FACT SHEET

Hand, Foot and Mouth Disease

What is Hand, Foot and Mouth Disease?
Hand, foot, and mouth disease (HFMD) is a common illness of infants and children caused by a Coxsackie virus.

What are the symptoms of Hand, Foot and Mouth Disease?
It is characterized by fever, sores in the mouth, and a rash with blisters. HFMD begins with a mild fever, poor appetite, malaise ("feeling sick"), and frequently a sore throat. One or 2 days after the fever begins, painful sores develop in the mouth. They begin as small red spots that blister and then often become ulcers. The sores are usually located on the tongue, gums, and inside of the cheeks. The skin rash develops over 1 - 2 days with flat or raised red spots, some with blisters. The rash does not itch, and it 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.

How soon do symptoms appear?
The usual period from infection to onset of symptoms ("incubation period") is 3 - 5 days. Fever is often the first symptom of HFMD.

How are these viruses spread?
The virus is spread when an infected person coughs, sneezes, or kisses someone else. The virus is also spread by coming in contact with the stool of an infected person, as when changing diapers. HFMD is not transmitted to or from pets or other animals.

Who gets Hand, Foot and Mouth Disease?
Anyone, especially children.

For how long is a person infectious?
A person is most likely to spread the disease to others during the first week of the illness. The Coxsackie virus may be found in the throat of an infected person for 2 weeks (even if there are no lesions in the mouth) and in the stool for several weeks after infection. Infected persons who do not appear to be ill may also spread the virus.

What is the treatment for this illness?
No specific treatment is available. Symptomatic treatment is given to provide relief from fever, aches, or pain from the mouth ulcers. Patients almost always fully recover.

Do infected people need to be excluded from school, work, or child care?
HFMD outbreaks in child care facilities usually coincide with an increased number of cases in the community. Keeping children and adults from activities outside the home usually will not reduce spreading of the disease because people may spread the virus without becoming very ill, and others who become ill may continue to have the virus in their bowel movements for weeks after recovering. Therefore, a child does not need to be kept away from child care unless:

- The child is unable to participate comfortably because of their illness.
- Child care staff determine they cannot care for the child without compromising the care of other children in the group. Example: Managing an infant with excessive drooling due to mouth sores may be difficult due to the nature of group infant care and the infectious nature of the drool. The infant may need to be kept away from a child care center until the sores heal up in the mouth.
- The child meets other exclusion criteria such as fever, diarrhea, vomiting, etc.

Adults are not usually kept away from work since most adults with this virus will not have any symptoms.
**What can be done to help prevent the spread of Hand, Foot and Mouth Disease?**

Good handwashing, especially after handling soiled tissues, using the bathroom or changing diapers, is the best way to prevent infection with the Coxsackie virus. Healthcare workers should wear disposable gloves when handling sheets or clothes soiled with the feces or saliva of persons who are ill.

In child care facilities:

- Make sure that all children and adults use good handwashing technique, especially after toileting, assisting with toileting, diaper changes, sneezing or coughing and wiping noses.
- Thoroughly clean contaminated surfaces and items and sanitize with properly diluted bleach water.