



October 24, 2017

TO: Physicians
Nurse Practitioners
Midwives

Re: Publicly Funded Pertussis-containing Vaccine is to be Offered to All Women as of 26 Weeks Gestation

Saskatchewan is currently experiencing increased pertussis (whooping cough) activity resulting in hospitalization of infants who are either too young to be immunized or who are under-immunized with a pertussis-containing vaccine. As a result, the following pertussis control measures are to be implemented immediately:

1. All pregnant women should be offered a publicly funded tetanus-diphtheria-pertussis (Tdap) vaccine dose as of 26 weeks gestation, irrespective of any Tdap dose given prior to their current pregnancy.
2. Publicly funded Tdap doses should be made available to healthcare providers of pregnant women from Public Health as per established local routine. Patient referral to Public Health for immunization may be required.
3. Infants should be prioritized by Public Health to start their DTaP-IPV-Hib immunization series no later than 2 months of age (eligible as of 6 weeks old). It is recommended to pre-book their first appointments to avoid immunization delays.
4. All household contacts of newborns should have their pertussis immunization status assessed (ideally before the baby is born) and be offered immunization when they are delayed (e.g. siblings) or are eligible for an adult Tdap dose. Adults are generally eligible for 1 Tdap dose in their lifetime when they are due for a tetanus booster every 10 years.
5. Tdap immunization should be promoted at every available opportunity to pregnant women and their families.

Background:

- These control measures will be re-evaluated in the spring of 2018.
- Maternal Tdap immunization as of 26 weeks gestation provides very good antibody protection against pertussis in infants up to 3 months of age.
- Tdap is most effective in providing pertussis antibodies in newborns when administered to pregnant women as of 26 weeks gestation, at least 2 weeks before the estimated delivery date. However, Tdap can be administered anytime during the second or third trimester (e.g. during the 28 week visit when pregnant women are routinely seen for glucose tolerance testing).
- Immunization between 13 and 26 weeks of gestation may also be considered in some situations (e.g. in case of an increased risk of preterm delivery) to allow for longer placental exposure to higher antibody levels and maximization of antibody transfer.
- If Tdap immunization was provided early in the pregnancy (e.g. prior to recognition of pregnancy), it is not necessary to re-immunize after 13 weeks gestation.
- Tdap should not be delayed until close to delivery since this may provide insufficient time for optimal transfer of antibodies and direct protection of the infant against pertussis.
- If a woman did not receive Tdap during pregnancy she should be offered Tdap post-partum.
- No safety issues have been detected in the currently available body of literature and no increased risk of serious adverse events (maternal, infant or in pregnancy) have been reported in countries that routinely offer Tdap immunization in pregnancy (e.g., US and UK for the last 3-5 years).
- In Saskatchewan all adults, including healthcare professionals, are eligible for one free dose of Tdap in their lifetime, with the exception of pregnant women.
- The Tdap dose can be given regardless of the interval since the person last received a tetanus or diphtheria toxoid-containing vaccine.
- Healthcare providers are encouraged to share the *Parents Can Protect their Babies from Pertussis* fact sheets posted at <https://www.saskatchewan.ca/residents/health/diseases-and-conditions/pertussis-whooping-cough>.
- The Tdap vaccine fact sheet is available at: <http://www.saskatchewan.ca/residents/health/accessing-health-care-services/immunization-services#immunization-forms-and-fact-sheets>

For more information, please contact your local Public Health Office.

Sincerely,



Dr. Saqib Shahab
Chief Medical Health Officer

cc: Medical Health Officers
 Public Health Nurse Managers
 Immunization Coordinators
 Public Health Nurses