

## **Health Protection Report**

weekly report

#### Infection (news) report

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### Laboratory confirmed pertussis in England: data to end-October 2014

This news report presents current pertussis activity to 31 October 2014, updating the previous report that included data to the end of August 2014 [1].

Overall pertussis activity in England in 2014 persists at raised levels compared to the years preceding the national outbreak declared in 2012 (see figure) [2]. Expected seasonal increases were observed in August and September with confirmed cases falling in October.

The pertussis vaccination in pregnancy programme was introduced in October 2012 to protect infants in their first few weeks of life. Confirmed pertussis cases in infants less than six months of age have remained low despite the continued high activity in other age groups. The immunisation programme for pregnant women continues to be important, particularly in light of the ongoing raised levels of pertussis in those from one year of age and recent infant deaths. There have been recent key publications on the high effectiveness and safety of the programme [3,4,5].

Available data relating to the coverage, effectiveness and safety of the immunisation programme for pregnant women, its impact on disease and current epidemiology were considered by the Joint Committee on Vaccination and Immunisation (JCVI) in June 2014 and the committee advised that the programme should be continued for at least a further five years [6].

In infants under three months of age low numbers of cases have been sustained since December 2012 with fewer than 10 cases per month reported up to August 2013 and six or fewer reported each month between September 2013 and March 2014. Cases increased from April 2014, in line with expected seasonal increases, peaking at 21 cases in July 2014, the highest number of monthly cases since the 23 reported in November 2012. The number of cases aged under three months, or aged 6-11 months, confirmed between January and October 2014 exceeds the total number reported in 2013 for these age groups. The greatest reduction in disease since the peak in 2012 has, however, been in infants under six months of age. Disease

incidence has, as expected, continued to be highest in this age group but case reports are now in line with those seen before the 2012 peak. There have been seven deaths reported in young babies (under 10 weeks) diagnosed with pertussis this year. Ten deaths have been reported in young babies with confirmed pertussis who were born after the introduction of the pregnancy programme on 1 October 2012. Nine of these 10 babies were born to mothers who had not been vaccinated against pertussis, all of the 10 babies were too young to be fully protected by vaccination themselves and none had received their first dose of pertussis-containing vaccine.

Pertussis activity in infants aged six to 11 months and one to four years of age remained low but confirmed cases were higher to the end of October 2014 than the equivalent period in the previous six years, other than the peak in 2012. Whilst small numbers of cases were confirmed in those aged five to nine years, these increased slightly from February 2014 and in the first 10 months of 2014 exceeded the total in 2013. Cases in this age group persist at levels notably higher than those confirmed prior to 2012.

Pertussis activity in adolescents, teenagers and adults (aged from 10 years of age) continued to decrease overall (see table 1) with a small seasonal peak into August and September 2014. Overall, confirmed cases of pertussis were lower between January and October 2014 than in the first 10 months of the two preceding years but cases continued to exceed those confirmed in years prior to 2012. This pertussis activity has been observed across all regions in England with relatively high numbers of cases in 2014 reported from Yorkshire and Humber and from Surrey, Sussex and Kent (see table 2).

The pertussis vaccination in pregnancy programme continues to be important for the prevention of serious disease and death in young babies. To optimise protection of their babies, women should ideally be immunised between 28 and 32 weeks gestation but may be immunised up to week 38 of pregnancy. Pregnant women who remain unprotected can be offered vaccination after 38 weeks as can new mothers who have not been vaccinated in pregnancy. Vaccination at this stage is not ideal, however, as it would potentially only directly protect the mother against disease and thereby just reduce the risk of exposure to her infant.

The latest vaccine uptake report for April to August 2014 estimates that approximately 54% of all pregnant women in England are currently being vaccinated in pregnancy [7]. This is important because around 75% of all cases of pertussis in babies occur before they can be protected by even the first dose of infant vaccine and when there is a high risk of serious disease. The babies that have died from pertussis in England over recent years all acquired pertussis in the first few weeks of life and nine of the 10 babies who died between January 2013

and October 2014 were born to mothers who were not vaccinated during pregnancy. Information generated from the pertussis immunisation in pregnancy programme in England has shown high levels of protection against disease in babies born to vaccinated women. Babies born to women vaccinated at least a week before delivery had a reduction in the risk of disease in their first weeks of life of greater than 90% when compared to babies whose mothers had not been vaccinated [3,5]. In addition, no safety concerns were found relating to pertussis vaccination in pregnancy in a study undertaken by the Medicines and Healthcare Products Regulatory Agency [4].

# Provisional number of laboratory confirmed cases of pertussis in England by age group and month: January 2011 to October 2014

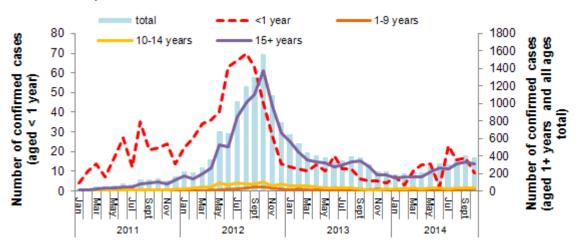


Table 1. Provisional number of laboratory confirmed cases in England, 2008-2014 by age group: January to August

| Year | Month     | <3 months | 3-5 months | 6-11 months | 1-4 years | 5-9 years | 10-14 years | 15+ years | All ages |
|------|-----------|-----------|------------|-------------|-----------|-----------|-------------|-----------|----------|
| 2008 | Jan - Aug | 135       | 24         | 6           | 18        | 13        | 103         | 311       | 610      |
| 2009 | Jan - Aug | 75        | 19         | 1           | 18        | 19        | 67          | 277       | 476      |
| 2010 | Jan - Aug | 40        | 7          | 2           | 7         | 9         | 30          | 151       | 246      |
| 2011 | Jan - Aug | 101       | 19         | 6           | 8         | 11        | 61          | 294       | 500      |
| 2012 | Jan - Aug | 285       | 58         | 15          | 35        | 89        | 483         | 3655      | 4620     |
| 2013 | Jan - Aug | 66        | 23         | 7           | 36        | 64        | 362         | 2933      | 3491     |
| 2014 | Jan - Aug | 69        | 10         | 9           | 24        | 77        | 233         | 1678      | 2100     |

Table 2. Provisional number of laboratory confirmed cases in England, 2008-2014 by PHE Region and PHE Centre: January to August

|                                     | 2008      | 2009      | 2010      | 2011      | 2012      | 2013      | 2014      |
|-------------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| PHE Region and Centre               | Jan - Aug |
| London                              | 68        | 62        | 29        | 55        | 348       | 362       | 325       |
| Anglia and Essex                    | 46        | 41        | 11        | 41        | 375       | 291       | 164       |
| East Midlands                       | 42        | 38        | 13        | 53        | 509       | 389       | 160       |
| South Midlands and Hertfordshire    | 19        | 9         | 7         | 28        | 214       | 109       | 85        |
| West Midlands                       | 56        | 30        | 10        | 32        | 320       | 283       | 177       |
| Midlands and East of England Total  | 163       | 118       | 41        | 154       | 1418      | 1072      | 586       |
| Cheshire and Merseyside             | 31        | 22        | 8         | 14        | 75        | 119       | 60        |
| Cumbria and Lancashire              | 19        | 30        | 22        | 32        | 95        | 82        | 31        |
| Greater Manchester                  | 18        | 8         | 9         | 11        | 126       | 75        | 51        |
| North East                          | 34        | 14        | 28        | 46        | 193       | 188       | 47        |
| Yorkshire and Humber                | 41        | 36        | 26        | 37        | 568       | 388       | 300       |
| North of England Total              | 143       | 110       | 93        | 140       | 1057      | 852       | 489       |
| Avon, Gloucestershire and Wiltshire | 72        | 49        | 14        | 42        | 593       | 342       | 118       |
| Devon, Cornwall and Somerset        | 32        | 24        | 28        | 20        | 198       | 200       | 81        |
| Sussex, Surrey and Kent             | 43        | 50        | 13        | 53        | 540       | 435       | 275       |
| Thames Valley                       | 56        | 39        | 21        | 22        | 173       | 85        | 101       |
| Wessex                              | 33        | 24        | 7         | 14        | 293       | 143       | 125       |
| South of England Total              | 236       | 186       | 83        | 151       | 1797      | 1205      | 700       |
| England Total                       | 610       | 476       | 246       | 500       | 4620      | 3491      | 2100      |

#### References

- 1. Confirmed pertussis cases in England and Wales: update to end-August 2014, *HPR* **8**(38): news, 3 October 2014.
- 2. The outbreak was declared in April 2012 in response to the ongoing increased pertussis activity (see HPR 6(15)).
- 3. Amirthalingam G, Andrews N, Campbell H, et al. Effectiveness of maternal pertussis vaccination in England: an observational study, *Lancet* 2014.
- 4. Donegan K, King B, Bryan P. Safety of pertussis vaccination in pregnant women in the UK: observational study, *BMJ* 2014.
- 5. Dabrera G, Amirthalingam G, Andrews N *et al* (2014). A case-control study to estimate the effectiveness of maternal pertussis vaccination in protecting newborn Infants in England and Wales, 2012–2013, *Clinical Infectious Diseases* (online), 19 October.
- 6. Joint committee of Vaccination and Immunisation minutes.
- 7. Pertussis Vaccination Programme for Pregnant Women: vaccine coverage estimates in England, October 2012 to March 2014 (PHE statistics).