

Mumps

Mumps is an infection caused by the mumps virus. It mainly affects the salivary glands but sometimes other parts of the body are affected. Mumps normally affects children, but can occur at any age. Mumps is now rare in the UK as children are routinely immunised against mumps.

What are the usual symptoms of mumps?

- Swelling and pain of one or both parotid glands are the usual main symptoms. (The parotid glands are the main salivary glands. They are just below the ears and you cannot normally see or feel them. The salivary glands make saliva which drains into the mouth.)
- The mouth may feel dry.
- Chewing and swallowing may be sore.
- Fever (temperature), headache, feeling tired and being off food may develop for a few days.
- Mild abdominal (tummy) pain may occur.

The swelling of the parotid glands usually lasts 4-8 days. Mumps is normally a mild illness, but complications sometimes occur. This is why immunisation is important.

There may be no symptoms, or only very minor ones. It is thought that about 3 in 10 people who contract the mumps virus have no symptoms. Rarely, complications alone occur without the usual symptoms occurring first.

The immune system makes antibodies during the infection. These clear the virus and then provide lifelong immunity. It is therefore very rare to have more than one episode of mumps.

What are the possible complications of mumps?

- The testes (testicles) are sometimes affected. One testis may become inflamed, swollen, and painful for a few days. This is uncommon in young children. However, about 1 in 4 males who get mumps over the age of 12 develop a painful swollen testis. Occasionally, both testes are affected. In rare cases this may cause infertility.
- Brain inflammation (encephalitis or meningitis) is an uncommon complication. It typically causes drowsiness, headache, stiff neck, wanting to keep out of the light, and vomiting. Although alarming, meningitis caused by the mumps virus usually clears after a few days without any long-term problems. However, deafness in one ear is a rare long-term problem that can occur.
- Inflammation of the pancreas, heart, and other organs are rare complications.
- If you develop mumps in the first 12-16 weeks of a pregnancy, it may increase the risk of miscarriage. (However, the mumps virus is not thought to cause malformations or defects in an unborn baby.)

What is the treatment for mumps?

There is no drug that kills the mumps virus. Treatment aims to ease symptoms until the body's immune system clears the virus.

- You do not need any treatment if symptoms are mild.
- Paracetamol (Calpol, Disprol, etc) can ease fever and pain. Ibuprofen is an alternative.
- Keep children cool if they have a fever.
- Give children lots to drink, particularly if they have a fever. Fruit juice may stimulate the parotid gland to make more saliva, and cause more pain. Water is best if this occurs.
- A warm flannel held against a painful parotid gland is soothing.

When to seek medical help?

Most children are back to normal within 7-10 days. Seek medical help if you suspect that a complication is developing (described above).

Should people with mumps keep away from others?

Yes. Mumps is very infectious. It is passed on by coughing and sneezing the virus into the air. It takes 14-21 days to develop symptoms after being infected. Affected people are infectious from about six days before, until about five days after, a parotid gland begins to swell. It is best not to mix with others once mumps is suspected.

Children immunised against mumps are unlikely to catch mumps. However, immunisation is not 100% effective. Also, some adults may not be immune and some children may have a poor immune system. So keep children with mumps away from school, and from others, for five days from the onset of parotid gland swelling.

Mumps immunisation

Immunisation is offered to all children in the UK. It is part of the MMR (Measles, Mumps and Rubella) vaccine. Two doses are usual - the first aged 15 months and the second about three years later. Immunisation gives very good protection, and so mumps is now rare in the UK.

However, there has been a marked increase in cases since 2003 in the UK. In 2004 there were 8104 confirmed cases compared to only 502 in 2002. About 9 in 10 cases in 2004 were in people aged 15 years and older. People in this age group either had not been immunised or had not been fully immunised with the MMR vaccine. This is because when they were younger children they were too old when the vaccine was introduced, or had only one dose.

To counter this outbreak of mumps there have been a number of initiatives. For example, people aged 16 – 23 years old who have not previously been fully immunised have been offered MMR immunisation. This has been done via GP surgeries, via university campuses, etc.

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