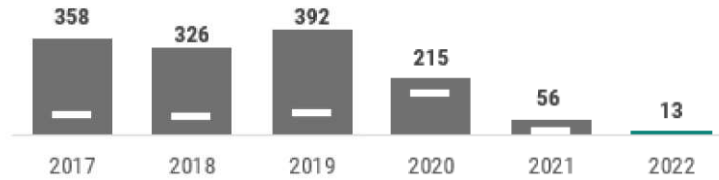


Pertussis Surveillance

March Key Points

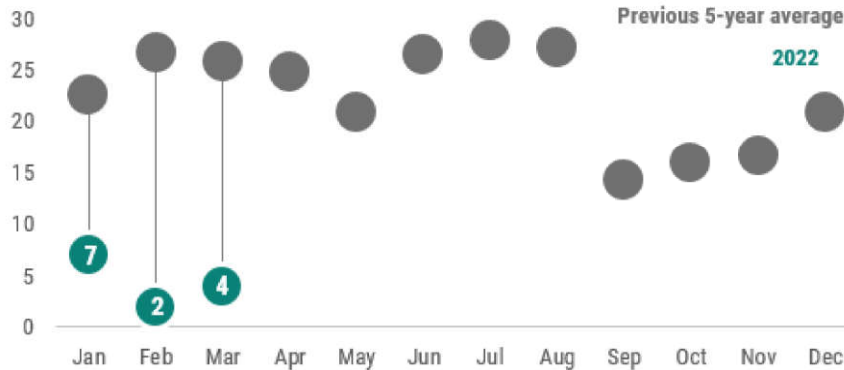


In 2022, 13 pertussis cases were reported in 8 counties. There was a **86% decrease** in the number of pertussis cases reported between October 2021–March 2022 compared to October 2019–March 2020 (n=238 cases).



*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.



No **outbreak-associated cases** and **2 household-associated** cases have been identified in the past 6 months. 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

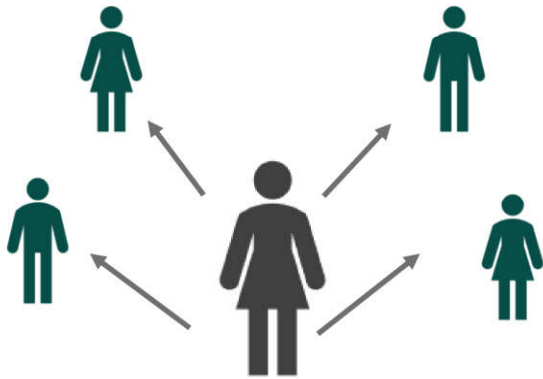


Pertussis Surveillance

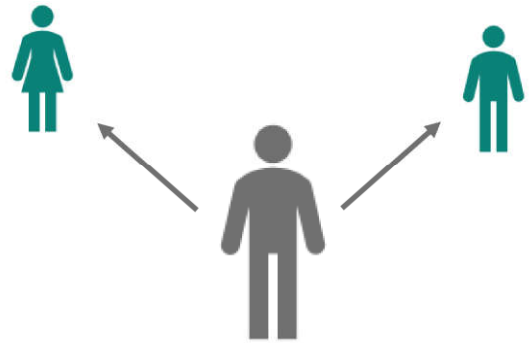


An average of **4 contacts** per case between October 2019 and March 2020 were reported compared to an average of **2 contacts** per case between October 2021 and March 2022. Contacts are classified as people whom antibiotics were recommended to prevent illness. Antibiotics can shorten the amount of 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 **88%** of cases reporting unknown setting in the past six months.

October 2019 to March 2020




October 2021 to March 2022

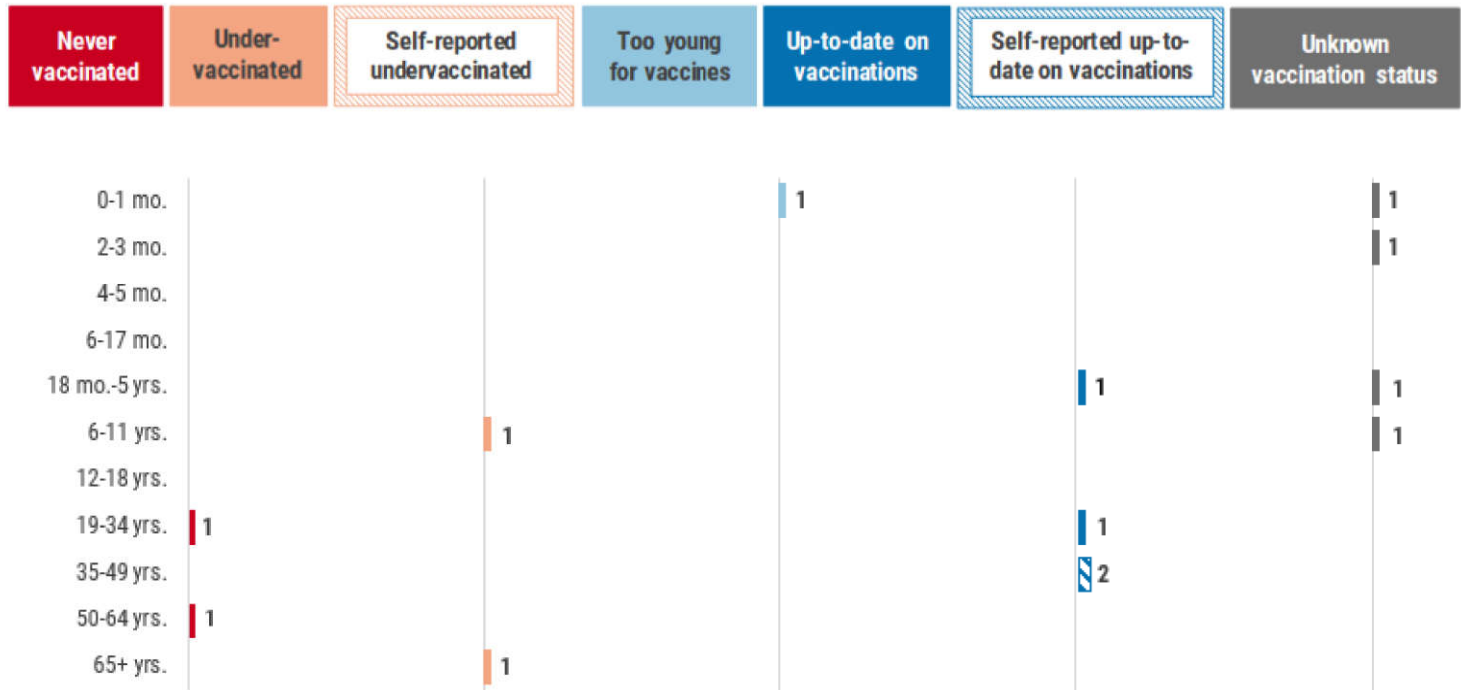


The average incidence rate was highest among **<1 year olds** at **0.3 cases** per 100,000 population between October 2021 and March 2022, which is **15 times lower** than the average incidence rate for <1 year olds between October 2019 and March 2020. Infants experience the greatest burden of pertussis 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.



Pertussis Surveillance

 In 2022, over half of cases were not reported 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 December 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, **5 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](https://www.floridahealth.gov/Pertussis). For more information on the data sources used in Florida