

Pertussis Treatment and Chemoprophylaxis Recommendations

Antibiotic	Infants (< 6 months of age)	Infants (≥ 6 months of age) and Children	Adults
Azithromycin***	< 1 month: Recommended agent. 10	10 mg/kg in a single dose on day 1	500 mg in a single dose on day 1
(Zithromax®)	mg/kg/day in a single dose for 5 days 1-5 months: 10 mg/kg/day in a single dose for 5 days	then 5 mg/kg per day on days 2-5 (Max 500mg)	then 250 mg per day on days 2-5
Erythromycin	< 1 month: Not preferred, associated	40-50 mg/kg/day PO, in 4 divided	2 g per day in 4 divided doses for
(E-mycin®,	with IHPS.*	doses for 14 days	14 days
Eryc®, EryTab®)	1-5 months: 40-50 mg/kg per day in 4 divided doses for 14 days	(Max 2 g/day)	
Clarithromycin	< 1 month: Not recommended	15 mg/kg/day PO in 2 divided doses	1 g per day in 2 divided doses for
(Biaxin®)	1-5 months: 15 mg/kg/day in 2 divided	for 7 days	7 days
	doses for 7 days	(Max 1 g/day)	-
Trimethoprim-	<2 months: Contraindicated	TMP 8 mg/kg/day, SMZ 40 mg/kg/day	TMP 320 mg/day, SMZ 1600
Sulfamethoxazole	2-5 months: TMP 8 mg/kg/day,	in 2 divided doses for 14 days	mg/day in 2 divided doses for 14
(Bactrim [™] ,	SMZ 40 mg/kg/day in 2 divided doses		days
Septra®)	for 14 days		

SMZ = sulfamethoxazole, should not be given to pregnant women near term, nursing mothers, or infants < 2 months of age

Source: Centers for Disease Control and Prevention. Recommended Antimicrobial Agents for Treatment and Postexposure Prophylaxis of Pertussis. MMWR 2005;54 (No. RR-14):10.

TMP = trimethoprim, should not be given to pregnant women near term, nursing mothers, or infants < 2 months of age

^{*}Infantile hypertrophic pyloric stenosis.