

## HAND, FOOT, AND MOUTH DISEASE (HFMD)

Hand, foot, and mouth disease is a viral infection that causes a blister-like rash most commonly involving the hands, feet, and mouth but the rash may appear on other parts of the body e.g., diaper area, arms, legs etc.

The infection occurs most commonly in children less than 10 years of age and most often in the summer and fall months. Outbreaks may occur in childcare settings and preschools.

**CAUSE** Most commonly caused by Coxsackievirus A16 (CVA16) or Enterovirus 71 (EV71).

**SYMPTOMS** Fever, rash, sores, and a vague feeling of illness. The rash may appear as small pimply sores at first progressing to larger sores (some fluid filled) that tend to scab over after a day or two. These sores may last 7 to 10 days. The sores do not usually itch but can be painful as they emerge and may appear on parts of the body other than the hands, feet, or mouth (e.g., groin, buttocks, torso, arms, and face).

Sores in the mouth and/or throat may cause loss of appetite and/or dehydration which may become a medical emergency. Ask a healthcare provider how to prevent dehydration. The disease is usually self-limited, but in rare cases has been fatal.

**SPREAD** The virus leaves the body through the saliva, stool and fluid filled sores of an infected person and enter another person when hands, food, or objects (such as toys) contaminated with virus are placed in the mouth. It also is spread through droplets that are expelled from the nose and mouth of an infected person during sneezing and coughing and by direct contact with respiratory secretions.

**INCUBATION** It usually takes 3 to 6 days after exposure for symptoms to begin.

**CONTAGIOUS PERIOD** During the first week of illness and possibly for several weeks after illness. Virus may be shed for several weeks in stool. Infected persons who may not exhibit any, or very mild, signs or symptoms are able to spread the virus.

**EXCLUSION** Childcare and School: May return when

- 1. they have no fever for 24 hours without the use of fever-reducing medication, AND
- 2. all lesions are dry and scabbed over, AND
- 3. no new lesions have appeared for 24 hours. The child must meet all criteria for readmission.

**TREATMENT** No specific treatment.

## **PREVENTION/ CONTROL**

• Cover nose and mouth with a tissue when coughing and sneezing or cough/sneeze into your sleeve. Dispose of used tissues.







- Wash hands thoroughly with soap and warm running water after using the bathroom, after changing diapers, after handling anything soiled with stool or secretions from the nose or mouth, and before preparing food or eating.
- Thorough hand washing is the best way to prevent the spread of communicable diseases. Staff should closely monitor hand washing of all children after children have used the bathroom or have been diapered.
- Clean and disinfect diapering area and potty chairs after each use and bathroom toilets, sinks, and toys at least daily and when soiled. Clean and sanitize mouthed toys, objects, and surfaces at least daily and when soiled.

## For more information, please contact your local health department.

Southern Nevada Health District (Clark County) 775-759-1300 (24 hours) Northern Nevada Public Health (Washoe County) 775-328-2447 (24 hours) Carson City Health & Human Services (Carson City, Douglas, Lyon Counties) 775-887-2190 (24 hours) Division of Public and Behavioral Health (All other Counties) 775-400-0333 (24 hours) Email: dpbhepi@health.nv.gov



