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TO: HEADS OF PROVINCIAL EDUCATION DEPARTMENTS

DISTRICT DIRECTORS

**CIRCUIT MANAGERS** 

**SCHOOL PRINCIPALS** 

**SCHOOL GOVERNING BODIES** 

**TEACHER UNIONS** 

SCHOOL GOVERNING BODY ASSOCIATIONS

# CIRCULAR S17 OF 2023: OUTBREAK OF MUMPS, MEASLES, CHOLERA & DIPHTHERIA IN SOUTH AFRICA, AND GUIDANCE TO SCHOOLS AND SCHOOL COMMUNITIES

- A number of communicable diseases have recently been reported in South Africa. These
  include measles, monkeypox, and currently mumps, cholera and diphtheria. By definition,
  communicable diseases are illnesses that spread from one person to another or from an
  animal to a person, or from a surface or a food.
- 2. On 11 May 2023, the National Institute of Communicable Diseases (NICD) announced an outbreak of Mumps in the country. Subsequently, on 19 May 2023, the Minister of Health, Dr Phaahla, announced an outbreak of diphtheria. These announcements followed the spread of cholera after having been declared in Gauteng Province, in February 2023.
- 3. This circular is intended to provide information on the current outbreaks, and guidance to schools in response.

#### A. MUMPS

4. On 11 May 2023, the NICD confirmed an outbreak of mumps in South Africa. Mumps is an acute, viral infection caused by the mumps virus. It is generally a mild childhood disease,

mostly affecting children between 5-9 years of age. However, younger and older children as well as adults, can become infected with mumps. People who have had mumps are usually protected for life against another mumps infection.

- 5. Mumps causes painful swelling of the parotid or salivary glands. Other symptoms include headaches, joint pain and a high temperature, which may develop a few days before the swelling of the parotid glands.
- 6. Mumps is spread in the same way as colds and flu: through infected droplets of saliva that can be inhaled or picked up from surfaces and transferred into the mouth or nose. A person is most contagious a few days before the symptoms develop and for a few days afterwards. During this time, it's important to prevent the infection spreading to others.
- 7. Since February 2023, the NICD has received a number of queries related to possible clusters or outbreaks of mumps in different provinces. In 2013 up to 31/03/2023, 1 322 laboratory positive mumps cases have been confirmed.
- 8. Mumps can be prevented by getting a vaccine. The combination Measles, Mumps and Rubella (MMR) vaccine is not provided in public health clinics in South Africa at present. The MMR vaccine is expensive and mumps is considered a mild and self-limiting infection in children. Vaccination is however available in the private sector.
- 9. There's currently no cure for mumps. The infection should pass within 1 or 2 weeks. Treatment is intended to relieve symptoms and pain, such as:
  - i. getting plenty of bed rest and fluids;
  - ii. using painkillers, such as ibuprofen and paracetamol aspirin should not be given to children under 16; and
  - iii. applying a warm or cool compress to the swollen glands to help relieve pain. Infected persons should also isolate to prevent spreading the infection.
- 10. If someone has mumps, the following measures are advised to prevent its spread:
  - i. regularly washing of hands with soap and water;
  - ii. using and disposing of tissues after sneezing or coughing; and
  - iii. avoiding school or work for at least 5 days after symptoms first develop.

- 11. A combination MMR (Mumps, Measles, Rubella) vaccine is available in the private sector, and is not part of the Expanded Programme of Immunisation programme in South Africa currently.
- 12. Mumps usually passes without causing serious damage to a person's health. Serious complications are very rare. Some of these rare complications are:
  - i. **Swollen testicle/s:** Pain and swelling of the testicle (orchitis) affects up to 1 in 3 males who get mumps after puberty. The swelling is usually sudden and affects only one testicle. The testicle may also feel warm and tender. Any testicle pain can be eased using painkillers. If the pain is particularly severe, medical attention should be sought. There are no evidence that orchitis leads to infertility resulting from a drop in spermcount.
  - ii. **Swollen ovaries:** About 1 in 15 females who get mumps after puberty experience swelling of the ovaries (oophoritis), which can cause lower abdominal pain and a high temperature. The symptoms of oophoritis usually pass.
  - iii. Mumps and pregnancy: In the past, it was thought developing mumps during pregnancy increased the risk of miscarriage or low birth weight, but there's little evidence to support this. As a general precaution, it is recommended that pregnant women avoid close contact with people known to have an active mumps infection (or any other type of infection). If you're pregnant and you think you've come into contact with someone with mumps, contact your healthcare provider.
- 13. More information on mumps can be find on this link <a href="www.nicd.ac.za/wp-content/uploads/2023/03/Mumps-Frequently-Asked-Questions March 2023.pdf">www.nicd.ac.za/wp-content/uploads/2023/03/Mumps-Frequently-Asked-Questions March 2023.pdf</a>

## B. MEASLES

- 14. As previously communicated to the Heads of Education Departments in my letter dated 10 December 2022, the National Institute of Communicable Diseases (NICD) announced an outbreak of measles from July 2022, which has since spread to all provinces, except the Eastern Cape.
- 15. In the first round of engagements with provinces that were held virtually during February March 2023, the Department made a presentation on Public Health Matters as Related to the Basic Education Sector. This presentation provided information on measles, as well as the

number of confirmed cases per province from the NICD data. Provincial Education Departments (PEDs) were advised to work closely with the provincial Departments of Health and support the measles catch-up vaccination programme.

- 16. According to NICD data, 1 024 cases have been reported as at 26 May 2013. Although the number of new cases is showing a slow decline, cases of measles continue to be reported across provinces, especially in Limpopo and Gauteng provinces.
- 17. The risk of measles and its spread continues to remain high. Schools and PEDs should continue to ensure that all children aged 1-15 years of age and not previously vaccinated during the catch-up vaccination campaign earlier in the year, are vaccinated. The measles vaccine is available free of charge in all public primary health facilities. Vaccination remains an important intervention to keep schools safe spaces for learners and staff alike.

## C. DIPHTHERIA

- 18. On 19 May 2023, the Minister of Health, Dr Phaahla, announced the diagnosis of two cases of Diphtheria, a case each in KwaZulu Natal and Western Cape. Diphtheria is an uncommon disease in South Africa since the implementation of diphtheria immunization in the country in the 1950s.
- 19. Diphtheria is a serious, contagious and potentially life-threatening bacterial infection. Like Measles, it is yet another vaccine preventable infection, indicative of the lower than ideal vaccination levels in children currently.
- 20. Diphtheria is spread like flu- through droplet spread, and can rapidly develop into difficulty in breathing due to the toxin produced by the bacterium. Suspected cases should seek *immediate* medical attention. Based on the clinical presentation, treatment may include giving the patient the diphtheria antitoxin to neutralize the diphtheria toxin.
- 21. Diphtheria is prevented by immunisation with diphtheria containing vaccine. In South Africa, the Expanded Programme on Immunisation (SA-EPI) schedule includes 6 doses of diphtheria vaccine. The primary series of vaccination is given in 3 doses at 6, 10 and 14 weeks of age using diphtheria toxoid given in combination with other antigens. Boosters are given at 18

months and 6 and 12 years of age respectively. Vaccines are provided free of charge at public primary healthcare facilities.

22. More information on diphtheria is available on this link

https://www.nicd.ac.za/assets/files/Diphtheria%20FAQ %20Final%2020161222.pdf

#### D. CHOLERA

- 23. Cholera is an acute diarrheal infection caused by the ingestion of contaminated water or food with the Vibrio cholarae bacterium. To-date, cholera cases have been identified in Gauteng and Free State provinces. It affects mainly informal or displaced communities who have inadequate access to safe piped water and sanitation. Symptoms include watery diarrhea, vomiting, leg cramps and fever.
- 24. Cholera can result in severe dehydration and electrolyte imbalance, and may lead to death within hours if untreated. Young children and the elderly are particularly vulnerable. Rehydration (replacement of lost body fluids) is the mainstay of treatment and is lifesaving. Moderate and severely ill persons are usually admitted to hospital.
- 25. The spread of cholera in a community can be prevented through the provision of potable (treated) water and improved sanitation, as well as health education. Regular hand washing and attention to sanitation can markedly reduce the risk of transmission of cholera as well as other diarrhoeal diseases.
- 26. More information on cholera can be found on the link

https://www.nicd.ac.za/wp-content/uploads/2023/02/Cholera-FAQ February-2023.pdf

## 27. ACTION TO BE TAKEN WHEN A LEARNER APPEARS ILL AT SCHOOL

When a child/learner appears to be sick or displays symptoms of any of the above communicable diseases, the following are common preventive measures for communicable diseases (universal precautions) that the school can put in place to curb further spread:

Inform and encourage all parents/ guardians/ caregivers to keep sick/unwell children at home, and not to send them to school. They should rather see a healthcare provider and return to school once deemed safe to do so, by the healthcare provider.

ii. **Inform** the parents or guardians of the child/learner immediately.

iii. If a positive case is suspected or confirmed, contact the school nurse or the facility

manager of the nearest health facility, your provincial Integrated School Health

Programme (ISHP) coordinator, or the provincial Communicable Disease Control health

officials whose details are provided below. The school will be advised on any further

actions to be taken.

iv. Closure of a classroom or school is strongly discouraged.

v. **Encourage** the regular washing of hands with soap and water for at least 20 seconds,

and cough etiquette (coughing or sneezing into the bent elbow).

vi. Importantly, encourage parents/ guardians/ caregivers to ensure that all children are

up-to-date with their immunization.

CONCLUSION

28. With the recent increase in communicable diseases, it is critical that hygiene practices and

universal precautions are implemented in schools. It is equally important to make school

communities aware of the risks and how to take appropriate action.

29. Please bring the contents of this circular to the attention of all schools. PEDs should work

closely with the Department of Health in ensuring that the vaccination status of all children

is up-to-date. Let us continue working together to keep our schools safe spaces for all staff,

learners, parents and visitors.

Sincerely,

DR G WHITTLE

ACTING DIRECTOR-GENERAL

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