



Pertussis Vaccination in Pregnancy

Why is vaccination against pertussis (whooping cough) important during pregnancy?

Although rates of pertussis are generally low in Canada, there have been a number of outbreaks in recent years. The vast majority of cases of pertussis are uncomplicated and do not require medical attention, however there are rare cases of serious complications, including death, from pertussis and babies are at the highest risk for these complications. In particular, babies who have not yet received a vaccine for pertussis are at greatest risk.

Babies cannot be vaccinated against pertussis until they are 2 months old, so a newborn is at risk of getting infected until he or she can receive a vaccine. Vaccinating a person in pregnancy may reduce the likelihood that their baby will be exposed to pertussis. Studies have shown that 90 percent of infants under three months of age are protected following maternal vaccination against pertussis during pregnancy. The vaccine protects in 2 ways: first by reducing the risk that the baby will be exposed to pertussis early in life by their parent, and secondly by allowing maternal antibodies to pertussis to cross the placenta and enter the baby's circulation prior to birth.

Is the vaccine safe during pregnancy?

Tdap (combined tetanus, diphtheria and pertussis) vaccination in pregnancy has been shown in studies to be very safe. The vaccine contains pertussis bacteria that have been made inactive and proteins from tetanus and diphtheria that contain no bacteria. There are no known harmful effects on the developing baby.

When and how often should the pertussis vaccine be given?

The vaccine is ideally given between 27 and 32 weeks of pregnancy, but can be given any time after 13 weeks of pregnancy. Following vaccination, the pregnant person produces antibodies against the bacteria. These antibodies cross the placenta to the fetus, protecting the newborn against infection after delivery. It is recommended that pregnant people receive a Tdap vaccine during every pregnancy, regardless of when prior vaccinations were given, in order to provide maximum protection for the newborn.

Who else in the household should get a Tdap vaccine?

All family members and caregivers who will have close contact with the newborn should consider getting a Tdap "booster" vaccine. Even if they have received a standard tetanus

booster within the past 10 years, they should consider a Tdap vaccination at least 2 to 3 weeks before the baby is born, to make sure immunity has started to develop.

What are some side effects of the Tdap vaccine?

The vaccine has very few side effects. Pain and redness can occur where the injection is given. Rarely, inflammation of the blood vessels where the injection is given can occur. If any pain, redness, or swelling persists beyond a few days, contact your healthcare provider. Other rare side effects include fever and chills.

Where can I get a Tdap vaccine?

You can make an appointment with your family doctor or nurse practitioner to get a Tdap vaccination. The cost may be covered by OHIP or supplemental health insurance. If you do not have a family doctor, you can contact your local Public Health Unit to arrange vaccination.

Health Canada update, March 2018:

<https://www.canada.ca/en/public-health/services/publications/healthy-living/update-immunization-pregnancy-tdap-vaccine.html>

Q&A from the Society of Obstetricians and Gynecologists of Canada, March 2018:

https://sogc.org/files/MCC_11776_Pertussis_WhoopingCough_QAInfographic_PRESS.PDF