

TESTING GUIDELINES: LIMITATIONS ON BORDETELLA PERTUSSIS SEROLOGY REQUESTING

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Valued Clients,

When considering testing for Bordetella Pertussis, PCR is the test of choice during the acute stages of pertussis infection, up to 4 weeks after the onset of symptoms.

Serology has often been utilised in patients who have a longer duration of symptoms. However Bordetella pertussis serology suffers from sub-optimal sensitivity and specificity and should only be considered for use in carefully selected patients. It is not recommended during the first 4 weeks of the illness. The usefulness of B. pertussis serology in patients with a longer duration of symptoms is controversial.

The presence of B. pertussis IgG is not a reliable indicator for a patient's immune status and should not be used in this context. We do not process samples for Bordetella immunity status. Where immune status is needing to be assessed, immunisation history and/or booster immunisation is recommended.

Diagnosis of Bordetella Pertussis in an outbreak situation should generally be done on clinical presentation.

Serology is still of value for epidemiological surveillance and will from the 1st January 2020 routinely only be performed when requested by a public health team involved in outbreak management. Requests for Pertussis serology received that do not fit this criteria will not routinely be tested. The specimen will be held for seven (7) working days prior to discard. If testing is clinically indicated please contact the clinical microbiologist to discuss.

For information on Bordetella Pertussis Serology testing please refer to Test Manager Guide on the Canterbury Health Laboratories website.

For any enquiries please contact:

Dr Joshua Freeman
Clinical Director, Microbiology
03 378 6601