Education
Healthcare
Public Services

WHOOPING COUGH FACT SHEET

WHAT IS WHOOPING COUGH?

Whooping cough, or pertussis, is a bacterial infection that can cause severe illness and be fatal to babies and young children. The disease is known for the violent and lengthy coughing fits it causes in adults and older children. Babies and young children who become infected may never develop the cough, but they can still struggle to breathe due to mucus clogging their small airways. This is what makes pertussis so dangerous for babies and young children: They cannot catch their breath and fight for air.

Why is whooping cough spreading?

Regular childhood vaccines are safe. Misinformation about vaccines makes some parents more cautious and hesitant, resulting in overall declining vaccination in children and a rise in preventable and dangerous diseases like whooping cough and measles. Pertussis cases have been rising since the early 2000s. The number of infected people in 2024 was the highest in a decade, with at least three deaths of young children reported. We have had 8,064 reported cases thus far in 2025 compared with 3,835 at this time in 2024.

Whooping cough vaccines work well, but the effectiveness of just one shot decreases over time. Pertussis is endemic in the United States, which means that the bacteria is regularly moving through the population and can infect and harm people who do not have adequate immune protection. Infants and young children need the complete vaccine series to be safe. Older children need a booster between ages 11 and 12. Adults need a booster shot once every 10 years. Getting a booster will not prevent all infections, but it helps the body's immune system to prepare in case of pertussis infection. Preparing the body with the vaccine eases any infection that may follow, reducing the severity of the disease, as well as the risk of hospitalization and death.

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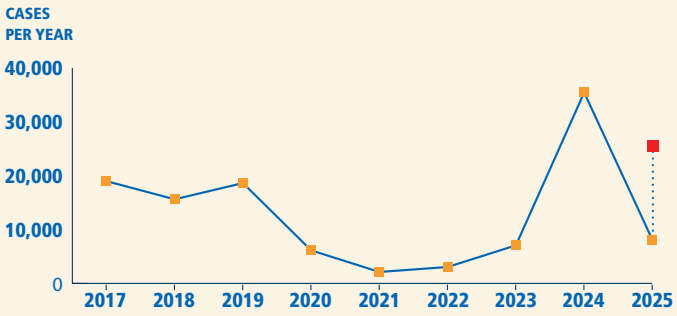
WHOOPING COUGH IS SPREADING

Pertussis cases dropped during the COVID-19 pandemic, but cases now are rising at alarming rates. More than six times as many cases were reported by the end of 2024 compared with the same time in 2023. And so far in 2025, healthcare professionals have seen more than twice the cases they did last year at this time.

As of 2025, there have been 8,064 cases reported, up from 3,835 in 2024. If we continue at 70 new cases per day, we can expect around 25,594 cases by year's end.



(2019-2023 citation; 2024 citation; 2025 citation)

Symptoms

Mild symptoms usually begin five to 10 days after exposure. The infection begins like a common cold, with nasal congestion, a low-grade fever (less than 100.4°F) and a mild, occasional cough.

Coughing fits develop one to two weeks after symptoms begin and get progressively worse. The spasmodic coughing can be so severe and uncontrolled that people can vomit or crack ribs. Patients may struggle to breathe and have difficulty sleeping, in spite of exhaustion. Pneumonia is the most common complication, which can be deadly to anyone.

This intense coughing stage usually lasts one to six weeks, but it can last up to 10 weeks. Recovery is slow. Coughing fits can return after patients have recovered from pertussis, but get new respiratory infections, such as a common cold, the flu or COVID-19.

Who is at risk?

Infants and young children who have not had all the recommended vaccines in the series are at highest risk for complications. About 1 in 3 babies younger than 12 months who have pertussis need care in the hospital. The younger the baby, the more likely they'll need hospital treatment. Infants under age 1 who are treated in the hospital can have:

- **Apnea** (life-threatening pauses in breathing): 2 in 3 (68 percent)
- **Pneumonia** (lung infection): 1 in 5 (22 percent)
- **Convulsions** (violent, uncontrolled shaking): 1 in 50 (2 percent)
- **Encephalopathy** (disease of the brain): 1 in 150 (0.6 percent)
- One in 100 (1 percent) **will die** from their complications.

HEALTH MISINFORMATION

Health misinformation is information that is false, inaccurate or misleading according to the best available evidence at the time. Health misinformation can be spread in many ways, including:

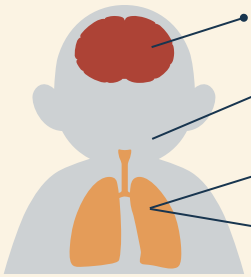
- **Memes that started out as a joke**—but people re-share, thinking the memes are true;
- **Websites** that look professional but include false or misleading stories;
- **Quotations** where the beginning or end have been deleted to change the meaning;
- **Cherry-picked, or carefully selected, statistics** that do not provide all the context for data;
- **Misleading graphs or diagrams** that look official but don't tell the whole story; and
- **Old images** that seem very recent, or even videos that have been edited to change meaning.

We are all susceptible to being influenced by misinformation, and it can be tempting to share because we like to feel we have information that others don't know. We may be seeking explanations or wanting to share information that helps us make sense of events. We want to protect the people we care about. And we want to feel connected to others.

You can help your family, friends and community with health misinformation: Listen. Empathize. Point to credible sources. Avoid shaming, and use inclusive language. Learn more with the **Office of the U.S. Surgeon General's Health Misinformation Community Toolkit**.

VACCINES KEEP KIDS SAFE!

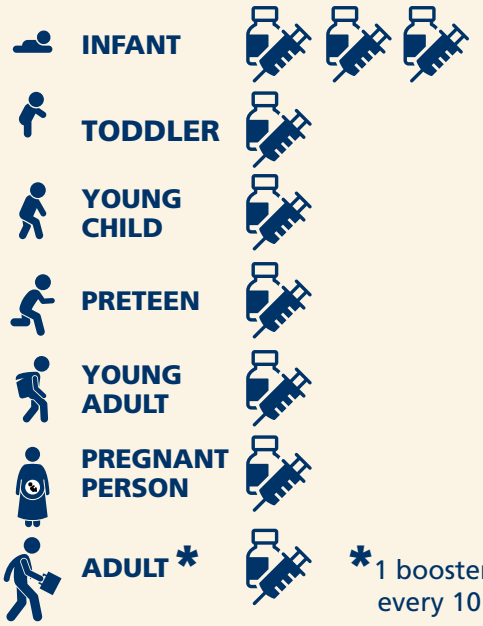
Regular vaccination can prevent:



- **Encephalopathy** (disease of the brain)
- **Convulsions** (violent, uncontrolled shaking)
- **Apnea** (life-threatening pauses in breathing)
- **Pneumonia** (lung infection)

REGULAR VACCINES PROTECT AGAINST WHOOPING COUGH.

Here's what's recommended for different ages:



Prevention

Ensuring that young children are up to date on their regular vaccines will prevent infection or protect them from severe disease and death. Older children (preteens) and adults need boosters every 10 years.

The vaccine series (DTaP and Tdap) recommended by the U.S. Centers for Disease Control and Prevention and the American Academy of Pediatrics provides protection from **D**iphtheria, **T**etanus, **a**nd **P**ertussis.

- Babies are given the DTaP vaccine at two, four and six months of age. Some vaccine brands also include protection from hepatitis B, polio and Haemophilus influenzae type b.
- Young children need a DTap booster between ages 15-18 months and again between ages 4 to 6.
- Preteens should get a Tdap booster between ages 11 to 12. Teenagers who didn't get the booster as a preteen should get one when they see their provider.
- Adults should get a Tdap booster every 10 years.
- Pregnant people should receive the Tdap during the early part of the third trimester, which helps to protect newborns from whooping cough.
  - This recommendation is supported by the American College of Obstetricians and Gynecologists, the American College of Nurse-Midwives, the American Academy of Pediatrics and the American Academy of Family Physicians.
  - Multiple safety systems track vaccine safety in pregnancy. The vaccine has a 10-year record of safety.

Vaccine Safety

Vaccines are safe for almost everyone. Vaccine safety is monitored by the federal government through the Vaccine Adverse Event Reporting System (VAERS), as well as by vaccine manufacturers. At this time, there are three types of people who should speak with their doctor before pursuing the DTaP vaccine:

- People who have had severe allergic reactions to a vaccine;
- People with Guillain-Barré syndrome; and
- People who have experienced severe pain or swelling after a vaccine.

None of the whooping cough vaccines (Tdap and DTaP) currently used in the U.S. contain thimerosal.

Treatment

Patients can be treated with antibiotics, which helps to clear the infection in the nasal passages and reduces the risk of the bacteria infecting others. Unfortunately, antibiotics do not stop the coughing, which is part of the body's immune response to the disease.

Contact **4healthandsafety@aft.org** for health and safety concerns.

Sources: Pertussis (Whooping Cough) | Whooping Cough | CDC
Vaccine Adverse Event Reporting System (VAERS)
Whooping Cough Cases Surge as Vaccine Rates Fall
Whooping Cough Surges as Uptake of Vaccines Falters