



Government of Samoa

# Ministry of Health

## Pertussis Surveillance Situation Report No.6

### Epiweek 01: 30 December 2024 - 05 January 2025

**Date of report:** 06th January, 2025  
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**Reporting period:** 12:00AM 30th December - 12:00AM 06th January 2025  
**Prepared by:** Health Security & Disease Surveillance Division  
**Distribution:** **EXTERNAL**

#### INTRODUCTION

Under the Samoa Health Ordinance 1959, through the national communicable disease surveillance and control guideline, health professionals are required to report cases or clusters of notifiable diseases. The Health Security & Disease Surveillance Division coordinates surveillance and reporting on notifiable diseases. Enhanced surveillance measures for pertussis surveillance include multisource surveillance, strengthening laboratory testing and referral, and monitoring at point of entry. The report was prepared as a collaborative effort of all health professionals and is a work in progress. We thank all contributors to communicable disease surveillance.

#### SITUATION SUMMARY

A pertussis epidemic was declared on 28th November 2024 following the increase of pertussis cases in Samoa. The Health Security and Disease Surveillance Division (HSDSD) has been investigating any suspected or confirmed cases and contacts to prevent further transmission and reduce the risk of transmission in the population.

Since September 2024, 321 suspected and confirmed cases have been detected.

- A cumulative total of 321 cases (17 confirmed and 304 suspected) were notified from epi weeks 46-52 (2025) and epi week 1 (2026); reflecting a cumulative incidence rate of 156.2 cases per 100,000 people.
- Upolu is the most affected island with 99% of cases; one case has been reported from Savaii.
- 156 (49%) cases are under five years of age with 101 cases (31%) less than 1 year old. Cases are 47% female & 53% male.
- Earliest onset of cough reported at 16th September 2024.
- 38% of all cases were hospitalized at TTMH
- A subset of the 267 cases with samples collected to test for pertussis were referred overseas to Labplus (Auckland) and VIDRL (Melbourne) for confirmatory testing; laboratory results indicate **17** are confirmed **positive** for pertussis, 42 are negative, and 52 are pending results.
- Of the 17 confirmed cases, four cases had incomplete vaccination. Vaccination status is under investigation for the remaining confirmed cases.

#### Vaccination

- The national routine immunization coverage for Samoa from Jan-Oct 2024 for pertussis dose 1 given at 6 weeks is 100% with 724 catch-up doses; dose 2 given at 10 weeks is 95% with 753 catch up doses; dose 3 given at 14 weeks is 86% with 1,053 catch up doses; and dose 4 (booster dose) given at 15 months is 65% with 600 catch up doses.

#### Response

- A clinicians' alert was issued to all clinicians urging them to remain vigilant for the signs and symptoms of pertussis, and to encourage testing and reporting of all suspected and confirmed cases to the HSDS Division for appropriate response.
- Case investigation and contact tracing all suspected pertussis cases is currently under way along with sample collection for testing
- The Risk Communication and Community Engagement (RCCE) Committee is actively working to promote awareness on preventative measures and vaccination.

#### TRENDS IN PERTUSSIS CASES

Figure 1: Number of pertussis cases by laboratory confirmation and onset date of cough, Sep - Dec 2024

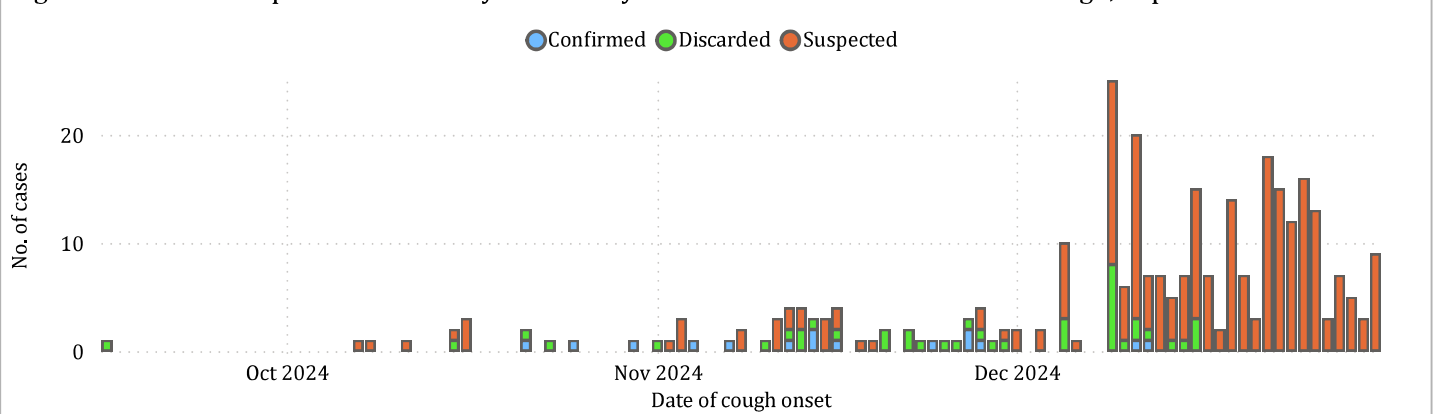


Figure 2: Confirmed cases by month of onset of symptoms, Sep - Dec 2024 (N=17)

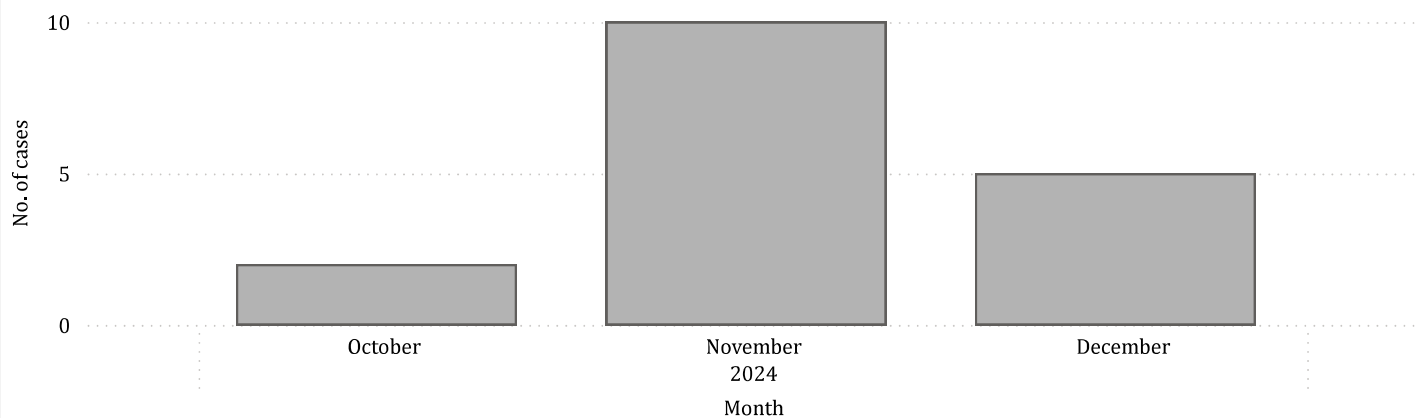


Figure 3: Map of suspected and confirmed cases



Figure 4: Cases by gender (N=321)

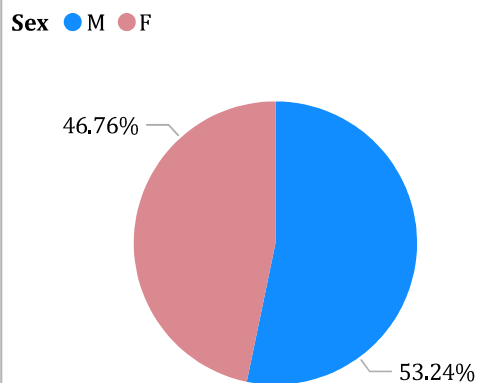
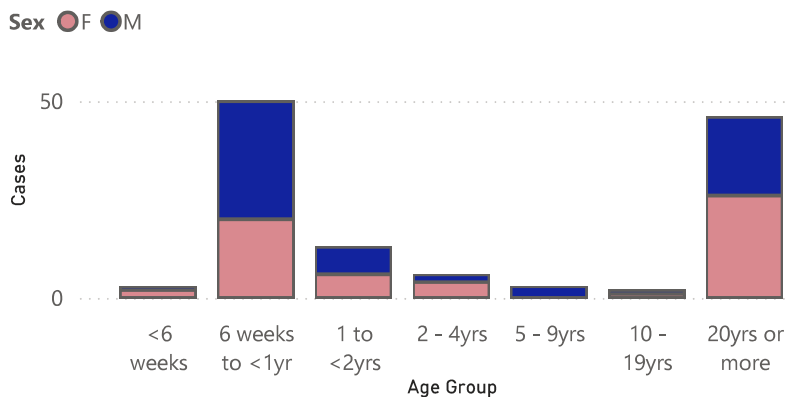


Table 1: Age distribution of all cases, Samoa

No	Age Group	Cases	Proportion
1	<6 weeks	4	1.29%
2	6 weeks to <1yr	97	30.10%
3	1 to <2yrs	29	9.39%
4	2 - 4yrs	26	8.41%
5	5 - 9yrs	14	4.53%
6	10 - 19yrs	20	6.15%
7	20yrs or more	130	41.42%
8	Unknown	1	0.32%
<b>Total</b>		<b>321</b>	<b>100.00%</b>

Figure 5: Admission by age and gender (N=123)



**SYNDROMIC SURVEILLANCE (SARI)**

Figure 6: SARI cases, Syndromic Surveillance, January 2024 to present

