



Hand, Foot and Mouth Disease Fact Sheet

Overview

Hand, foot, and mouth disease (HFMD) is a common disease that can cause fever, mouth sores, and skin rash.

It can spread very quickly between people, often in schools and day care centers.



Skin rash on the palms of the hands.



Sores in mouth.



Sores on feet.

Key Points

- While hand, foot, and mouth disease is common in children 5 and under, anyone can get it.
- HFMD is very contagious but usually not a serious illness.
- Effective methods to prevent spread are to wash hands thoroughly, clean and disinfect surfaces, and avoid contact with others.

What are the Common Signs and Symptoms in People with HFMD?

Fever, sore throat, mouth sores, and rash may appear 3 to 5 days after being infected. An infected person may also eat and drink less and have a general unwell feeling.

Mouth sores usually start as small red spots on the tongue and insides of the mouth and can be painful.

Skin rash can show up on the hands and feet, but may also appear on the buttocks, legs, and arms.

Most children have mild symptoms lasting for 7 to 10 days.

Who is at Risk?

HFMD is most common in infants and children under 5 years old. Pregnant people who have been exposed to someone with HFMD should contact their health care provider. Complications from HFMD during pregnancy are rare.

How is HFMD Diagnosed?

Laboratory tests are usually not necessary. Diagnosis by a health care provider is usually made by viewing the rash and sores and looking for other symptoms.

What is the Treatment for HFMD?

HFMD is usually not serious, and most people recover with little to no medical treatment. **If symptoms worsen, or you notice your child drinking less fluids and showing signs of dehydration, seek care immediately.**

There are steps you can take to manage symptoms on your own at home:

- Take over-the-counter medications to relieve both fever and pain from the mouth sores.
Do not give aspirin to children.
- Prevent dehydration by drinking enough liquids to stay hydrated.



How does HFMD Spread to other People?

- Contact with droplets from a sick person who coughs, sneezes, or talks (during the first 1 to 3 weeks of being sick.)
- Touching an infected person or through other close contact, such as kissing, hugging, or sharing cups and eating utensils.
- Touching an infected person's poop for weeks to months, including changing diapers and then touching your eyes, nose, or mouth.
- Touching objects and surfaces that may have the virus on them and then touching your eyes, nose, or mouth. This can include objects such as toys, tabletops, and doorknobs.
- While rare, HFMD can be transmitted via recreational water such as pools, if not properly treated with chlorine.

When infected, people usually spread the virus during the first week of being sick, but it is possible for people to still spread the virus for days or weeks after their symptoms have gone away. HFMD can also be spread from an infected person even if they do not have symptoms. HFMD virus can be found in nose and throat fluids, fluid from blisters, and poop.

Hand, foot, and mouth disease can spread any time of the year, but is most common in the summer and fall.

Can HFMD Cause Serious Infections?

While HFMD is usually not serious, and most people get better within 7 to 10 days, it can come with severe complications, including:

- **Dehydration**, mostly in children, due to painful mouth sores, preventing people from swallowing enough liquids.
- **Finger and toenail loss** is very rare but has been observed mostly in children. Cases of lost nails usually happen within a few weeks of being sick.
- **Viral (aseptic) meningitis** is rare in HFMD cases, but can cause fever, headaches, stiff neck, or back pain. The infected individual may require hospitalization.

If symptoms worsen, or you notice your child drinking less fluids and showing signs of dehydration, seek care immediately.

What Causes HFMD?

HFMD is caused by viruses that belong to the enterovirus family and include:

- **Coxsackievirus A16**, which is the most common cause in the United States.
- **Coxsackievirus A6**, can also cause HFMD, and the symptoms may be more severe.
- **Enterovirus 71 (EV-A71)**, has been associated with cases as well as outbreaks in East and Southeast Asia. While rare, EV-A71 has been associated with severe diseases, including encephalitis.



How can HFMD be Prevented?

HFMD is very contagious.

There is no vaccine in the United States to protect against the viruses that cause HFMD, so it is important to prevent spread:

- **Wash your hands often** and thoroughly with both soap and water for at least 20 seconds especially after possible exposures such as changing diapers, using the toilet, coughing, sneezing, or blowing your nose.
- **Help children wash their hands** and keep any blisters clean.
- **Avoid touching your face**, especially your eyes, nose, and mouth with unwashed hands.
- **Clean and disinfect** surfaces and shared items such as toys and doorknobs. Disinfect with a solution of one tablespoon of bleach to four cups of water.
- **Avoid close contact** with infected individuals.
- **Stay home from school or childcare settings** if a child has symptoms such as fever, open sores that cannot be covered, or uncontrolled drooling with mouth sores.

Because HFMD is normally mild, children can continue to go to childcare and school as long as they have no fever, feel well enough to participate in class, have no uncontrolled drooling with mouth sores, or have no open sores that are draining fluid and cannot be covered.

Resources

[About Hand, Foot, and Mouth Disease | Hand, Foot, and Mouth Disease \(HFMD\) | CDC](#)

[Managing Infectious Diseases in Child Care and Schools, 6th Edition \[eBook\] | shopAAP](#)

This fact sheet provides general information.

- Please contact your physician for specific clinical information.
- If you have any questions, contact us at **1-877-PA-HEALTH**