

## **Mumps ALERT:**

This alert is to notify you that there has been at least one confirmed case of mumps at Pearl River Community College.

Mumps is contagious with symptoms typically occurring 12 - 25 days after exposure.

Common symptoms include:

- 1) Fever
- 2) Headache
- 3) Muscle aches
- 4) Parotitis (swollen or tender glands under the ears on one or both sides of the face)
- 5) Orchitis (swelling of the testicles)

Students who develop these symptoms should see their healthcare provider as soon as possible for evaluation.

In addition, all students are encouraged to make sure they have received **two** doses of the MMR vaccine. If not, they should contact their healthcare provider or the school nurse to obtain needed vaccination or information on where to obtain vaccination.

For questions, please contact Susie Hall RN, School Nurse at (601) 403-1303.

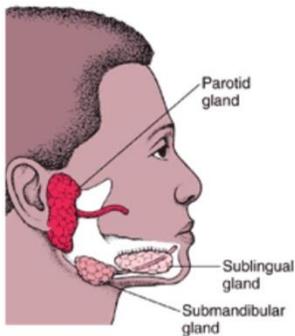
# Mumps at PRCC:

## What You Need to Know

### ABOUT THE MUMPS

#### What is mumps?

Mumps is a disease that is caused by the mumps virus that primarily infects the parotid and submandibular glands. The most common symptoms include swollen or tender salivary glands below the ear or jaw, low-grade fever, headache, muscle aches, fatigue, and loss of appetite. Find out more about symptoms of the mumps on the Centers for Disease Control website [here](#).



#### How do people get mumps?

Mumps is spread from person to person via respiratory and oral secretions (coughing, sneezing, talking, drinking and eating after another person, kissing, sharing lip balm, etc). It can also spread indirectly when people with mumps touch surfaces without washing their hands, and then others touch those same surfaces and proceed to rub their mouths or noses.

#### What do I do if I think I have the mumps?

Students with swollen and tender salivary glands under the ears or jaw on one or both sides of the face should seek care at the Student Health Center or with their primary care provider as soon as possible. The Student Health Center is open Monday through Friday 8:00 AM – 5:00 PM, and Saturday 9:00 AM – 12:00 PM. Call 225/ 578-6271 for more information.

Faculty and staff with signs or symptoms of possible mumps should contact their private healthcare provider for a clinical evaluation as soon as possible.

#### What is the incubation period and period of infectiousness?

The incubation period is the time between exposure to an infectious disease and the appearance of the first signs or symptoms. The average incubation period for mumps is 16-18 days, with a range of 12-25 days. Fever may persist for 3-4 days and parotitis (swelling of the salivary gland), when present, usually lasts 7-10 days.

The infectious period is the time period during which an infected person can spread the disease to others. Persons with mumps are usually considered most infectious from 1-2 days before onset of symptoms, until 5 days after onset of parotitis.

## **How is mumps diagnosed?**

Mumps is diagnosed by a combination of symptoms and physical signs and laboratory confirmation of the virus. Most commonly an oral swabbing is performed for a PCR (Polymerase Chain Reaction) test. Blood test are also sometimes used to check for antibodies.

## **What is the treatment for mumps?**

There is no “cure” for mumps, only supportive treatment (bed rest, fluids and fever reduction). Most cases will recover on their own. If someone becomes very ill, he/she should seek medical attention.

## **How can mumps be prevented?**

Getting vaccinated against mumps is the best way to prevent the disease. This vaccine is included in the combination measles-mumps-rubella (MMR) and measles-mumps-rubella-varicella (MMRV) vaccines.

## **Some additional things people can do to help prevent the spread of mumps and other infections include:**

- Stay at home for 5 days after symptoms begin; avoid school or work settings.
- Cover your mouth and nose with a tissue when you cough or sneeze.
- Don't share eating utensils, cups, drinking glasses or water bottles.
- Clean surfaces that are frequently touched (such as computer devices, television remotes, doorknobs, tables, counters) regularly with soap and water or with disinfecting wipes.
- Wash your hands frequently with soap and water or an alcohol-based hand cleaner.

## **If I think I have been exposed to mumps, what should I do?**

If you have not been vaccinated against mumps, receiving the vaccine after exposure to the virus will not help prevent disease if you have already been infected. However, if you have not been infected during this particular exposure, the vaccine will help protect you against future exposure to mumps so it is recommended that you get the vaccine.

# **VACCINE INFORMATION**

## **Measles-Mumps-Rubella (MMR) / Measles-Mumps-Rubella-Varicella (MMRV)**

### **I am not sure how many doses of MMR I received. Should I get vaccinated? Is it safe to receive an extra dose of MMR vaccine?**

Yes, you should get vaccinated. It is safe to receive another vaccine if you are unsure of your vaccination history.

### **What kind of vaccine is it?**

The mumps vaccine is made from a live attenuated (weakened) virus. In the United States, it is recommended that it be given as part of the MMR vaccine, which protects against measles, mumps, and rubella (German measles) or the MMRV vaccine (MMR plus varicella [chickenpox] vaccine)

### **Can the vaccine cause mumps?**

No. This vaccine is live, but attenuated (weakened). It can cause symptoms like fever but cannot cause mumps.

### **Who should NOT receive mumps vaccine?**

Anyone who experiences a severe allergic reaction (e.g., hives, swelling of the mouth or throat, difficulty breathing) following the first dose of MMR/ MMRV should not receive a second dose. Anyone knowing they are allergic to a vaccine component (gelatin, neomycin) should not receive this vaccine.

Pregnant women should not receive the MMR vaccine, and pregnancy should be avoided for four weeks following vaccination with MMR. Severely immunocompromised persons should not be given MMR/ MMRV vaccine. Immunocompromised means a person is less capable of battling infections because of an immune response that is not properly functioning. This includes persons with a variety of conditions, including congenital immunodeficiency, AIDS, leukemia, lymphoma, generalized malignancy, or those undergoing immunosuppressive therapy.

### **Can individuals with an egg allergy receive MMR vaccine?**

Yes, individuals with egg allergy can safely receive the vaccine. In the past, it was believed that persons who were allergic to eggs would be at risk of an allergic reaction from the vaccine because the vaccine is grown in tissue from chick embryos. However, recent studies have shown that this is not the case. Therefore, MMR may be given to egg-allergic individuals without prior testing or use of special precautions.

### **How effective is the mumps vaccine?**

Two doses of mumps vaccine are 88% (range: 66-95%) effective at preventing the disease; one dose is 78% (range: 49%-92%) effective.

### **Some people who have had both doses of the recommended MMR vaccine (to protect against measles, mumps, and rubella disease) are still getting mumps. Does that mean that the vaccine is not effective?**

No. Only 10% of people who have been vaccinated get mumps. A much larger percentage of unvaccinated people get the mumps during an outbreak.

For more information, visit the Centers for Disease Control website [here](#)

- See more at: <http://www.lsu.edu/shc/medical/mumps.php#sthash.bRGL4KFX.dpuf>