

Mumps - Flowchart and Guidance for Health Professionals

Clinical Assessment – consider mumps in any patient presenting acutely with:

- unilateral or bilateral tenderness and swelling of the parotid or other salivary gland/s lasting more than 2 days;
- with or without fever; and
- without other apparent cause.

Rare symptoms include: orchitis, mastitis, oophritis, meningitis, encephalitis, pancreatitis and hearing loss.

Factors that should increase your index of concern:

- Known outbreak or epidemic of mumps;
- Recent international travel;
- Contact history with cases or suspected cases of mumps;
- Unimmunised or not fully immunised;
- Aged between 12 and 29 years (some will not have received 2 doses of MMR due to changes in immunisation schedule);
- Health care worker, pregnant or immunocompromised.

If you suspect mumps:

Investigations: if within 7 days of the onset of parotitis, please send a buccal viral swab for mumps PCR, ensuring

- a virocult swab is used with viral transport media;
- the swab is taken from between the cheek and gum, near the rear molars on the affected side;
- immunisation status and date of parotitis onset is documented on the lab form.

If considering any testing beyond 7 days of parotitis onset - please discuss with public health or microbiology.

Exclusion:

- please ask the contact to avoid contact with susceptible people*, and stay away from work, ECE, school, or tertiary education until **5 days after the onset of parotitis or glandular swelling.**

Advice:

- please advise on the importance of good hand hygiene, cough and sneeze etiquette and not sharing food, drinks, or utensils with others.

*People susceptible to mumps:

- born from 1981; and
- no previous mumps infection; and
- not received two doses of MMR.

Contacts – identification and advice:

A **close contact** is any person who has had face-to-face contact (less than one metre) with the case within the infectious period i.e. two days before to five days after the onset of parotitis or glandular swelling.

Please identify any close household contacts of the case and whether they are susceptible* to mumps. All susceptible household contacts should be offered MMR vaccination (unless pregnant or immunocompromised).

If possible, please also identify and advise public health of any susceptible close contacts who:

- work in healthcare settings;
- live or work with someone who is immunocompromised;
- attend or work in an ECE, school or tertiary education setting.

All contacts (whether susceptible to mumps or not) should receive advice:

- to maintain good hand hygiene, cough and sneeze etiquette and avoid sharing food, drinks, or utensils with others;
- on the incubation period (12 – 25 days) and common symptoms of mumps;
- to seek early medical attention (calling ahead first), and avoid contact with others if develop any symptoms of mumps.

Case Notification (suspected or confirmed):

- Please complete the notification form and notify public health as soon as possible by:

- fax to **0800 66 89 34**;
- email to DgCD.Admin@bopdhb.govt.nz; or
- phone: **0800 221 555**

- For infectious disease updates, see: www.toiteora.govt.nz then select the 'Health Professionals' tab.

Public Health will:

- 1) Review and follow up public health aspects of case and contact management.
- 2) Collect data for national surveillance.
- 3) If relevant, follow-up with workplaces, ECEs, schools and tertiary education settings, etc.

