

New studies demonstrate infection control strategies for measles and mumps outbreaks

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The decline in vaccination rates across communities has led to the resurgence of diseases like measles and mumps, and recent outbreaks have demonstrated the importance of an integrated infection prevention response, according to new research presented at the [45th Annual Conference of the Association for Professionals in Infection Control and Epidemiology \(APIC\)](#).

In a 2017 measles outbreak, there were 75 confirmed cases in Minnesota, most in the Twin Cities metropolitan area. Park Nicollet Health Services' 20-plus clinics and Methodist Hospital—all part of the HealthPartners care system—provided care for 24 confirmed measles cases. During this outbreak, HealthPartners activated a system-wide command center through which infection preventionists (IPs) collaborated to respond to the outbreak as an integrated system, leading to effective control of the outbreak.

Interventions facilitated through the system-wide command center included creating standard patient and visitor messaging in multiple languages and leveraging the integrated electronic health record to support active measles surveillance, symptom-based patient triage, and timely initiation of precautions.

"Our integrated response allowed us to share information in real-time and adjust prevention strategies in a timely way," said Amy Priddy, DNP, RN, CIC, lead study author and infection prevention senior manager, Park Nicollet Health Services. "Every time you have an event

like this, there's an opportunity to apply what you've learned as a system to other situations."

At Park Nicollet Health Services, there were no cases of healthcare-associated measles transmission. Vaccinations also played an integral role in stemming the outbreak: 9,731 patients and healthcare staff received the measles vaccine, a 118 percent increase over the same period the year prior.

The largest outbreak of mumps in Texas in more than 20 years yielded similar lessons. Among healthcare workers, IPs found that while acute care facilities offer guidance on recommended vaccinations for staff, long-term facilities lack the same requirements. The study also revealed that 67 percent of facilities lacked a designated IP, and many of the facilities were unfamiliar with testing recommendations for mumps.

Public health authorities issued health advisories that conveyed general mumps awareness and testing guidelines. They also called healthcare facilities with diagnosed mumps cases to assess the application of appropriate [infection control](#) guidelines and standards, and advised that unvaccinated healthcare professionals stay home from work where mumps cases were present.

"Many of the providers were unfamiliar with mumps because they've never seen it before," said Thi Dang, MPH, CHES, CIC, the study's lead author. "This gap, and others that we identified, provides valuable information for any outbreaks that we might be faced with in the future, as we better understand aspects of symptom monitoring, vaccination recommendations, and control measures."

Both case studies show the need for [infection prevention](#) and control preparedness amidst community outbreaks. Encouraging vaccinations and education around symptoms—among both the public and health care

staff—are key components to successfully eradicating outbreaks of measles and mumps.

"IPs play a critical role in the public [health](#) response to outbreak situations by communicating and implementing control measures," said 2018 APIC President Janet Haas, Ph.D., RN, CIC, FSHEA, FAPIC. "These case studies show clearly that comprehensive strategies in the face of [outbreak](#) situations go a long way toward preventing further spread of infection and disease."

Provided by Association for Professionals in Infection Control

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