TO: Greater Boston Area Healthcare Providers and Local Boards of Health  
FROM: Susan M. Lett, MD, MPH  
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RE: Mumps Outbreak Continues – Additional Boston Area Communities Affected

There was a large outbreak of mumps in Massachusetts during 2016, in the context of a large national outbreak. This outbreak has continued into 2017. To date in Massachusetts the vast majority of confirmed and probable mumps cases have been among vaccinated college students and others with links to colleges and universities. However, a small group of mumps cases has recently been identified in greater Boston, among adults with no known connection to higher education. These cases may represent a change in the epidemiology of mumps in Massachusetts.

Since the end of March, 2017, twelve cases of mumps have been reported to the Massachusetts Department of Health (MDPH) among adult residents (age range 20 – 41) of Chelsea, Boston, and Revere. Onsets of parotitis have ranged from 3/24/2017 to 5/31/2017. Seven were male; five were female. Ten of the twelve cases have had onsets since 5/9/2017. All of the residents are Latino, and include members of the Colombian, Dominican, Guatemalan, and Salvadoran communities. None are known to have had international travel prior to onset of illness. For the majority, vaccination histories are unknown; most are believed to be unvaccinated against mumps. MDPH and local health departments are investigating these cases and instituting isolation and quarantine measures to control the spread of mumps, which is spread by droplets among people in close contact. Unvaccinated individuals are most susceptible to mumps infection.

Recommendations:
1. MMR vaccine is recommended for all patients who lack presumptive evidence of immunity to mumps (two doses of MMR vaccine or a positive IgG titer), including those who are adults and not born in the U.S.
2. HCWs should consider mumps in patients with clinically-compatible symptoms, regardless of vaccination history, and are asked to report suspected cases to MDPH at 617-983-6800. Suspected cases diagnosed in Boston should be reported to the Boston Public Health Commission at 617-534-5611.
3. Use droplet and standard precautions when caring for suspect or confirmed cases. Exposed healthcare providers, without presumptive evidence of immunity, will need to be excluded from work.
4. Obtain appropriate clinical specimens for testing at the Massachusetts State Public Health Laboratory. A buccal swab is preferred for patients with recent onsets (within five days of onset of swelling). The swab must be in viral or universal transport medium to be considered a satisfactory specimen for testing. Submit specimens with a thoroughly completed specimen submission form for each specimen type.
5. Suspected and confirmed mumps cases should be isolated for five days after onset of swelling, unless an alternative diagnosis is made. This step is extremely important to keep mumps from spreading.