

Provide the best prenatal care to prevent pertussis



Strategies for healthcare professionals



Pertussis is on the rise and outbreaks are happening across the United States. In recent years, up to 1,450 infants have been hospitalized and about 10 to 20 have died each year in the United States due to pertussis. Most of these deaths are among infants who are too young to be protected by the childhood pertussis vaccine series that starts when infants are 2 months old.

These first few months of life are when infants are at greatest risk of contracting pertussis and having severe, potentially life-threatening complications from the infection. To help protect babies during this time when they are most vulnerable, women should get the tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis (Tdap) vaccine during **each** pregnancy. A strong recommendation from you may ultimately be what most influences whether or not your patients' newborns are protected against pertussis.

Strongly recommend Tdap to your patients during the 3rd trimester of each pregnancy.

5 Facts about Tdap and Pregnancy

1. Tdap during pregnancy provides the best protection for mother and infant.

- Recommend and administer or refer your patients to receive Tdap during every pregnancy.
- Optimal timing is between 27 and 36 weeks gestation to maximize the maternal antibody response and passive antibody transfer to the infant.
- Fewer babies will be hospitalized for and die from pertussis when Tdap is given during pregnancy rather than during the postpartum period.

2. Postpartum Tdap administration is NOT optimal.

- Postpartum Tdap administration does not provide immunity to the infant, who is most vulnerable to the disease's serious complications.
- Infants remain at risk of contracting pertussis from others, including siblings, grandparents, and other caregivers.
- It takes about 2 weeks after Tdap receipt for the mother to have protection against pertussis, which means the mother is still at risk for catching and spreading the disease to her newborn during this time.

3. Cocooning alone may not be effective and is hard to implement.

- The term "cocooning" means vaccinating anyone who comes in close contact with an infant.
- It is difficult and can be costly to make sure that everyone who is around an infant is vaccinated.

4. Tdap should NOT be offered as part of routine preconception care.

- Protection from pertussis vaccines does not last as long as vaccine experts would like, so Tdap is recommended during pregnancy in order to provide optimal protection to the infant.
- If Tdap is administered at a preconception visit, it should be administered again during pregnancy between 27 and 36 weeks gestation.

5. Tdap can be safely administered earlier in pregnancy if needed.

- Pregnant women should receive Tdap anytime during pregnancy if it is indicated for wound care or during a community pertussis outbreak.
- If Tdap is administered earlier in pregnancy, it should not be repeated between 27 and 36 weeks gestation; only one dose is recommended during each pregnancy.

Resources about Tdap and Pregnancy for Healthcare Professionals

Get Reimbursed for Tdap Vaccination

Coding and billing are known barriers to administering vaccines during pregnancy. Correct coding enables an office to report these activities to third-party payers and receive appropriate reimbursement for these services.

- ACOG's Tdap Toolkit provides coding and billing information for Tdap: www.acog.org/TdapToolKit

Get Vaccine Referral Tips

Not all clinicians are able to stock and administer Tdap or influenza vaccines in their office.



- Making a Strong Vaccine Referral to Pregnant Women fact sheet offers tips to increase patient follow through for referrals: www.cdc.gov/pertussis/pregnant/hcp

Read the Current Recommendations

Advisory Committee on Immunization Practices: www.cdc.gov/mmwr/preview/mmwrhtml/mm6207a4.htm

American College of Obstetricians and Gynecologists: www.acog.org/TdapCommitteeOpinion

American College of Nurse-Midwives: <http://www.midwife.org/Immunization-in-Pregnancy-and-Postpartum>

Stay up to date on the studies that support the safe and effective use of the Tdap vaccine in pregnant women at www.cdc.gov/pertussis/pregnant/research.html

Get Free Materials for Your Patients

The following resources help explain the importance of and health benefits behind the Tdap recommendation. They are free to download and ready for color or black and white printing and reproduction. English and Spanish language versions are available.

Posters/Print Ads



English



Spanish

Q&A Fact Sheet



You can start protecting your baby from whooping cough before birth

Informational Article for Patient Newsletters and Websites



Record High Cases of Whooping Cough: Vaccinate to Protect



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

www.cdc.gov/whoopingcough

