

FactSheet

Para Su Información

Hand, Foot & Mouth Disease

What is hand, foot and mouth disease?

Hand, foot and mouth disease (HFMD) is a common illness of infants and children. HFMD is characterized by a mild fever, poor appetite, malaise (“feeling sick”), sore throat and a skin rash with blisters. One or two days after the fever begins, sores develop in the mouth. They begin as small red spots that blister and then often become ulcers. They are usually located on the tongue, gums and inside of the cheeks. The skin rash develops over one to two days with flat or raised red spot, some with blisters. The rash does not itch and is usually located on the palms of the hands and soles of the feet. It may also appear on the buttocks. A person with HFMD may have only the rash or the mouth ulcers.

Is HFMD the same as foot-and-mouth disease?

No. HFMD is a different disease than foot and mouth disease of cattle, sheep and swine. Although the names are similar, the two diseases are not related at all and are caused by different viruses.

Is HFMD serious?

Usually not. Nearly all people with HFMD recover without medical treatment. HFMD usually resolves in seven to ten days. There are no common complications. Rarely, this illness may be associated with aseptic or viral meningitis, in which the person has fever, headache, stiff neck or back pain and may need to be hospitalized for a few days.

What causes HFMD?

Several different viruses cause HFMD. The most common cause is coxsackievirus A16; occasionally, other strains of coxsackievirus A or enterovirus 71 cause HFMD. The coxsackieviruses are members of a group of viruses called the enteroviruses. The

enterovirus group includes polioviruses, coxsackieviruses, and echoviruses.

Is it contagious?

Yes, HFMD is moderately contagious. Infection is spread from person to person by direct contact with nose and throat discharges or the stool of infected persons. A person is most contagious during the first week of the illness. HFMD is not transmitted to or from pets or other animals.

How soon will someone become ill after getting infected?

The usual period from infection to onset of symptoms is three to six days. Fever is often the first symptom of HFMD.

Who is at risk for HFMD?

HFMD occurs mainly in children under ten years of age, but adults may also be at risk. Everyone is susceptible to infection. Infection results in immunity to the specific virus, but a second episode may occur following infection with a different member of the enterovirus group.

When and where does HFMD occur?

Individual cases and outbreaks of HFMD occur worldwide, more frequently in summer and early autumn.

How is HFMD diagnosed?

HFMD is one of many infections that result in mouth sores. Another common cause is oral herpesvirus infection, which produces an inflammation of the mouth and gums (sometimes called stomatitis). Usually, the physician can distinguish between HFMD and other causes of mouth sores based on the

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age of the patient, the pattern of symptoms reported by the patient or parent, and the appearance of the rash and sores on examination. A throat swab or stool specimen may be sent to a laboratory to determine which enterovirus caused the illness. Since the testing often takes two to four weeks to obtain a final answer, the physician usually does not order these tests.

How is HFMD treated? Can it be prevented?

No specific treatment is available for this infection. Symptomatic treatment is given to provide relief from fever, aches or pain from the mouth ulcers. Preventive measures include frequent handwashing, especially after diaper changes; disinfection of contaminated surfaces by household cleaners; and washing soiled articles of clothing. Children are often excluded from child care programs, schools or other group settings during the first few days of the

illness. These measures may reduce the spread of infection, but they will not completely interrupt it.

Where can I get more information?

Contact your doctor or the Southern Nevada Health District, Office of Epidemiology at (702) 759-1300.

The above information is from the Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases, Centers for Disease Control and Prevention.



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