

Hand, foot and mouth disease

What is hand, foot and mouth disease?

Hand, foot and mouth disease is caused by enteroviruses. It's most common in children under 10 years of age, but older children and adults may also get the disease. Cases occur mainly in the summer and early fall.

What are the symptoms?

Symptoms start 3 to 6 days after being infected with the virus. Symptoms usually start suddenly and may include a fever, sore throat, headache or loss of appetite. Vomiting and diarrhea may also be present. The fever usually lasts one 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 or fingers, soles of the feet or toes, and sometimes on the knees, elbows and buttocks (bum). These red spots may turn into blisters. The spots and blisters usually go away after about 7 to 10 days.

Not everyone with hand, foot and mouth disease will get all these symptoms. It's also possible to be infected and have no symptoms.

What are the complications?

Dehydration (loss of body fluids) is the most common complication of hand, foot and mouth disease. This can occur if you or your child does not drink enough liquids due to pain from swallowing. Make sure that you or your child drink enough liquids to stay hydrated.

Other complications such as meningitis (an infection of the lining that covers the brain) and encephalitis (swelling of the brain) are very rare.

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.

How is it spread?

A person with hand, foot and mouth disease is most contagious in the first week of their illness. They can spread the virus to others through close personal contact such as kissing, or sharing drinking cups, forks or spoons. The virus can also spread through droplets in the air when an infected person coughs or sneezes. You can be infected by inhaling these droplets or touching objects or surfaces contaminated with fluid from the blisters, lungs or fecal matter. The virus can stay for up to several weeks in the bowels of an infected person and can be spread during that time.

Pregnant people 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 if proper hygiene practices are not used.

How can you prevent the spread of the disease?

Good hand hygiene during and after infection is important for preventing the spread of hand, foot and mouth disease. It's possible you or your child may be contagious for several weeks

after the blisters have healed because the virus may remain in the feces.

To help prevent or reduce the spread of the disease, wash your hands and your child's hands often with soap and warm water for at least 20 seconds. This is especially important after changing a diaper or using the toilet.

To prevent the spread of airborne droplets, teach your child to sneeze or cough into a tissue or their inner arm where the elbow flexes. Encourage your child 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.

Common surfaces that many people touch regularly and shared toys should be cleaned with soap and water, and disinfected with a bleach solution. You can make a sanitizing solution for use on surfaces by mixing the following together:

- Mix 15 mL (1 tablespoon) of household bleach into 1 litre (4 cups) of water

A weaker solution of bleach should be used to disinfect toys:

- Mix 5 mL (1 teaspoon) of household bleach into 1 litre (4 cups) of water

Continue to carefully practice proper hand hygiene for several weeks or months after your child feels better. For more information on hand washing, please visit [HealthLinkBC File #85 Hand washing: Help stop the spread of germs](#).

How is it treated?

When necessary, the fever from hand, foot and mouth disease can be reduced with acetaminophen (for example Tylenol®) or ibuprofen (for example Advil®). Ask your health care provider for the correct dose to use, or read the instructions on the package or bottle carefully. Antibiotics will not help to treat or cure this disease because it is caused by a virus.

Acetaminophen (e.g. Tylenol®) or ibuprofen* (e.g. Advil®) can be given for fever or soreness. ASA (e.g. Aspirin®) should not be given to anyone under 18 years of age due to the risk of Reye syndrome.

*Ibuprofen should not be given to children under 6 months of age without first speaking to your health care provider.

For more information on Reye syndrome, please visit [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.

If you are breastfeeding or chestfeeding, continue to offer breast milk to your child. You may also offer your child cold, bland liquids such as milk (after 9 months of age) or water. Do not offer fizzy or tart drinks such as pop or fruit juice. Offer your child cool and soft foods such as bread, noodles, or a peanut butter and jelly sandwich. Avoid acidic and spicy foods, as these may sting.



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