



Essex Health Protection Unit

Further advice on any of the areas discussed or copies of this sheet may be obtained from the unit:

Main office telephone 0845 155 0069

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Factsheet on Hand, Foot and Mouth Disease

What is Hand, Foot and Mouth Disease?

Hand, foot and mouth disease is a viral illness. The causative virus is quite different from that of Foot and Mouth disease, a disease of animals.

What is the incubation period?

The incubation period (this is from exposure to a case to development of the first signs and symptoms of the disease) is three to five days.

It is communicable immediately before and during the acute stage of the illness, and perhaps longer as the virus may be present in the faeces for weeks.

What are the symptoms?

The onset of the disease generally presents as a fever, malaise, sore mouth and development of a rash. Mouth lesions appear on the inside surfaces of the cheeks, gums and on the sides of the tongue. Raised pink spots that develop into blisters, which may persist for seven to ten days, can also occur as a rash, especially on the palms, fingers, soles and occasionally on the buttocks.

The disease is self-limiting and more common in summer and early autumn, mainly in children under ten years of age, but adult cases are not unusual. The disease frequently occurs in outbreaks in groups of children, in a nursery school for example.

The virus is spread by direct contact with nasal and throat secretions or faeces of the infected person. The virus can also be transmitted by aerosol spread, i.e. coughing and sneezing. Coughing and sneezing are also likely to contaminate hands which, if not washed thoroughly, may transmit infection.

Preventing spread of the disease

Children should be kept away from school/nursery whilst unwell. However, there is no need to keep a child away from school/nursery until the last blister has disappeared providing he/she is otherwise well.

A good standard of hand, personal and food hygiene should be maintained and care when handling articles contaminated with respiratory secretions or faeces, i.e. handkerchiefs, tissues, nappies etc., should be encouraged. Hands should be washed after contact with any of the above. These, of course, are measures which should be encouraged at all times to prevent this and many other infections.

Is there any effective treatment?

No specific treatment or immunisation is given for this disease. Investigation of contacts or the source of infection is of no practical value.

Key Points

Children should remain away from school/nursery until they feel well. Regular hand washing and drying should be encouraged.

Blisters



Foot blisters from Dept Dermatology, Waikato Hospital, New Zealand



Hand blisters from Dept Dermatology, Waikato Hospital, New Zealand