



Epidemiology Unit

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Mumps Fact Sheet

Introduction

Mumps is an acute viral disease characterized by fever, swelling and tenderness of one or more of the salivary glands, including the parotid gland located just below the front of the ear.

Mode of Transmission

Mumps is transmitted by direct contact with saliva and discharges from the nose and throat of infected individuals.

Incubation period

The incubation period is usually 16 to 18 days, although it may vary from 12 to 25 days.

Period of communicability

Mumps is contagious 3 days prior to and 9 days after the onset of symptoms.

Clinical manifestation

Symptoms of mumps include fever, headache, muscle aches, tiredness and loss of appetite followed by swelling and tenderness of one or more of the salivary glands, usually the parotid gland. Approximately one-third of the infected people do not have apparent salivary gland swelling. Mumps infections below 2 years of age children is very mild or mainly sub clinical.

Severe complications are rare. However, mumps can cause inflammation of the brain and/or tissue covering the brain and spinal cord (encephalitis/meningitis), inflammation of the testicles (orchitis), inflammation of the ovaries (oophoritis) and/or breasts (mastitis), spontaneous abortion and deafness which is usually permanent.

Immunity acquired after contracting the disease is usually long term.

Treatment

There is no specific treatment for Mumps and usually symptomatic treatment is given.

Prevention

1) Pre-exposure Immunization

Immunization with Mumps vaccination will prevent the occurrence of Mumps. Mumps vaccines are available, either as monovalent or in combination with measles and rubella vaccine (MMR vaccine). The vaccines are highly protective and without significant adverse effects.

At present mumps vaccine is available only in combination with Measles and Rubella vaccines as MMR vaccine in Sri Lanka. Mumps containing vaccine is usually administered between 12 – 18 months of age. Any susceptible individual who is more than one year of age could be immunized with mumps containing vaccine at any age.

2) Isolation of cases and contacts

Persons diagnosed with mumps should remain at home during their infectious period (until nine days after the onset of symptoms). Preferably all the contacts also should be quarantined for a period of more or less equivalent to the incubation period to prevent further spread of the disease.

3) Concurrent disinfection

Frequent hand washing using soap or an alcohol-based hand gel, non sharing of eating utensils, towels and bed linen and regular cleaning of frequently touched surfaces may minimize the spread among immediate contacts.

6) Investigation of contacts and source of infection

Mumps is a notifiable disease in Sri Lanka. Upon notification cases of mumps should be investigated by the MOH and his team. This should be followed by isolation of cases and contacts where necessary.

References

World Health Organization – position paper, Chickenpox vaccine; Weekly epidemiological record. 1998, 82 ; 49-60

Heymann L D 2004, Chickenpox control of communicable diseases manual, 18th edition; pg