

Information Sheet: Hand Foot and Mouth Diseases (HFMD)

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What is HFMD?

Hand, foot and mouth disease (HFMD) is a common viral illness that usually affects children, typically under 10 years old. HFMD is characterized by a brief, mild illness and skin rash, with or without mouth ulcers that usually lasts 7-10 days. Serious complications are rare. It is not to be confused with foot-and-mouth (also called hoof-and-mouth) disease which is caused by a different virus and affects cattle, sheep, and pigs.

How do I catch HFMD?

In general, HFMD is an infectious disease caused by enteroviruses, usually the Coxsackie virus A16 or Enterovirus 71. In the tropics, HFMD is present all year round, with more outbreaks in the rainy season. The virus can spread from person-to-person when:

- The sick child sneezes, coughs, or blows their nose near you,
- You touch your nose, eyes, or mouth after you have touched something contaminated by the virus, such as a toy or doorknob.
- You touch stools or fluid from the blisters of an infected child.

The virus is most easily spread in the first week a person has the disease, but people can be contagious for days or weeks after symptoms go away. Therefore, the child should stay away from school while they have a fever, usually the first 3 days.

How can I tell if I have HFMD?

The time between contact with the virus and the start of symptoms is about 3 to 7 days. Symptoms include:

- A fever of 38-39°C may be present for 24-48 hours
- Small painful spots and then sores appear around and inside the mouth, tongue, and/or lips and may also be found on the hands, feet, buttocks, and genitalia
- Loss of appetite and malaise.
- Sore throat due to mouth ulcers.
- The rash is red and round, contain clear liquid inside (vesicle) and affects the palms and/or soles of the feet. Sometimes the rash may be just round and red without vesicles, and may also involve the buttocks, knees or elbows, particularly in younger children and infants.
- Spots can look similar to chickenpox but are smaller and not usually itchy.



Figure 1: By Grook Da Oger, via Wikimedia Commons

How do I treat HFMD?

There is no medication available to specifically treat HFMD. Instead, the treatment is supportive, as follows:

- Ensure adequate fluid intake to prevent dehydration; cold liquids are generally preferable.
- Fever and pain may be treated with medication to reduce fever and manage pain such as acetaminophen or ibuprofen.
- Direct pain and numbing medication may also be applied to the mouth ulcers through mouthwashes or sprays.
- Spicy or acidic substances may cause discomfort, and soft foods may be easier to tolerate.
- Intravenous hydration may be necessary if the patient has moderate-to-severe dehydration or if discomfort precludes oral intake.

How can I prevent getting HFMD?

A person can lower their risk of being infected and prevent the spread of HFMD by:

- Cover your mouth when coughing and sneezing,
- Use disposable tissue to blow nose and for wiping nose and mouth,
- Washing hands often with soap and water, especially after diaper changes, using the toilet, or coming in contact with the sores,
- Cleaning and disinfecting frequently touched surfaces and soiled items, including toys,
- Avoiding close contact such as kissing, hugging, or sharing eating utensils or cups with people with hand, foot, and mouth disease,
- Do not deliberately pierce blisters, they are contagious.
- Stay home from school, pools, and childcare setting for the first days and while they have a fever.

When to Contact a Medical Professional?

Call your health care provider if:

- Medicine does not lower a high fever or fever continues for more than 3 days.
- Child complains of neck pain, chest pain, difficulty breathing, listlessness, or lethargy.
- Your child's mouth sores are causing difficulty swallowing, which may lead to dehydration which includes dry skin and mucus membranes, weight loss, irritability, decreased alertness, decreased or dark urine.

References:

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