Parotitis
(Inflammation of the Parotid Gland)

Parotitis is an inflammation of one or both parotid glands. This is the main salivary gland. It lies behind the angle of the jaw and below the ear lobe. The saliva produced comes out of a tiny opening *(duct)* inside the cheek on either side. It is usually at the level of the upper back teeth. If the parotid gland is swollen, the ear is pushed up and out in a particular way. This helps set this condition apart from a simple lymph gland infection in the same area.

CAUSES

Cases of mumps have mostly disappeared since the start of immunization against mumps. So the most common cause now of parotitis are:

- Germ (*bacterial*) infection.
- Inflammation of the lymph channels (*lymphatics*).

ACUTE (SUDDEN ONSET) BACTERIAL PAROTITIS

This is a sudden inflammatory response to bacterial infection that causes:

- Redness (*erythema*).
- Pain.
- Swelling.
- Tenderness over the gland on the side of the cheek.
- The appearance of pus from the opening of the duct on the inside of the cheek.

It used to be common in dehydrated and debilitated patients, and often following surgery. It is now more commonly seen after radiotherapy (X-ray treatment) or in patients with a poorly working immune system. Treatment includes:

- Correction of the lack of fluids (*rehydration*).
- Medications which kill germs (*antibiotics*).
- Pain relief.

CHRONIC RECURRENT PAROTITIS

This refers to repeated episodes of discomfort and swelling of the parotid gland. This occurs often after eating. It is caused by decreased flow of saliva. This is often due to either blockage of the duct by a stone or the formation of a duct narrowing. It is treated with:

- Gland massage.
- Methods to stimulate the flow of saliva (for example, giving lemon juice).
- Antibiotics if required.

Surgery to remove the gland is possible. The benefits of surgery need to be balanced against the risk of damage to the facial nerve. The facial nerve allows the muscles of facial expression to function. Damage to this can cause paralysis of one side of the face.

VIRAL PAROTITIS

The most common viral cause of parotitis is mumps. It usually affects 4 to 10 year olds. It causes painful swelling of both parotid glands.

RECURRENT PAROTITIS IN CHILDREN

This condition is thought to be due to swelling or ballooning of the ducts (*ectasia*). It results in the same symptoms as acute bacterial parotitis. It is usually caused by bacteria called streptococci, IT is treated with penicillin. It usually gets well by itself without treatment (*self-limiting*). Surgery is usually not needed.

TUBERCULOSIS

The parotid glands may become infected with the same bacteria causing tuberculosis ("TB"). Treatment is with anti-tuberculous antibiotic therapy.

OTHER UNCOMMON CAUSES OF PAROTITIS

- Sjogren's syndrome. A condition in which arthritis is associated with a decrease in activity of the glands of the body that produce saliva and tears. Some people are bothered by a dry mouth and intermittent salivary gland enlargement. The diagnosis is made with blood tests or by examination of a piece of tissue from the inside of the lip.
- Atypical mycobacteria. Can give rise to a condition that usually infects children. It is a germ similar to tuberculosis. It is often resistant to antibiotic treatment. It may require surgical treatment and removal of the infected salivary gland.
- Actinomycosis. An infection of the parotid gland that may also involve the overlying skin. The diagnosis is made by detecting granules of sulphur, produced by the bacteria, on microscopic examination. Treatment is with a prolonged course of penicillin for up to one year.

HOME CARE INSTRUCTIONS

- Apply ice bags about every 2 hours, for 20 to 30 minutes, while awake, to the sore gland. Place ice in a plastic bag with a towel around it to prevent frostbite to skin. Continue for 24 hours and then as directed by your caregiver.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.

SEEK IMMEDIATE MEDICAL ATTENTION IF :

- There is increased pain or swelling in your gland that is not controlled with medication.
- An oral temperature above 102º F (38.9º C) develops, not controlled by medication.

Document Released: 04/07/2004 Document Re-Released: 06/05/2009
ExitCare® Patient Information ©2011 ExitCare, LLC.