Hand, Foot & Mouth Disease

Fact Sheet

What is hand, foot and mouth disease?
Hand, foot, and mouth disease (HFMD) is a common illness of infants and children. It is characterized by fever, sores in the mouth, and a rash with blisters.

Is hand, foot and mouth disease the same as foot-and-mouth disease?
No. HFMD is often confused with foot-and-mouth disease of cattle, sheep, and swine. The two diseases are not related at all and are caused by different viruses.

How do you get hand, foot and mouth disease?
HFMD is spread by direct contact with nose and throat discharges (coughing, sneezing), saliva, fluid from blisters, and with the bowel movements of the infected person.

What are the symptoms of hand, foot and mouth disease?
- Sudden onset of fever
- Sore throat
- Tonsil area fiery red
- Oyster shell white little blisters appear in the mouth 4-6 days after the onset of the illness
- Loss of appetite
- Sometimes nausea and vomiting
- Sores appear on palms, fingers and soles of feet
- Sometimes no specific symptoms

One to two days after the fever begins, painful sores develop in the mouth. They begin as small red spots that blister and then often become ulcers. They are usually found on the tongue, gums, and inside the cheeks.

The skin rash develops over one to two days with flat or raised red spots, some with blisters. The rash does not itch. It is usually found on the palms of the hands and soles of the feet. A person with HFMD may have only the rash or the mouth sores.

How soon do symptoms occur?
People may get sick three to seven days after being infected. The illness usually lasts seven to 10 days. The person with HFMD is very contagious during the first week of the illness and perhaps longer since viruses stay in the person’s bowel movements for several weeks.

Who is at risk for hand, foot and mouth disease?
HFMD occurs mainly in children under 10 years old, but adults may also be at risk. Not everyone who is infected gets sick.

How is hand, foot and mouth disease treated?
There is no specific treatment other than treating the symptoms. The ill person should rest, take food and fluids as they are able (avoid citrus juices). A non-aspirin product may be taken for pain or fever. Normal activities can be resumed when the person feels better as the virus is no longer
active from the mouth and nose.

**How can hand, foot and mouth disease be prevented?**
Direct contact with infected persons should be avoided. Don’t share eating or drinking utensils. If you must care for a person with Hand, Foot and Mouth Disease, be sure to wash your hands after giving care or touching soiled clothing or bedding. Soiled articles should be washed with soap or discarded.

Always use good hygiene. Wash your hands after using the bathroom and before preparing or eating food. Cover your mouth and nose with a tissue when you cough or sneeze and then throw away tissues immediately after use. Teach your children these good hygiene practices which will protect them against many diseases as well as Hand, Foot and Mouth Disease.

**Should a child with hand, foot and mouth disease stay home from day care or school?**
There are no rules that say a child must stay home. Children are often kept out of day care, school or other group settings the first few days of the illness. This may reduce the spread of infection, but will not completely stop it. Keeping sick children home may not prevent more cases since the virus is present in stool for weeks after the symptoms have disappeared. Some people who have the virus in their stool may have no symptoms. It may be helpful to keep children home who have blisters in their mouths and drool or who have weeping sores on their hands.

This fact sheet is for information only and is not meant to be used for self-diagnosis or as a substitute for talking with a health care provider. If you have any questions about hand, foot and mouth disease or think you may have it, call your health care provider.