

Health Advisory

Please distribute a copy of the accompanying update to each provider in your organization.

Questions regarding this notification may be directed to the office of:

Alan Melnick, MD, MPH, CPH Health Officer Clark County Public Health (360) 397-8412

Categories of Health Alert messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for specific incident for situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; no immediate action necessary.

Thank you.

HEALTH ADVISORY March 18, 2015



TO: Physicians and other Healthcare Providers

FROM: Alan Melnick, MD, MPH, CPH, Health Officer

RE: Increase in pertussis and chickenpox among high school children

Clark County Public Health (CCPH) has recently seen an increase in chickenpox at both Camas High School and Helen Baller Elementary. As a provider, you may be receiving calls from parents and/or school staff with questions about chickenpox, documentation for history of disease, serological testing or immunization. Camas High School also continues to see ongoing transmission of pertussis, particularly among high school students. CCPH is taking precautions to prevent transmission, which may include directing persons to their health care providers for follow-up.

Chickenpox:

Although not a notifiable condition in Washington State, chickenpox can be serious, especially in babies, adults, pregnant women, and people with weakened immune systems. CCPH encourages health care providers to share the following recommendations with their patients and parents:

- 1. The best way to prevent chickenpox is to get the chickenpox vaccine. Two doses are now recommended for school-aged children, adolescents, and adults without documented evidence of immunity.
- 2. All ill people who have symptoms consistent with chickenpox should stay home from school or work until all chickenpox blisters have dried to a hard scab.

Pertussis:

Pertussis, or whooping cough, is characterized by intermittent paroxysms (spasms) of severe coughing lasting from 6 to 10 weeks. Classic pertussis typically lacks fever and usually progresses through three stages:

- 1. Catarrhal (1–2 weeks): mild, upper respiratory tract symptoms gradually develop with an intermittent non-productive cough.
- 2. Paroxysmal (1–6 weeks or longer): spasms of cough end with a gasp, whoop, or vomiting (post-tussive emesis). Adolescents and adults may have less dramatic symptoms.
- 3. Convalescent (2-6 weeks or longer): gradual resolution of the paroxysmal coughing.

Pertussis can occur at any age, regardless of vaccination history. Apnea rather than cough may be the initial symptom in young infants. A clue to the diagnosis in infants only is an elevated white blood count (over 15,000/mm³) with a predominance of lymphocytes. Pertussis among older children, adults, and those previously immunized can be milder than classic whooping cough; the symptoms may be no more distinctive than other upper respiratory tract infections. The CDC-recommended course of treatment is a 5-day course of azithromycin. For more information, see the Washington State Department of Health Guidelines (link).

In Washington State, pertussis is a notifiable condition and should be reported to the local health jurisdiction immediately. Please call CCPH to report all probable and confirmed cases.

To report notifiable conditions or if you have questions please call the CCPH Communicable Disease Unit at (360) 397-8182. Thank you for your partnership.