The Georgia Department of Public Health (DPH) is seeing an increased number of mumps cases. As of December 10, 2018^* , a total of 135 mumps cases have been reported to DPH. This is the highest number of mumps cases in Georgia in the past 10 years. The median age for cases is 21 years-old (range: 1 yr. old – 81 yrs. old).

Mumps Epidemiology and Clinical Symptoms

Mumps is a contagious viral infection characterized by the acute onset of unilateral or bilateral, tender swelling of parotid or other salivary glands, often proceeded by a nonspecific prodrome which may include muscle aches, loss of appetite, malaise, headache, and fever. An estimated 30% of mumps infections have no apparent salivary gland swelling and may be asymptomatic or manifest primarily as a respiratory infection. In recent U.S. outbreaks, complications of mumps have included orchitis in up to 10% of adolescent and adult males, and oophoritis in \leq 1% of adolescent and adult females. More rarely pancreatitis, meningitis, encephalitis, and deafness have occurred.

Mumps is spread by contact with infectious respiratory tract secretions and saliva. The incubation period is typically 16 to 18 days but can range from 12 to 25 days. In recent mumps outbreaks, most cases had received two doses of MMR vaccine. Therefore, a history of appropriate vaccination does not rule out mumps in persons with compatible symptoms.

Reporting

Mumps is a notifiable disease and suspect mumps cases should be reported to the Georgia Department of Public Health (O.C.G.A. §31-12-2) as soon as possible. Report suspect cases to public health by calling your District Health Office or the DPH Acute Disease Epidemiology Section at 404-657-2588 during business hours Monday through Friday, or 1-866-PUB-HLTH after-hours on evenings and weekends. <u>Do not await laboratory</u> results before reporting.

Laboratory Testing

The Georgia Department of Public Health strongly recommends the collection of serum for mumps IgM/IgG AND collection of two buccal swabs to confirm a mumps case. Urine should be collected from patients who present with orchitis or oophoritis. To coordinate specimen collection and laboratory submission, call your District Public Health Office or the DPH Acute Disease Epidemiology Section at 404-657-2588 during business hours Monday through Friday, or 1-866-PUB-HLTH after-hours on evenings and weekends. Please do not send specimens directly to the Georgia Public Health Laboratory (GPHL) or the Centers for Disease Control and Prevention (CDC). Detailed specimen collection guidance is available at https://dph.georgia.gov/mumps.

Vaccination

Mumps-containing vaccine (MMR) remains the most effective prevention against disease. One dose is 78% effective, and two doses are 88% effective[†]. Although mumps immunity may wane over time and vaccinated individuals can still develop mumps, infections tend to be milder with a much lower incidence of complications.

It is important to ensure patients are up-to-date on their MMR vaccine; the first dose of MMR is recommended for children at 12 to 15 months of age with a second dose at 4 to 6 years of age.

Third Dose of MMR

CDC recommends a third dose of mumps virus-containing vaccine for persons who are identified by public health authorities as being part of a group or population at increased risk for acquiring mumps because of an outbreak. Consult public health for recommendations on administering a third dose of MMR.

^{*2018} data are provisional and subject to change.

Actions Requested of Healthcare Providers:

- Consider mumps in persons with acute parotitis or other salivary gland swelling, or orchitis or oophoritis, unexplained by another more likely diagnosis, regardless of vaccination history.
- Use droplet and standard precautions when caring for suspect or confirmed cases and verify that healthcare workers likely to encounter these patients have documented immunity.
- Obtain appropriate clinical specimens. For acutely ill patients who have been previously vaccinated or who are part of an outbreak, a buccal swab for PCR testing is preferred.
- <u>Isolate suspect and confirmed mumps cases and instruct them not return to school, work, or other public places until five days after the onset of parotitis</u>. Exposed healthcare providers, without evidence of immunity, should be excluded from work.
- Report suspect cases to public health before obtaining confirmatory lab results by calling your
 District Health Office or the DPH Acute Disease Epidemiology Program at 404-657-2588 during
 business hours Monday through Friday, or 1-866-PUB-HLTH after-hours on evenings and weekends.
- Ensure patients are up-to-date on their vaccinations according to CDC's recommended schedules for children and adults.

GA DPH Contact Information

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