

# Hand, Foot, and Mouth Disease

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*HFM disease is a common contagious illness caused by viruses from the enterovirus family, most commonly the coxsackievirus. These viruses live in the body's digestive tract and spread from person to person, usually on unwashed hands and surfaces contaminated by feces. Kids ages 1 to 4 are most prone to the disease; cases are often found in childcare centers, preschools, and other places where kids congregate. The illness typically lasts 3-5 days. Outbreaks usually occur during the warm summer and early fall months, though they can happen year-round in tropical parts of the world.*

## Signs and Symptoms

HFM disease causes painful blisters in the throat, tongue, gums, hard palate, or inside the cheeks. Blisters are red with a small bubble of fluid on top and often turn into ulcers. The soles of the feet and the palms of the hands also may be affected with a rash that can look like flat red spots or red blisters.

Occasionally, a pink rash may be seen on other parts of the body, such as the buttocks and thighs. However, some children with HFM disease develop no symptoms, or if they do, may only have sores in the back of the throat.

It can be hard for a parent to tell if a child (especially a preverbal child) has HFM disease if sores are only inside the mouth or throat. Very young kids may not be able to complain of a sore throat, but if a child stops eating or drinking, or wants to eat or drink less often, it's a signal to parents that something is wrong.

A child also might:

- develop fever, muscle aches, or other flu-like symptoms
- become irritable or sleep more than usual
- begin drooling (due to painful swallowing)
- gravitate toward cold fluids

## Preventing the Spread

HFM is contagious and can spread through contact with feces, saliva, mucus from the nose, or fluid from the blisters. Even after recovery, kids can pass the virus in their stool for several weeks, so still can spread the infection to others even though they're no longer sick.

**Hand washing is the best protection!** Remind everyone in your family to wash their hands frequently, particularly after using the toilet, changing a diaper, before meals, and before preparing food. Shared toys in childcare centers should be cleaned often with a disinfectant because these viruses can live on objects for several days.

Keep kids home from school and childcare while they have a fever or open blisters on the skin and mouth.

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## Treatment

*There is no medical cure for HFM disease. The illness needs to run its course. You can do some things at home to make your child more comfortable during recovery.*

*HFM disease usually resolves within several days to a week and kids recover completely. Very rarely it can lead to complications such as viral meningitis (infection of the fluid around the brain and spinal cord) or encephalitis (infections and inflammation of the brain)*

Acetaminophen or ibuprofen can be given to console a child who is achy or irritable or ease painful mouth sores or discomfort associated with fever. Do not give aspirin to children or teens as it may cause a rare but serious illness called Reye syndrome.

Cold foods like ice cream and popsicles ease pain by numbing the area, and will be a welcome treat for those who have difficulty swallowing (and even those who don't!).

Kids with blisters on their hands or feet should keep the areas clean (wash with lukewarm soap and water, pat dry) and uncovered. If a blister pops, dab on a bit of antibiotic ointment to help prevent infection and cover it with a small bandage.

It is very important to make sure your child drinks plenty of fluids to prevent dehydration. Call your doctor if your child remains very irritable; can't be consoled; is lethargic; or has signs of dehydration such as dry tongue, sunken eyes, or decreased urine output; or if symptoms worsen.

A child who has difficulty swallowing might be prescribed "magic mouthwash"— a mixture made by pharmacists that can be dabbed onto sores to alleviate pain.

*Adapted from [www.kidshealth.org](http://www.kidshealth.org)*