Mumps Fact Sheet

What is mumps?
Mumps is a contagious disease caused by the mumps virus.

Who gets mumps?
In the United States, mumps occurs primarily in unvaccinated or under-vaccinated populations, and in congregate settings such as schools or colleges where prolonged, close contact allows for person to person spread of the virus. Past infection with mumps makes a person immune to mumps. Studies show that most people born before 1957 were most likely infected with the mumps virus and have natural immunity. In addition, people who receive two doses of the mumps vaccine are much less likely to be infected. The greatest risk of infection occurs among older children, adolescents, and young adults.

How is mumps spread?
Mumps is spread by droplets of saliva or mucus from the mouth, nose, or throat of an infected person, usually when a person coughs or sneezes. Mumps can also spread when items used by an infected person that have been contaminated by saliva or mucus, such as eating utensils, drinks, or lip balm, are shared.

What are the symptoms of mumps?
The most common signs and symptoms of mumps include fever, headache, muscle aches, fatigue, and swelling and tenderness of one or more salivary glands under the ears or jaw on one or both sides of the face (parotitis). Swelling of the testicles occurs in up to 10% of males who have reached puberty; this does not usually result in sterility. About one in three persons infected with mumps virus do not have any signs or symptoms of illness, or may present with a respiratory infection without any apparent salivary gland swelling.

How soon after exposure do symptoms appear?
Symptoms of mumps usually appear 16 to 18 days after exposure, but may appear any time within 12 to 25 days after exposure.

How is mumps diagnosed?
A physician can usually diagnose mumps by the clinical symptoms, particularly the swelling of the glands in the face and neck. In addition, laboratory tests can be performed to confirm the presence of the mumps virus.

What is the treatment for mumps?
Supportive care to relieve symptoms may include applying intermittent ice or heat to the affected neck area, and pain relievers (e.g., acetaminophen). Warm salt water gargles, soft foods, and extra fluids may also help. Avoid fruit juice or acidic foods, since these stimulate the salivary glands, which can be painful.
How can mumps be prevented?

Immunization of as many children as possible is the best way to prevent mumps cases and outbreaks. Two doses of mumps vaccine are recommended for all children. This is generally given as measles, mumps, and rubella (MMR) vaccine. The first dose of MMR should be given at 12-15 months of age and the second dose before a child enters kindergarten (4-6 years of age). Persons of any age who are unsure of their mumps disease history and/or mumps vaccination history should be vaccinated. Two doses of mumps vaccine are recommended for adults at high-risk for mumps exposure including healthcare personnel, international travelers, and college students.

What are the complications associated with mumps?

Complications from mumps are rare and have declined since routine use of vaccine, but are more common in people who have reached puberty. These include central nervous system disorders such as encephalitis (inflammation of the brain) and meningitis (inflammation of the covering of the brain and spinal column), miscarriage of a pregnancy, arthritis, pancreatic involvement, or deafness.

When and for how long is someone able to spread the disease?

Mumps is contagious from two days before until five days after the onset of swelling (parotitis).

Can a person who had mumps get it again?

No. Persons who have had mumps do not get it again.

How can I get more information about mumps?

- If you have concerns about mumps, contact your healthcare provider.

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