

## Public Health Alert



**Date:** 21 June 2013

**To:** GPs, Practice Nurses at Primary Care Centres, After-hours Centres, Pharmacists, the Emergency Departments and Hospital Staff in the greater Wellington and Wairarapa regions

**From:** Dr Annette Nesdale

### Atypical Hand Foot and Mouth Disease

As you are probably aware there is currently an increase in cases of Hand, Foot and Mouth Disease (HFMD) in the greater Wellington region. The symptoms seem to be more severe than usual HFMD and are likely to be due to the coxsackie A6 virus (CVA6). CVA6 has been associated with severe large outbreaks and severe disease overseas and unusually for HFMD may affect adults as well as children.

HFMD is generally a mild childhood illness with symptoms including mild fever, painful red blisters on the tongue, mouth, palms of the hands and soles of the feet. Cases of HFMD caused by CVA6 may present with a more extensive rash (including perioral, on legs, arms, buttocks and groin, on dorsum of hands and feet as well as palmar surfaces). Nail shedding may occur a few weeks after the initial symptoms in a small percentage of cases. There is no specific treatment for HFMD, so management is supportive.

Because of the atypical presentation of HFMD caused by CVA6, differential diagnosis may include herpes simplex or varicella-zoster virus infections. However, the Ministry does not recommend systematic and unnecessary testing for HFMD.

HFMD is spread by droplets from coughing or sneezing, or by contact with mucous, saliva, fluid from blisters or faeces of an infected person, or from contaminated surfaces. Transmission of HFMD can be reduced by maintaining good hygiene, including in particular, handwashing with soap and drying hands thoroughly, and disinfection of surfaces in child care settings and homes with bleach. Bleach is the recommended disinfectant as other disinfectants (unless they are specifically indicated to kill enteroviruses or noroviruses) are not very effective against enteroviruses like coxsackie viruses.

Cases should not attend childcare, school or work until 24 hours after the fever has gone, and/or until the blisters have dried up and no new blisters are appearing.

Attached is a Fact Sheet on HFMD from the Regional Public Health website [www.rph.org.nz](http://www.rph.org.nz)

Further information on HFMD caused by CVA6 can be found in the following links:

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6112a5.htm>

[http://wwwnc.cdc.gov/eid/article/18/10/12-0813\\_article.htm](http://wwwnc.cdc.gov/eid/article/18/10/12-0813_article.htm)