

Leveque, Sally (Evening group)

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Dr. Gwen Cohen-Brown

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Term Paper

Mumps

Mumps is a highly contagious and infectious acute neurotropic viral disease. It causes swelling of the parotid glands. In half of all cases, it causes a central nervous system infection. Mumps is caused by the paramyxovirus. It is spread from person to person via respiratory secretions and can also spread via fomites. Most cases occur in children ages 2-12 who have not been immunized.

Symptoms appear about 2-3 weeks after a person becomes infected. However, up to twenty percent of patients experience no symptoms at all. The prodromal phase of mumps presents with low-grade fever, malaise, myalgias and headache. This is followed by the painful inflammatory symptom of parotitis. The classic sign of a person having mumps is puffy cheeks and a swollen jaw. Complications which can occur from mumps are orchitis, oophoritis, pancreatitis and meningitis. Rare complications include encephalitis and hearing loss.

Diagnosis is often made based on clinical symptoms.

Laboratory testing which can be done for mumps include: blood testing which tests for the IgM antibody, buccal swabbing, urine testing and a spinal tap (only in extreme cases).

There is no medicine for the treatment for mumps. The virus must run its course. Treatment rather focuses on treating the symptoms in order to make the patient as comfortable as possible. This includes: drinking plenty of fluids, getting plenty of rest, taking over-the-counter pain relievers, eating a soft diet and applying ice to the swollen glands. The best prevention method is clearly the mumps vaccine, which is a combination vaccine with measles and rubella. It is given in two doses, the first at 12-15 months of age, and the second at 4-6 years of age. The incidence of mumps has decreased dramatically since the introduction of the vaccine in 1967. The prognosis of mumps is good. Symptoms last approximately 12-25 days after infection. Most patients recover in approximately two weeks.

Since mumps are a rare occurrence, they are quite a few differential diagnosis. Some of these diagnoses include: parainfluenza virus (PIV), Epstein-Barr virus (EBV), influenza virus (InV), rhinovirus, adenovirus or other viruses in addition to noninfectious causes such as drugs, immunologic diseases or

obstruction of the salivary tract. Mumps can also be misdiagnosed with swelling of the lymph nodes of the neck.

As a dental hygienist, having knowledge about mumps is important to me because I could be at risk to exposure since I will be in contact with a patient's upper respiratory secretions and this virus is highly contagious. It is a reminder that always following infection control procedures and wearing PPE at all times is an absolute must. Also, if a patient has swollen salivary glands rendering treatment would be quite difficult.

References

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