

MEMORANDUM

September 22, 2010

MUMPS IN CLEVELAND?

There are at least 7 possible cases of mumps exhibiting signs of parotitis (swollen salivary glands under ears causing swollen jawline). Mumps is the only known cause of epidemic parotitis, and so the working assumption is that this is mumps. Lab confirmation is very tricky - it often requires retesting a few weeks later to confirm, and even then it doesn't always show up. In addition to being in touch with the local boards of health, I spoke at length with the CDC's team leader for mumps, measles, rubella and polio. We had been in contact in March when I was alerting them to Pesach travel patterns and the risk of spread. She was able to answer my questions and share her experiences in dealing with the 2009-2010 epidemic in NY/NJ.

We need to keep everything in perspective. Mumps is usually very mild, especially for people who have had their shots. It can be a nuisance, as symptoms can last as long as several weeks.

How does it spread? Mumps is transmitted by saliva. Coughing, sneezing, talking, handling objects that are then touched by others. Crowding and shared cups/bottles/utensils should be avoided.

When is it contagious? Mumps is contagious from 2 days prior to symptoms, so people can be contagious and not know it. Patients are isolated for 5 days following symptoms.

What are the symptoms? The classical sign of mumps is swelling and tenderness under the ear or jaw on one or both sides of the face. Other symptoms include: fever, headaches, muscle aches, tiredness, and loss of appetite.

How do I know if I've been infected? A person who becomes infected does not get symptoms for about 2-1/2 weeks, but can be anywhere from 12-25 days after exposure.

If people were vaccinated, why is there an outbreak? The mumps vaccine is not perfect. It is about 85-90% effective. When a large group gets exposed, some people who were vaccinated will still get mumps. People who have not been vaccinated are much more likely to get mumps, and have greater risk of complications.

Is mumps serious? For most people, it is merely a nuisance. In the NY/NJ outbreak, of the first 1,521 cases there were 65 reports of complications, resulting in 19 hospitalizations, 0 deaths.

Who is at high risk? Adolescents and young adults who have not been vaccinated are the primary high risk group. Babies under a year (before shots) and younger children have minimal risk. Pregnant



women in their 1st trimester should take additional precautions, but the evidence to suggest danger to the fetus during the 1st trimester is weak.

My son attends Telshe and has no symptoms. Is he “in the clear” now? No. Counting from Yom Kippur, if there are no new cases for 25 days, he would be in the clear. An infection on Yom Kippur might not cause symptoms until after Rosh Chodesh.

What can we do to prevent mumps? Use our mnemonic.....SVARAS can stop mumps!

Space	Minimize Crowding
V accinate	Imperfect, but our best option
R apid Assessment	Early diagnosis → early isolation (sorry) → reduced spread
S oap	Wash often, with soap → major reduction of all infections

Sukkos and Simchas Torah gatherings? Don't share cups, plates, etc... Wash with soap.

Is it safe for men to use the mikveh? No special risk.

We may have mumps in the house. What do we do? First, consult your doctor. If confirmed:

People with mumps should:

- Minimize contact with others
- Be isolated for 5 days after glands swell
- Cover cough or sneeze with tissue or upper sleeve, *not hands!*

Others in the house should:

- Wash hands well and often, with soap
- Do not share drinks, eating utensils or beds
- Clean surfaces that are frequently touched with soap and water or cleaning wipes (e.g. toys, doorknobs, tables, counters, etc.)

It is too soon to tell if this is going to pass quickly. We do know that the *chag* will pass quickly, so be sure to enjoy and pack in the simcha to get us through until Chanukah!

For more information, check www.JewHealth.org and subscribe to Cleveland Health Alerts.

Gut Yom Tov!

mendel