INTRODUCTION AND AIM OF THE WORK

INTRODUCTION

Whooping cough is mainly a disease of early childhood, most common in girles than boys, the opposite to most infectious diseases. Whooping cough can be a disease with a variety of serious complications (Jenkins & Pepper, 1982).

Scientists don't adequately understand, how the disease develops or which components of the bacteria are toxic and which promote immunity. This partly due to the fact that, the organism is difficult to grow and that scientists lacke a suitable animal model because B. pertusses only causes whooping cough in human (Sun, 1985).

Whooping cough is an infectious, contagious and communicable disease, caused by Bordetella pertussis and to a lesser extent caused occasionally by B. parapertussis (Feigin, 1983).

Pertussis is an acute tracheobronchitis affecting only human who considered to be the only reservoir (Smith, 1983). B. pertussis plays the primary role in aetiology of the disease in human, the role of adenoviruses still controversial. Although the infection may occur at any age, the clinical disease is most frequent in older infants and children (Nelson et al., 1975).

Pertussis is a serious disease of infants. In areas where vaccine acceptance is high, protection of infants before vaccination is due to partly to herd immunity. The risks of serious complications and death from pertussis are greatest in infants especially less than 6 mo of age (Show, 1982, Burstyn et al., 1983; Baraff et al., 1984).

Atypical whooping cough is a problem both in clinical and laboratory diagnosis (Viljanen et al., 1982).

Our aim in this study is to throw light on all aspects of whooping cough.