Are there risks to pregnant women exposed to infected children?
Because these viruses are very common, pregnant women are frequently exposed to them. Most infections during pregnancy cause mild or no illness in the mother. Strict adherence to good hygienic practices by the pregnant woman will help to decrease the risk of infection.

Department of Public Health
And
Infection Prevention and Control,
Community and Disability Services HSE
South (Cork and Kerry)

February 2012
What is Hand, Foot and Mouth Disease (HFMD)?
Hand, foot and mouth disease is caused by a group of viruses, usually the coxsackie virus. It is most common in children.

What are the symptoms?
The onset generally presents as a fever, malaise, sore mouth and development of a rash. Raised pink spots develop into blisters on palms, soles, and occasionally on the buttocks and mouth ulcers inside the cheeks and on the tongue and gums.

Children may have only the rash or the mouth ulcers or they may also have a sore throat and high temperature. These symptoms last for seven to ten days.
The incubation period (the time from being exposed to a case until the first symptoms appear) is three to five days.

Is it the same as foot and mouth disease in cows?
No. A completely different virus causes Foot and Mouth disease in cows. It is not transmitted to or from pets or other animals.

How is hand, foot and mouth disease spread?
The virus is spread from person to person by direct contact with the nasal and throat secretions or in the faeces of affected children. The virus can also be spread by aerosols i.e. by coughing and sneezing. Some children infected with the virus do not have symptoms but can still pass it to others.

It may also be spread by direct contact with contaminated surfaces and objects e.g. tissues, nappies.

Is there any treatment?
There is no specific treatment; it is usually a mild and self-limiting illness with complete recovery.
If a child feels unwell, paracetamol (such as Calpol) may help. Antibiotics and creams or ointments for the blisters are not effective. Children recover just as quickly without them.

How long are children infectious?
Children who are ill are infectious; they are most contagious during the first week of the illness. They can carry the virus in their faeces for many weeks after they have recovered and so may continue to pass it on.

How long should children stay off school?
Children who are unwell should be kept off school until they are feeling better.
Keeping children off school for longer than this is unlikely to stop the virus spreading. There may be other children in the school who appear well but are spreading the virus.

How can spread be prevented?
Hand washing is the mainstay of prevention of transmission and control of outbreaks.
Hand washing must be carried out after contact with items such as handkerchiefs, tissues and nappies as the virus is present in respiratory secretions and in faeces. Young children may need supervision.
Handwashing is also essential before preparing or eating food.

When coughing or sneezing, teach children to:
✓ Turn your head away from others
✓ Use a tissue to cover your nose and mouth
✓ Drop your tissue into a bin
✓ If you have no tissue, sneeze or cough into your sleeve
✓ Clean your hands after disposing of your tissue

Whilst the person has the blisters:
• They should not share face cloths or towels with others.
• Towels and facecloths that are soiled should be washed on a “hot wash” cycle of the washing machine.
• Don’t suck or chew pencils, pens or toys.
• Don’t share cups, straws, spoons, glasses or eating utensils.
• Keep surfaces, shared equipment and toys clean.
• Wash dishes well in hot soapy water.

These are measures that should be encouraged at all times to prevent this and many other infections.