

An Elaborative Note on Mumps

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About the Study

Mumps is a disease caused by virus which is also known as epidemic parotitis. The causative agent for mumps is Paramyxovirus, belongs to the family *Paramyxoviridae* which usually contains negative sense, single stranded RNA as its genetic material. This infection is usually transmitted by air or through droplet nuclei as well as direct contact with the infected individual and the incubation period ranges from 14 to 25 days. Mumps can be characterized by basic symptoms such as parotid gland swelling, headache, fever, myalgias and anorexia. In children asymptomatic mumps is commonly observed. Individuals who are suffering with mumps have been infected several days prior to the parotid gland swelling to several days after the swelling appears. It generally affects the nervous system and the mumps virus are often identified in cerebrospinal fluid. Other complications of mumps are characterized by cardiac abnormalities, nephritis, arthropathy, sensorineural deafness, pancreatitis, oophoritis and orchitis. Mumps can be usually detected or diagnosed by non-invasive means which include detection of IgM antibodies in saliva samples after the onset of rashes or parotid swelling. In densely populated areas mumps can be detected based on clinical presentations and in less populated areas it can be diagnosed through polymerase chain reaction (reverse transcription), antibody testing and the fluid samples (such as saliva or cerebrospinal fluid). Mumps is usually not life threatening and the persons infected by it can be recovered within few weeks from the onset of symptoms.

There is no specific antiviral treatment for mumps and can be prevented by vaccination which is of two types such as individual

mumps vaccine or combinatorial vaccine called as MMR vaccine. MMR vaccine is a mixture of measles, mumps and rubella, which offers protection against all the three viruses respectively. MMR vaccines are usually obtained by freeze-dried preparations containing live and attenuated strains of measles, mumps and rubella viruses. The three attenuated viral strains are cultured separately in the concerned media before subjecting them to lyophilisation. The non-reconstituted vaccine and its diluents must be stored within the original packaging and should be avoided facing light. The preventive measures or non-diagnostic methods usually include bed rest, eating soft food, using icepacks or heat packs on the neck area, drinking excessive water followed by gargling. Anti-fever medications, analgesics and anticonvulsants may be used in some cases.

As mentioned in the previous paragraph the only way to prevent mumps is through vaccination. The protection rate is higher after the completion of two doses when compared to one. Vaccines are usually administered intramuscularly into the upper arm or anterolateral thigh. However for individuals with bleeding disorder vaccines should be administered by deep subcutaneous injection in order to reduce the risk of bleeding. Equipment used for vaccination, including used vials or ampoules should be disposed of at the end of a session by sealing in a proper, puncture resistant boxes. Mumps is common in childhood usually at the age of 5-9 years and the countries that are not vaccinated yet. Infection rate is more common in winter and spring seasons in temperate zones whereas there is no seasonality observed in tropical zone.