



Office: (541) 766-6800  
Fax: (541) 766-6893  
4500 SW Research Way  
Corvallis, OR 97333  
[co.benton.or.us](http://co.benton.or.us)

## HEALTH ADVISORY: Pertussis Rising in Oregon

May 31, 2024

Dear Colleagues,

We hope this message finds you well. Benton County is sharing an Oregon Health Authority (OHA) Pertussis Health Alert Network (HAN) advisory.

178 pertussis cases have been reported in Oregon during 2024. For comparison, 20 pertussis cases were reported during 2023. 9 counties have reported pertussis cases in 2024. The counties listed by highest case counts as of May 29, 2024, include: Lane County (64), Multnomah (41), Clackamas (33), Deschutes (15), Washington (13), Jefferson (8), Linn (2), Benton (1), and Yamhill (1) Counties. Most cases (92 out of 178; 52%) are associated with school-aged children and adolescents. Among the 92 school-aged pertussis cases, only 51 (55%) were up to date with recommended pertussis vaccinations.

Infants are the highest risk group for pertussis-related morbidity and mortality. Between 2003 – 2023, infants accounted for 12% of pertussis cases and 76% of pertussis hospitalizations. Infants were associated with all five pertussis-related deaths in Oregon since 2003. OHA's key recommendations include:

- Vaccination of pregnant women at 27 – 36 gestational weeks with Tdap, regardless of the mother's prior Tdap vaccination history.
- Tdap given to pregnant women will stimulate the development of maternal anti-pertussis antibodies, which will pass through the placenta and protect infants—particularly those too young to be vaccinated against the disease.
- When an infant or pregnant woman is in the household of someone with pertussis, all household members should receive a course of antibiotics effective against *Bordetella pertussis*—typically, a 5-day course of azithromycin.

The OHA HAN can be reviewed below.

We appreciate your diligence in protecting the health of our collective communities.

Respectfully,

A handwritten signature in blue ink, appearing to read "Carolina Amador", written over a horizontal line.

Carolina Amador, MD, MPH  
Public Health Officer

A handwritten signature in blue ink, appearing to read "April Holland", written over a horizontal line.

April Holland  
Public Health Administrator



## **Pertussis Rising in Oregon**

In 2024 as of May 23rd, 158 cases of pertussis have been reported to the Oregon Health Authority, compared to 20 cases at this time in 2023. Reported cases of pertussis in Oregon in 2024 remain lower than during similar time frames in the immediate pre-pandemic years (87 in 2019 and 237 in 2018). Pertussis is cyclical and before COVID, manifested peaks in incidence every three to five years. In 2012, 910 cases were reported—the highest annual count since 1953.

Among the 9 counties with reported pertussis to date in 2024, Lane County leads with 52 cases, followed closely by Multnomah (42), Clackamas (33), Washington (12), Deschutes (11), Jefferson (4), Linn (2), Benton (1), and Yamhill (1) Counties. School-aged children and adolescents account for 80 (51%) of these cases. Among them, only 45 (56%) are up to date with recommended pertussis vaccinations.

Infants have the highest risk of pertussis-related complications and death as well as the highest reported incidence rate. During 2003–2023, infants accounted for 12% of cases and 76% of pertussis hospitalizations. Oregon pertussis deaths have been limited to infants; five have occurred since 2003. Vaccination of pregnant women at 27–36 weeks' gestation with Tdap is highly effective at preventing pertussis hospitalization in their infants. Among 16 infant cases reported in Oregon to date in 2024, only one mother had a documented dose of Tdap during the pregnancy.

### **Key Recommendation:**

To protect young infants, all pregnant women should be vaccinated with Tdap during each pregnancy at 27–36 weeks gestation—irrespective of the mother's prior history of receiving Tdap. Tdap given to pregnant women will stimulate the development of maternal anti-pertussis antibodies, which will pass through the placenta and protect infants—particularly those too young to be vaccinated against the disease.

When an infant or pregnant woman is in the household of someone with pertussis, all household members should receive a course of antibiotics effective against *Bordetella pertussis*—typically, a 5-day course of azithromycin.

## **Other Recommendations:**

Vaccination against pertussis is routinely recommended for infants, children, adolescents, and adults.

1. Vaccinate children against diphtheria, tetanus and pertussis at 2, 4, 6 and 15–18 months, and again at 4 years to kindergarten age.

All persons ages 10 and older should receive a single dose of Tdap.

## **Guidance and Resources:**

1. Use of tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccines: updated recommendations of the Advisory Committee on Immunization Practices—United States, 2019. Available at <https://www.cdc.gov/mmwr/volumes/69/wr/mm6903a5.htm>.
2. Oregon Health Authority Public Health Division Pertussis Investigative Guidelines. Available at <https://www.oregon.gov/oha/PH/DiseasesConditions/CommunicableDisease/ReportingCommunicableDisease/ReportingGuidelines/Documents/pertussis.pdf>.

## **Additional resources:**

1. Maternal pertussis vaccination, infant immunization, and risk of pertussis. Available at <https://publications.aap.org/pediatrics/article/152/5/e2023062664/194349/Maternal-Pertussis-Vaccination-Infant-Immunization>.
2. Pertussis vaccine performance in an epidemic year—Oregon, 2012. Available at <https://pubmed.ncbi.nlm.nih.gov/24748523/>
3. Suffer the infants: a severe case of pertussis in Oregon, 2012. Available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4529826/>
4. <https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/DISEASESAZ/Pertussis1/Pertussis-PHR-Aug2019.pdf>

For questions, please contact Juventila Liko: [juventila.liko@oha.oregon.gov](mailto:juventila.liko@oha.oregon.gov).

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**Unless otherwise noted, feel free to share this HAN notification with:**

- Others within your organization.
- Professionals within your health, preparedness, and response affiliations.

**Oregon 24/7 disease reporting: 971-673-1111**