

From the Chief Medical Officer
Dr Henrietta Campbell CB

HSS(MD)8/2005

To:

All General Practitioners – *for onward dissemination to practice staff, including Health Visitors*
All Locum General Practitioners
Chief Executives, Health & Social Services Boards
Chief Executives, Health & Social Services Trusts
Chief Executive, Health Promotion Agency (NI)
Directors of Public Health – *for onward dissemination to Consultants in Public Health Medicine*)
Medical Directors, Health & Social Services Trusts – *for onward dissemination to Consultant Microbiologists, Consultant Physicians*
Directors of Nursing, Health & Social Services Boards
Directors of Nursing, Health & Social Services Trusts – *for onward dissemination to Community Nurses*
Directors of Primary Care, Health & Social Services Boards
Directors of Pharmacy, Health & Social Services Boards
Directors of Pharmacy, Health & Social Services Trusts
Consultants in Communicable Disease Control, HSS Boards
Consultant Paediatricians
Child Health System Managers
Regional Procurement Pharmacist
Regional Epidemiologist
CDSC(NI)

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Your Ref:
Our Ref: HSS(MD)8/2005
Date: 15 February 2005

Dear Colleague

ACTION REQUIRED TO DEAL WITH ONGOING OUTBREAKS OF MUMPS IN THE FOUR BOARD AREAS IN NORTHERN IRELAND

1. Epidemiological data collated by the four Boards in conjunction with CDSC(NI) shows a dramatic increase in the number of notifications of cases of Mumps in Northern Ireland since the 1st January 2005. To date there have been over 300 cases of Mumps notified across the four Board areas. Cases are mainly occurring in older teenagers with those children born between 1982 and 1991 being most affected. To date the peak incidence is in children born in 1986. A similar picture has been seen in outbreaks of Mumps in England, Scotland and Wales.

2. The epidemiological information collected so far would indicate that a large number of those affected have only had one dose of a Mumps-containing vaccine ie MMR, and a small proportion (approximately 13%) have had no Mumps-containing vaccine ever. You will be aware that the recommendation of JCVI and DHSSPS is that two doses of MMR are required to fully protect against Measles, Mumps and Rubella. Those in the cohort affected would have missed out on the second dose of MMR which is now routinely offered at pre-school booster.
3. In October 2003 we wrote to you (Circular HSS(MD)41/2003) to remind you of the need to ensure that all children require two doses of MMR to protect them against Mumps. This message was further reinforced in the CMO Update of August 2004. <http://www.dhsspsni.gov.uk/publications/2003/cmoupdate24.pdf> .
4. During 2004, in an effort to protect teenagers against Mumps, the Department recommended that the School Health Service offer MMR immunisation to children who were unimmunised or not fully immunised at the time of school leaving booster. While this will have an impact on transmission within that age group it does not directly protect all those other teenagers who many not be fully immunised with MMR.
5. **The Department is recommending that any child or teenager who has not received a fully schedule of MMR immunisation should be offered MMR immunisation as soon as possible.**
6. The issue of funding of MMR immunisation requires some clarification as follows:

Under the new GP Contract payment for MMR immunisation is included in the global sum and covers all children up to the age of their 16th birthday for two doses of MMR. In addition, those aged 16-23 have also been shown, from the epidemiological data available, to be at an increased risk of Mumps infection and should also be covered with two doses of MMR. In view of that we are recommending that Boards develop a Local Enhanced Service (LES) to cover MMR immunisation for this older age group. Those attending school, university or further education colleges may be at a particular risk and ideally vaccination should be offered before the start of the next school/further education/ university term.

Action Required by Primary Care

1. General Practices should ensure that all those aged up to 16 are protected with two doses of MMR.
2. For those who require MMR immunisation, but are older than 16 years, General Practices should offer MMR immunisation as necessary under the terms agreed with the local Health and Social Services Board in the context of a Local Enhanced Service (LES)
3. All General Practitioners are reminded that Mumps is a notifiable disease and all cases should be notified to the local Consultant in Communicable Disease Control (CCDC) at the Health and Social Services Board.
4. All MMR immunisations should be recorded on the Child Health System as usual.

Action Required by Trusts

1. School Health Services should continue to offer MMR immunisation to unprotected children at the time of school leaving booster.
2. Individual clinicians are reminded that Mumps is a notifiable disease and as such all cases should be notified to the local Consultant in Communicable Disease Control (CCDC) at the Health and Social Services Board and including information on complications such as Meningitis, Pancreatitis, Orchitis.

Action Required for Boards

1. Boards are recommended to set up local outbreak control arrangements and in particular the development of a Local Enhanced Service (LES) for MMR immunisation (see attached 'Sample Outline'). As a guide this LES should cover the need to immunise any person aged 16-23 years who needs to receive MMR immunisation in the light of the current Mumps outbreak. It should highlight the fact that students attending educational institutions are at higher risk of acquiring Mumps and this should be brought to the attention of the Student Health Services in the Universities. It should acknowledge that if the immunisation history for MMR is not known there is no harm in administering further doses of MMR. The LES should specify timescales commencing the 1st April 2004. The LES should cover recording of MMR immunisation. Boards will provide information on payment and how to make claims as appropriate.
2. Boards should write to local Universities and Colleges of Further Education in their area recommending that these institutions write to all prospective students for the period 2005/2006 recommending that they are fully immunised with MMR before they commence their studies.
3. Boards should ensure local publicity regarding the Mumps outbreak and the need for two doses of MMR for all children.
4. Board are to provide a summary analysis of the data collected from Practices in its area by 15th April 2005 to CDSC(NI).

Supplies of MMR Vaccine

Supplies of MMR vaccine should be ordered through the normal route.

Press Release

DHSSPS will release information on the Mumps outbreak into the public domain in the week commencing 21st February 2005.

Yours sincerely

Dr Henrietta Campbell
Chief Medical Officer

cc: Dr L Doherty, SMO/Con. Epidemiologist
Dr C Mason, Nursing Officer
Mr J Livingstone, Director of Primary Care
Mr A Hamilton, Deputy Sec PSCC(V)
Dr E Mitchell, PMO
Mr G Dorrian, Health Protection Team
Mrs Sheila Barfoot, General Medical Services
Mr Ivan McMaster, Primary Care Development
Mr Philip Maguire, Press Office
Members of the RACCDC Regional Immunisation Committee
Dr Philip McClements, NI Prison Service
Dr Barbara Fair, University Health Centre at Queens
Dr Brian Dunn, Chair of GPC(NI)

This letter is available at www.dhsspsni.gov.uk and also on the DHSSPS Extranet which can be accessed directly at <http://extranet.dhsspsni.gov.uk> or by going through the HPSS Web at <http://www.n-i.nhs.uk> and clicking on DHSSPS.

SAMPLE OUTLINE FOR A BOARD LOCAL ENHANCED SERVICE (LES) FOR ONGOING OUTBREAKS OF MUMPS IN THE FOUR BOARD AREAS IN NORTHERN IRELAND

Aim

To immunise any person aged 16-23 years who wishes to receive a second MMR in light of the current MMR outbreak in Northern Ireland. The LES is also appropriate for anyone in this age group who has never received MMR. Students attending institutions are at higher risk of acquiring Mumps. If the immunisation history for MMR is not known there is no harm in administering further doses of MMR.

Commencement Date

1st April 2004*

Information To Be Provided By Participating Practices To Their Board

For each individual immunised:

- Year of Birth
- Board of residence
- Whether attending an educational institution - YES/NO
- Name of educational institution (if relevant)
- Immunisation History: One previous MMR
 One previous MMR + MR
 No MMR
 Not known
- Date of first MMR
- Date of second MMR

Fee

For administration of immunisation(s) and provision of information - £8.77 per individual

Claims regarding information on individuals' immunisation to be submitted to Boards by [day/month/year].

*Boards will review the need to continue the LES beyond 31st March 2005 in light of activity in this year, the incidence of Mumps, and the availability of funding in 2005/2006.