



COMMONWEALTH of VIRGINIA
Department of Health

CYNTHIA C. ROMERO, MD, FAAFP
STATE HEALTH COMMISSIONER

PO BOX 2448
RICHMOND, VA 23218

TTY 7-1-1 OR
1-800-828-1120

March 29, 2013

Dear Colleague:

I am writing to alert you about an increase of mumps infections in the Commonwealth. Cases of mumps have recently been identified in students attending two Richmond area universities. Since early March, new cases have been identified almost daily. As of March 28, 2013, more than 45 cases have been reported in Virginia, compared to only seven cases in all of 2012.

Due to the infectious nature of mumps, additional cases are possible. At this time of year it is very likely that some students will be returning to their homes to celebrate the Easter and Passover holidays with their families, which may inadvertently lead to the spread of mumps virus into other communities. To assist us in disease control efforts, I am asking for your help in maintaining a high index of suspicion for mumps in clinically compatible cases.

As you know, mumps is an infectious viral disease with an incubation period of approximately 18 days (range 12 – 25 days), from time of exposure to onset of parotitis. Patients with mumps are considered infectious from 3 days before through 5 days after onset of parotitis. Transmission is primarily person to person via large respiratory droplets or shared respiratory secretions.

Mumps is characterized by parotitis, acute swelling in other salivary glands, orchitis, or oophoritis unexplained by another more likely diagnosis. Nonspecific prodromal symptoms may precede parotitis by several days, including low-grade fever, myalgia, anorexia, malaise, and headache. However, mumps infection may present as only nonspecific or primary respiratory symptoms. Up to 20% of infections are asymptomatic.

Although mumps is one of the most familiar causes of parotitis, other infectious causes of parotitis you may consider include Epstein-Barr virus, cytomegalovirus, parainfluenza, influenza A, enteroviruses, lymphocytic choriomeningitis virus, HIV, nontuberculous mycobacterium, and less often, gram-positive and gram-negative bacteria. Testing for one or more of these etiologies may help distinguish the cause of illness in a symptomatic patient.

In patients who present with signs and symptoms clinically compatible with mumps, we recommend the following:

- Immediately triage the patient. Do not allow such patients to remain in your waiting area without a mask.
- Use standard and droplet precautions.
- Place these patients in a private room with a closed door, if possible.
- Only permit health care workers with documented immunity to mumps to work with the patient.
- Contact your local health department immediately to report the case and for additional guidance on testing and control measures, including exclusion from work or school.
- Collect serum and a buccal swab and coordinate with the health department to test for mumps IgM and IgG antibodies and viral isolation.

Individuals who work in health care facilities are at increased risk of exposure to mumps. To ensure staff are immune to mumps, they must have documentation of two doses of mumps vaccine, laboratory evidence of immunity to mumps, laboratory confirmation of disease or born before 1957. Susceptible personnel who have been exposed to mumps should not have contact with patients or be in a health care facility from the 12th through the 25th day after exposure. Exposed health care personnel born before 1957 without other proof of immunity should obtain a mumps antibody titer to document their immune status and, if negative, be furloughed from the health care facility. This highlights the importance of knowing and documenting the immune status of your health care workers, even in advance of a possible exposure.

Please report any clinically compatible or suspect cases of mumps to your [local health department](#). Thank you for your partnership in controlling and preventing the spread of disease in our communities.

Sincerely,

Cynthia C. Romero, MD, FAAFP
State Health Commissioner