

Guidance on the Treatment and Prophylaxis of Pertussis Cases and Contacts

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Communicable Disease Epidemiology Program

CDPHE RECOMMENDED REGIMENS FOR TREATMENT OR PROPHYLAXIS OF PERTUSSIS				
Preference	Drug	Age Group	Dosage	Duration
1st choice(s):	Azithromycin (Zithromax)	< 1 month ⁺	10 mg/kg in single dose <i>(Preferred drug and limited safety data available)</i>	5 days
		1 – 5 months	10 mg/kg in single dose	5 days
		≥ 6 months	10 mg/kg in single dose on day 1 (maximum =500mg) and then 5 mg/kg in single dose (maximum=250mg) on days 2-5	5 days
	Clarithromycin (Biaxin)	< 1 month ⁺	Not recommended <i>(Safety data unavailable)</i>	NA
		≥ 1 month	15 mg/kg/day in 2 divided doses (maximum 500mg/dose)	7 days
2nd choice:	Erythromycin	< 1 month ⁺	<i>Not usually recommended, use associated with increased risk of IHPS*. Only use as alternate drug for infants < 1 month in doses listed below.</i>	NA
		≥ 1 month	40-50 mg/kg/ day in 4 divided doses (maximum 2 gm/day)	14 days
3rd choice:	Trimethoprim- sulfamethoxazole (Bactrim or Septra)	< 2 months	<i>Should not be used due to risk of kernicterus.</i>	NA
		≥ 2 months [†]	8 mg/kg/day of trimethoprim (maximum =320mg), sulfamethoxazole 40mg/kg/day (maximum =1600) in 2 divided doses.	14 days

⁺ All infants < 1 month of age who receive any macrolide should be monitored for development of IHPS.
^{*} Infantile hypertrophic pyloric stenosis.
[†] Trimethoprim-sulfamethoxazole should not be given to pregnant women, nursing mothers or infants < 2 months of age due to the risk of kernicterus.

For purposes of release from isolation, 5 days of treatment is required. The release from isolation assumes 100% compliance. The dosages as provided above should be used.

Notes

1. These guidelines differ from the American Academy of Pediatrics 2003 Red Book regarding azithromycin dosages for persons ≥ 6 months of age.
2. Please refer to the Physicians' Desk Reference (PDR) or a pharmacist for information regarding contraindications to these antibiotics.

References

Centers for Disease Control and Prevention. Recommended Antimicrobial Agents for the Treatment and Prophylaxis of Pertussis, 2005 CDC Guidelines. **MMWR** 2005; 54 (No. RR-14): 1-16.