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# Hand, foot and mouth disease

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## Summary

- Hand, foot and mouth disease is usually a mild viral illness which is common in children.
  - Diagnosis is made by a doctor, and there is no specific treatment.
  - Good personal hygiene is important to prevent spread of the disease.
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## What is hand, foot and mouth disease?

Hand, foot and mouth disease (HFMD) is caused by a virus (usually from the coxsackie group of enteroviruses, particularly coxsackie virus A16). It causes blisters

(<http://www.betterhealth.vic.gov.au/health/conditionsandtreatments/blisters>)

on the hands and feet, in the mouth and often in the 'nappy' area. It is generally a mild disease that lasts 7 to 10 days.

HFMD is more common during warmer weather and tends to spread easily between children.

There is no connection between this disease and the foot and mouth disease that affects cattle and some other animals.

HFMD occurs mainly in children under 10 years of age, but can also affect older children and adults. Outbreaks may occur in childcare settings. By the time they are adults, most people have been infected with the virus that causes this disease.

## Spread of hand, foot and mouth disease

This infection is spread by direct contact with fluid from the skin blisters, nose and throat discharges (including saliva, sputum or nasal mucus), droplets (sneezing, coughing) and faeces (poo). Good personal hygiene is important to prevent spread of the infection to others.

The skin blisters of HFMD are infectious until they become crusty and there is no fluid in the blisters. The virus may also be shed in the faeces for several weeks

after the blisters resolve.

## Symptoms of hand, foot and mouth disease

People usually develop symptoms between 3 to 7 days after being infected.

The most common symptoms include:

- **fever**  
(<http://www.betterhealth.vic.gov.au/health/conditionsandtreatments/fever>)
- sore throat
- small, blister-like lesions that may occur on the inside of the mouth, sides of the tongue, palms of the hands, fingers, soles of the feet and 'nappy' area
- children are often irritable, tired, and may be off their food.

Very rarely, the virus can affect the lining of the brain or spinal cord, leading to more severe symptoms such as seizures, confusion, unsteadiness, and weakness.

## Diagnosis of hand, foot and mouth disease

Diagnosis is usually made by your doctor based on symptoms. Other tests are not usually required, but occasionally throat or faeces samples may be taken.

## Treatment for hand, foot and mouth disease

HFMD is a mild illness that resolves within a week. There is no specific treatment and usually none is required.

Use paracetamol (not aspirin) as directed for fever and any discomfort. Offer plenty of fluids, but avoid orange juice, which is acidic and may cause pain with **mouth ulcers**

(<http://www.betterhealth.vic.gov.au/health/conditionsandtreatments/mouth-ulcers>)

Allow blisters to dry naturally. Do not pierce blisters, as the fluid within them is infectious.

If a child with HFMD complains of severe **headache**

(<http://www.betterhealth.vic.gov.au/health/conditionsandtreatments/headache>)

, if fever persists, or if there are any worrying symptoms, consult your doctor immediately.

## Prevention of hand, foot and mouth disease

Good personal hygiene is essential to prevent the spread of HFMD to others, both for those infected and their carers:

- **Wash hands carefully with soap and water**  
(<http://www.betterhealth.vic.gov.au/health/conditionsandtreatments/handwashing-why-its-important>)  
after contact with the blister-like lesions, after handling nose and throat discharges, and after contact with faeces such as with toileting and nappy changing.
- Use separate eating and drinking utensils.
- Avoid sharing items of personal hygiene (such as towels, washers and toothbrushes) and clothing (particularly shoes and socks).
- Thoroughly wash and clean any soiled clothing and surfaces or toys that may have been contaminated.
- Teach children about cough and sneeze etiquette, immediate disposal of tissues, and to wash hands afterwards.

Children with HFMD should be excluded from school and childcare centres until all of the blisters have dried. To assist in prevention of spread, parents should report the illness to the director of the childcare centre or school principal.

## Where to get help

- **Your GP (doctor)**  
(<http://www.betterhealth.vic.gov.au/health/serviceprofiles/general-practitioner-services>)
- **NURSE-ON-CALL**  
(<http://www.betterhealth.vic.gov.au/health/serviceprofiles/nurse-on-call-service>)  
Tel. **1300 606 024**  
– for expert health information and advice (24 hours, 7 days)
- **Maternal and Child Health Line**  
(<http://www.betterhealth.vic.gov.au/health/healthyliving/maternal-and-child-health-services>)  
. Tel. **13 22 29**  
(24 hours, 7 days)

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## References

### Hand, foot and mouth disease

(<https://www2.health.vic.gov.au/public-health/infectious-diseases/disease-information-advice/hand-foot-mouth-disease>)

, Department of Health, Victorian Government.

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This page has been produced in consultation with and approved by:



Department  
of Health

[\(https://www2.health.vic.gov.au/\)](https://www2.health.vic.gov.au/)

Department of Health - Public Health - Communicable Disease Prevention and Control

<https://www.health.vic.gov.au/public-health/infectious-diseases>

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<http://www.betterhealth.vic.gov.au/conditionsandtreatments/infections>

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