Hand, Foot & Mouth Disease

Last Revised: 10/2001

Hand, Foot & Mouth Disease

Hand, foot and mouth disease is a self-limited infection caused by the *coxsackie* virus. Vesicular lesions (i.e., blisters) may appear in the mouth, on the sides of the tongue, inside the cheek and on the gums. Lesions may also occur on the palms, fingers, soles and buttocks. Most lesions persist for 7-10 days. A low-grade fever may accompany the illness for one to two days. The infection usually goes away without any serious complications.

Who gets this disease?

The infection is seen primarily in children under 10-years-old but may also occur in adults. Outbreaks of hand, foot and mouth disease among groups of children in nursery schools and child care centers during the summer and early fall are common.

How is it spread?

Having direct contact with nose and throat secretions of an infected person may spread the infection. It may also be spread by the aerosol droplet rout (e.g., sneezing, coughing). Additionally, the virus may also be spread by having contact with an infected persons who may not seem sick (aka carriers) are able to spread the infection since the virus may persist in the stool for several weeks after the acute illness is over.

What are the symptoms?

Vesicular lesions may occur in the mouth, on the sides of the tongue, inside the cheek and on the gums. Lesions also occur on the palms, fingers, soles and buttocks. Most lesions persist for 7-10 days. A low-grade fever may accompany the illness for one to two days.

How soon do symptoms appear?

People who are going to contract the infection usually do so three to five days after exposure.

Can a person have this disease without knowing it?

Yes. Infected persons who may not seem sick are able to spread infection. The virus may persist in the stool for several weeks after the acute illness is over.

How is it diagnosed and treated?

Hand, foot and mouth disease may be diagnoses by a healthcare provider based on clinical signs and symptoms. There is no specific treatment.

How can the spread of this disease be prevented?

- 1. Wash your hands thoroughly after using the toilet and diapering a child.
- **2.** Wash hands thoroughly after handling respiratory discharges, stool and soiled articles of infected persons.
- **3.** Discourage children from putting toys and other objects in their mouths.
- **4.** Clean and disinfect toys and contaminated areas (e.g., diapering area, potty chairs, toilets) daily and when soiled.
- **5.** Do not allow children to share drinking cups or eating utensils.
- **6.** Teach children to sneeze and cough into a tissue, toward the floor and away from other people.
- **7.** Dispose of tissues and diapers properly; wash hands after sneezing, coughing, changing diapers and using the toilet.
- **8.** Children may attend child care if they feel well enough even if lesions are still present. In this situation, child care staff should be especially careful to adhere to steps 1-7 above.
- **9.** Grouping of symptomatic individuals, where practical, might be considered.

Who should be excluded?

Exclusion from a child care facility or school is not recommended. Special attention to hand washing after toileting is required.

Reportable?

No. Hand, foot and mouth disease is not reportable by New Hampshire law. However, Bureau public health nurses are available for consultation.