

November 15, 2019

Mumps in Kitsap County

Actions Requested

- **Be aware Kitsap County has a cluster of 5 probable mumps cases. Notify us if you have a suspected case of mumps.** Please call when the patient is at the facility to discuss the possible case. Mumps is notifiable to public health within 24 hours.
- **Be aware of the signs and symptoms of mumps**, which include pain/tenderness in one or both parotid salivary glands, low-grade fever, myalgia, anorexia, malaise, and headache. Mumps can also present with only nonspecific or primarily respiratory symptoms. Infection can also be asymptomatic.
- **Collect specimens as close to the onset of symptoms as possible.** RT-PCR testing is recommended and available at WA Public Health Laboratories upon approval by KPHD. Specimens include **buccal swab** and **urine** depending on the timing of specimen collection in relation to symptom onset.
- **Instruct patients suspected or confirmed to have mumps to stay home** and not go to school, work, public places or social activities for 5 days after the onset of parotitis. Family members who are not immune should avoid contact during the time the case is infectious.
- **Know the immunization status of staff, patients, clients, and students and encourage unvaccinated individuals to consider vaccination.** The current recommendation for protection against mumps is to have two doses of MMR or MMRV vaccine. **Mumps-containing vaccine cannot be used to prevent the development of mumps after exposure.**

For questions, please contact our Communicable Disease staff at (360) 728-2235

Background

The Kitsap Public Health District is investigating 5 probable cases of mumps. Mumps can present in vaccinated and unvaccinated individuals.

Mumps usually involves pain, tenderness, and swelling in one or both parotid salivary glands (cheek and jaw area). Nonspecific prodromal symptoms may precede parotitis by several days, including low-grade fever which may last three to four days, myalgia, anorexia, malaise, and headache. Fever may persist for 3 to 4 days. Parotitis, lasts at least 2 days, but may persist longer than 10 days. However, mumps infection may present only with nonspecific or primarily respiratory symptoms or may be asymptomatic.

Mumps infection is most often confused with swelling of the lymph nodes of the neck. Lymph node swelling can be differentiated by the well-defined borders of the lymph nodes, their location behind the angle of the jawbone, and lack of the ear protrusion or obscuring of the angle of the jaw, which are characteristics of mumps. People with mumps are usually considered most infectious for two days before and five days after onset of parotitis.

Resources

- WA DOH Mumps web page - <https://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/Mumps>

Attachment

- Suspect Mumps Checklist

Suspect Mumps Case Checklist



KITSAP PUBLIC
HEALTH DISTRICT

Consider mumps in the differential diagnosis of patients with compatible symptoms, including:

- Non-specific prodrome of low-grade fever, malaise, headache, myalgia, and anorexia.
- Swollen tender salivary glands near lower ears on one or both sides (parotitis).
- Orchitis (may develop in <10% of males with mumps infection).

- Call Kitsap Public Health District at (360) 728-2235 (24/7) for guidance on testing and to report possible mumps cases.**
- Use droplet and standard precautions.** Ensure suspect mumps cases wear a mask that covers the nose and mouth and ensure that only staff with documented immunity to mumps are allowed to enter the patient's room.
- Order RT-PCR tests for mumps through public health:**
 - **On days 0-3 after onset of parotitis** (with the day of onset being day 0), collect a buccal swab.
 - Massage the parotid gland for about 30 second prior to collecting specimen. Place a Dacron (or polyester, NOT cotton) swab between the rear molars and cheek (on the affected side if parotitis is unilateral) and leave in place 10-15 second. Place swab in a tube containing 2-3 mL of cold viral transport medium.
 - Tape or parafilm the tubes to prevent leaking. Make sure patient name and second identifier are on the samples.
 - **On days 4-10 after onset of parotitis** (with the day of onset being day 0), collect both a buccal swab and urine.
 - Collect buccal swab as described above.
 - Collect urine (at least 50 ccs) in a sterile cup. Keep cold after collection and during shipment. Send urine in a sputum cup if possible as these leak less in shipment.
 - Tape or parafilm the tubes to prevent leaking. Make sure patient name and second identifier are on the samples.
 - When ordering, indicate that specimens are to be **shipped to Washington State Public Health Lab** for RT-PCR for mumps.
 - **Complete a requisition** form for the Washington State Public Health Laboratories for each specimen submitted: <http://www.doh.wa.gov/Portals/1/Documents/5230/302-017-SerVirHIV.pdf>. Make sure all of the following information is filled out:
 - Patient name, second identifier (e.g. date of birth) and county of residence.
 - Specimen type, date of collection, onset date, and test requested (mumps RT-PCR).
 - Submitter name, address, and telephone/fax numbers.
 - Consider ordering serology for IgG and IgM in addition to the above tests, but not in place of the above tests as laboratory detection of mumps is challenging, particularly in vaccinated individuals. Serology can be ordered and performed commercially (do not send to WA DOH Public Health Lab unless directed to do so).
- Instruct patient to isolate.** Suspect mumps cases should not return to work or school and should avoid contact with others until the 6th day after onset of parotitis.

Call Kitsap Public Health District at (360) 728-2235 (24/7) for guidance on testing and to report possible mumps case.