Mumps - information for early childhood education centres

Mumps is a serious and highly infectious viral disease that can be prevented by the measles-mumpsrubella (MMR) vaccine. Antibiotics will not treat this infection.

You will need to take action if a child or staff member is suspected of having mumps.

- This means identifying staff and children who have been in close contact and are not immune. Some children and staff may need to be excluded from your early childhood education centre (ECEC).
- It also means assessing if anyone at your ECEC is at high risk of catching the disease or developing complications.

Checklist	Tick here
Identify which children and staff are close contacts of the infected person as you will	
need to determine their immunity. Those who are not immune and/or high risk need to	
be excluded from the ECEC.	
Check the immunisation register at your ECEC	
Use the immunity table and exclusion tables below	
 See heading How to identify close contacts 	
 See heading Avoid people who are at risk catching mumps 	
Distribute this sheet to close contacts to inform them of exposure to mumps:	
Mumps – information for close contacts (See ARPHS website)	
Inform those close contacts and high risk people who need to be excluded from your	
ECEC.	
See exclusion and immunity tables	
Promote immunisation for mumps with the MMR vaccine by distributing this fact sheet	
to parents and staff: Immunisation with MMR (See ARPHS website)	
Teach children how to use tissues to cover coughs and sneezes and throw used tissues	
in the bin	
Teach children about good hand hygiene.	
Encourage children to wash and dry their hands regularly with soap and warm water	
for 20 seconds and then taking 20 seconds to dry their hands well with a clean towel.	
Disinfect surfaces and objects which may be contaminated with saliva such as toys,	
door handles, nappy changing tables, keyboards. Do not share drinks and cups.	

Protecting yourself and others from mumps

- The best way to protect against mumps is to be vaccinated with two doses of the measlesmumps-rubella (MMR) vaccine.
- In New Zealand MMR vaccination is routinely given at age 15 months and again at four years. However, during an outbreak children are eligible for their first MMR vaccine at 12 months and can get a second MMR four weeks later.
- Contact your doctor if you are unsure if you have been vaccinated, or if you need to catch-up with a second dose. The MMR vaccine is free for those who have not received two doses of the MMR vaccine.

What are the symptoms and complications?

- Early symptoms of mumps include fever, headache, muscle aches, tiredness, and loss of appetite. The salivary glands on one or both sides of the face, cheeks or jaw may become swollen and sore after two days
- Most people recover from mumps however some individuals can develop rare complications. Men and adolescent boys can experience pain and swelling in their testicles, which in rare cases can result in infertility. Females can experience ovarian inflammation. For pregnant women there is risk of miscarriage in the first three months. In some people mumps can cause permanent hearing loss. In very few cases, mumps can lead to inflammation of the brain and surrounding tissue (meningitis).

How to identify and manage a child or staff member with mumps

- A child or staff member should be sent home if they have the following symptoms for two days or more
- Fever and swelling of cheeks or underneath the jaw on one or both sides of the face
- The sick child or staff member must be isolated immediately until they leave the premises.
- Even if there is no laboratory confirmation of the virus, all suspected cases should be managed as if they are mumps.
- The child or staff member will need to be assessed by a doctor for mumps before returning to the ECEC.

How to identify close contacts

Close contacts are staff members or children who have been in face-to-face contact (within a metre) of a person infected with mumps.

How is mumps spread?

The virus spreads from an infected person by saliva or mucous droplets when coughing, sneezing, or talking, or by touching objects infected by saliva or mucous such as a used tissue or toys.

Who is immune to mumps?

Check the immunity status of close contacts to determine who could catch the disease and who should be vaccinated against mumps.

If these close contacts are unsure about immunity, then they should see their doctor.

Establishing mumps immunity				
You are considered immune if:	 born prior to 1981, or diagnosed with mumps by a doctor previously, or you have received two documented* doses of MMR vaccine, or you have had blood tests which confirm immunity to mumps 			
You are not considered immune if:	 you have not received two documented* doses of MMR vaccine, or you have a weakened immune system, or you are a child aged less than 15 months, as you will have not received the MMR vaccine or you are a child 15 months to four years, as it is likely you will have had only one dose of MMR vaccine 			

^{*}documented means recorded in well-child book or confirmation with GP practice

Excluding those who are not immune or who are at risk of catching mumps

Children and staff members may need to be excluded to protect the health of others and to stop the disease from spreading.

Use this table to assess who you need to exclude. Anyone who is excluded will need to stay at home in quarantine.

		Quarantine
		at home
	 you have not received any documented MMR vaccinations 	
	– you are an adult and have only had one MMR and you do not intend	
You are	to get the second MMR vaccination required to make you immune	
excluded	– you are unsure of your immunity.	
and not	– you are a child aged under 15 months	Yes
considered	 you are considered high risk (see heading who is most at risk) 	
immune if:	 you have a fever and facial swelling for two days or more 	
	 you are suspected of having mumps, but are still waiting for test 	
	results to arrive from your doctor	

	- you are a child aged 15 months to four years who has received	
	vaccinations on time according to your age (MMR1)	
	Note: A second vaccination (MMR2) can be given any time as long as	
	it is four weeks after the first MMR vaccination.	
You can	-you are a child between 12 to 15 months and have received an early	
still attend	dose of MMR vaccine	No
if:	- you are an adult with only one MMR vaccination but you have	
	immediately received a second MMR vaccine (at least 4 weeks after	
	the first MMR)	
	you have blood tests which confirm immunity to mumps	
	- you have received two doses of the MMR vaccine	

What happens when you are excluded?

- Anyone who is excluded from your ECEC is required by law to stay at home in quarantine (Health Act 1956).
- Quarantine means the child or staff member remains at home away from other people. Those in quarantine cannot attend day care, school, work, social activities, sports/recreation events. They should not use public transport or visit public places such as cinema or shopping
- Being in quarantine means you will not spread the infection to others if you get the disease while at home.

How long do I stay in quarantine?

- The quarantine period starts 12 days after your first contact with an infected person, lasting until 25 days after your last contact.
- Even if you have no symptoms you must stay in quarantine because you may still be infectious and develop the illness even up until the final day (day 25).
- For example if you were initially in close contact with an infected person on 1 June and again on 5 June, then the quarantine period is 13 June – 30 June (which is 17 days inclusive, for this example).
- Those who have had one MMR vaccine can avoid quarantine if they get a second MMR vaccine immediately (provided it is more than 4 weeks since the first MMR).

Avoid people who are at risk catching mumps

- Adolescents and young adults, due to low rates of full vaccination
- People have not received or are unable to receive two doses of the MMR vaccine to make them immune. This includes:

- o People with a weakened immune system (immune-compromised) can become seriously ill and develop severe complications. These are:
- transplant patients
- those with illnesses such as leukaemia or HIV
- cancer patients receiving chemotherapy or radiotherapy
- people taking high-dose steroid or immune suppressive medication
- o Children under 15 months of age
- o People allergic to components of the MMR vaccine i.e. gelatine or the antibiotic neomycin
- o Pregnant women who are not immune to mumps.

For questions about mumps at your ECEC call ARPHS on 09 623 4600.

More mumps resources are available on the ARPHS website www.arphs.govt.nz.

For information on immunisation call the Immunisation Advisory Centre on 0800 Immune (0800 466 863) or visit www.immune.org.nz

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