VaxWorks
health services + training

Whooping cough (pertussis) vaccine

Information Sheet

Whooping cough (pertussis) is a serious respiratory infection which can be life-threatening to babies.
Vaccination is safe, highly effective and protects against pertussis plus tetanus and diphtheria.

Key points

- The dTpa vaccine protects against three diseases: whooping cough, tetanus and diphtheria.
- Whooping cough can cause weeks of severe coughing and can be life-threatening for young babies.
- Protection from infection or vaccination decreases over time; boosters are important for certain adults.

What are pertussis, tetanus and diphtheria?

Pertussis is caused by Bordetella pertussis bacteria. It spreads through respiratory droplets during coughing, sneezing and close contact. Early symptoms resemble a cold, followed by coughing fits that can cause vomiting or a “whoop”. Adults may have a persistent cough without a whoop and can still infect others.

Pertussis can be life-threatening for babies.

Tetanus bacteria in soil or the environment can enter broken skin and produce a toxin that causes painful muscle stiffness and spasms, including lockjaw and breathing difficulties. Tetanus is rare in Australia but can be fatal.

Diphtheria spreads through respiratory droplets or contact with infected skin sores. It can cause a thick coating in the throat, breathing problems, and heart or nerve damage.

The dTpa vaccine provides protection against all three diseases.

Why vaccinate?

Vaccination helps protect others, especially young babies who are not yet fully vaccinated. Whooping cough can cause breathing pauses, pneumonia and serious complications in infants. Vaccination during pregnancy also passes protective antibodies to the baby, reducing pertussis risk in young infants by about 90%. The vaccine does not prevent every infection, and protection wanes.

Who should be vaccinated?

- Healthcare workers and early childhood educators/carers of children under 4: dTpa every 10 years.
- Pregnant women: one dTpa dose in every pregnancy, preferably at 20–32 weeks; if missed, give as soon as possible before birth.
- Parents, household contacts and carers of babies under 6 months: dTpa at least 2 weeks before close contact if the last dose was over 10 years ago.
- Adults aged 50 and 65: a dTpa booster may be recommended depending on previous doses.

Primary course and boosters

Adults with missing or uncertain pertussis/tetanus/diphtheria vaccination history may need a three-dose primary course. At least one dose should be dTpa; the remaining doses are usually diphtheria and tetanus only. Earlier valid doses count, so a course does not need restarting. Ask your vaccinator to check your record.

Which vaccines contain pertussis, tetanus and diphtheria?

dTpa vaccines available for adults in Australia include:

- Adacel; and
- Boostrix.

The dTpa vaccine contains no live pertussis bacteria and cannot cause whooping cough.

Tell your provider before vaccination

Mention previous anaphylaxis to a dose or ingredient; serious neurological illness following a pertussis vaccine; significant current illness; or previous severe swelling after a tetanus-containing vaccine. A mild cold usually does not require postponement. The dTpa vaccine is recommended and safe during pregnancy.

Possible reactions

Soreness, redness or swelling at the injection site, headache, tiredness or mild fever are common and usually short-lived. Serious allergic reactions are very rare.

Allergic reactions and when to seek help

Remain at the vaccination site for 15 minutes. Call 000 for breathing difficulty, tongue or throat swelling, persistent dizziness or collapse. Seek advice for serious or unexpected reactions and contact VaxWorks.

If you have symptoms

Seek medical advice if you develop a prolonged or severe cough, particularly after contact with a baby or pregnant person. Early treatment can reduce spread. Avoid close contact with vulnerable people until advised it is safe.

References: Australian Immunisation Handbook – Tetanus; Pertussis (updated 2026).

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