



Hand, Foot and Mouth Disease

What is hand, foot and mouth disease?

Hand, foot and mouth disease is caused by certain types of viruses. It is most common in children under 10 years of age but older children and adults may also get the disease. Most cases occur in the summer and early fall.

What are the symptoms?

The symptoms start 3 to 5 days after contact with an infected person. The first sign of infection may be a mild fever, sometimes with a runny nose or sore throat, tiredness and loss of appetite. The fever usually lasts 1 to 2 days.

About 2 days after the fever starts, small painful blisters may develop on the inside of the mouth, on the tongue or on the gums. A day or 2 later, small red spots may appear on the palms of the hands, soles of the feet and sometimes on the buttocks. These red spots may turn into blisters. The spots and blisters usually go away after about 7 to 10 days.

Peeling skin and loss of fingernails or toenails have also been reported, mostly in children, within weeks of having hand, foot and mouth disease. However, it is not known if these are the result of the disease. The skin and nail loss is temporary.

Not everyone who has hand, foot and mouth disease will get all of these symptoms. It also is possible to have the infection and have no symptoms.

How is it spread?

Once a person is infected and sick, they can be contagious and spread the virus for about 7 to 10 days. The virus is spread through the air when an infected person coughs or sneezes. You can be infected by inhaling these droplets or touching objects contaminated with them. The virus can also be spread by touching surfaces contaminated with fluid from the blisters or fecal matter. The virus stays for up to 4 weeks in the bowels of an infected person and can be spread during that time.

Pregnant women who become infected with the virus shortly before they give birth may pass the virus to their baby. Newborn babies infected with the virus usually have a mild illness, but in rare cases the disease can be more severe. There is no clear evidence that infection during pregnancy will cause harm to an unborn baby.

Hand, foot and mouth disease can spread easily in child care settings and other places where children are close together.

How can you prevent the disease?

Good hygiene during and after infection is very important in preventing hand, foot and mouth disease. It is possible you or your child may be contagious for several weeks after the blisters and sores have healed because the virus may remain in the feces.

To help reduce the spread of hand, foot and mouth disease wash hands often with soap and warm water. Teach children to sneeze or cough into a tissue or their inner arm where the elbow flexes. This prevents the spread of airborne droplets. Encourage children to

throw tissues directly in the garbage after use and to wash their hands again.

Your child may continue to attend daycare if they feel well enough to take part in activities. The risk to other children is not great if proper hygiene practices are followed. Take extra care to wash hands and clean surfaces thoroughly after changing diapers and before serving or eating food around children and child care settings.

Common surfaces and shared toys should be cleaned with soap and water and disinfected with a bleach solution. To disinfect surfaces use a bleach solution made by mixing 15 ml (1 tbsp) of bleach with 1 litre (4 ¼ cups) of water. A weaker solution of bleach, made by mixing 5 ml (1 tsp) of bleach with 1 litre (4 ¼ cups) of water, should be used to disinfect toys.

Continue to carefully practice proper hygiene for several weeks or months after your child feels better.

For more information on hand washing, see HealthLinkBC File [#85 Hand Washing for Parents and Children](#).

How is it treated?

When necessary, the fever from hand, foot and mouth disease can be reduced with acetaminophen (such as Tylenol®). Ask your health care provider the dose to use, or read the instructions on the package or bottle carefully. Antibiotics will not help treat or cure this disease.

Acetaminophen or Tylenol® can be given for fever or soreness. ASA or Aspirin® should NOT be given to anyone under 20 years of age due to the risk of Reye Syndrome.

For more information on Reye Syndrome, see HealthLinkBC File [#84 Reye Syndrome](#).

Blisters will heal better if they are left alone, so do not pop them. Because the mouth sores can be painful, your child may not want to eat or drink. These sores can be treated with an ointment used for teething. You can place some ointment on your finger and gently apply to your child's sores. Wash your hands before and after applying the ointment. Use these products in moderation. If swallowed frequently, a child's throat could become numb, and this could cause difficulty swallowing.

Give your child only cold, bland liquids such as milk or water. Do not give fizzy or tart drinks such as pop or fruit juice. These will sting. Give your child only bland, cool and soft foods such as bread, noodles, or a peanut butter and jelly sandwich.

Remember, if hand, foot and mouth disease is suspected, encourage proper hygiene, frequent hand washing, and other basic cleanliness practices to prevent it from spreading to others.

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