

Hand Foot and Mouth Disease

Description:

Hand, foot and mouth disease is caused by a number of different viruses including coxsackieviruses and enterovirus 71). It is not a serious illness and has nothing to do with animal diseases with similar names (i.e. foot and mouth disease in livestock, or paw and mouth disease in cats). It is a relatively common illness in children and outbreaks often occur among groups of children, especially in child care centres.

Symptoms:

The symptoms of this disease include blisters inside the cheeks, gums and on the sides of the tongue, as well as on the hands and feet. Although it is not common, blisters may be seen in the nappy area. Children with hand, foot and mouth disease may have a low fever, be listless and off their food for a day or two.

The blisters usually persist for 7 to 10 days.

People can spread the virus while there is fluid in the blisters. Faeces can remain infectious for several weeks.

Treatment:

Usually no treatment is required.

Control

Children with hand, foot and mouth disease should be excluded from child care or school until all blisters have dried.

Prevention:

The best form of protection is good hygiene:

- wash hands with soap and water for at least 20 1 seconds and dry thoroughly before handling food, after going to the toilet, touching soiled linen and articles and changing nappies.
- implement good cleaning procedures.
- allow blisters to dry naturally. The blisters should not be deliberately pierced because the fluid within the blisters is infectious.

Help and Assistance

For further information, please contact your local doctor, community health centre, nearest public health unit or the 13HEALTH information line (13 43 25 84).

References

Heymann, D., ed. 2008. *Control of Communicable Diseases Manual*, 19th edition. Washington, DC: American Public Health Association.

Related Content

Enterovirus 71 neurological disease fact sheet

¹ *Hand Hygiene Australia and Draft Staying Healthy in Childcare recommend 20 seconds now <http://www.hha.org.au/>, <http://www.hha.org.au/UserFiles/file/Brochures/ChildrenBrochure2011-05-09>.*
The footnote is for the consultation phase only.

Whooping Cough (Pertussis)

Description:

Whooping cough (or pertussis) is a highly contagious respiratory infection caused by the bacterium Bordetella pertussis. It can affect babies, children, adolescents and adults. For adolescents and adults the infection may only cause an irritating, persistent cough. However, whooping cough can be life threatening for babies and young children, particularly those not fully protected by vaccination. During coughing attacks, a baby or child's breathing can be obstructed and they may become blue or stop breathing.

Symptoms:

Whooping cough may start like a cold, with a runny nose, sneezing and tiredness, and then the characteristic cough develops. These coughing bouts can be very severe and frightening, and may end with a crowing noise (the whoop). This occurs as air is drawn back into the chest, and can be followed by vomiting or gagging. Bouts of coughing may continue for many weeks even after treatment.

Infants under six months of age, vaccinated children, adolescents and adults often don't have the typical whoop.

Transmission:

Whooping cough bacteria are highly infectious and are spread to other people by an infected person coughing and sneezing. The infection can also be passed on through direct contact with infected secretions from the mouth or nose. The time between exposure to the bacteria and getting sick is usually seven to ten days, but can be up to three weeks.

A person is most infectious in the early stages of their illness. Unless treated with antibiotics, a person is regarded as infectious for three weeks after the cough began.

Treatment:

Treatment is a full course of antibiotics which reduces the time a person is infectious to others. Antibiotics need to be given within 21 days of the start of general symptoms or within 14 days of the start of coughing. Antibiotics may reduce symptoms if given early.

Some people who have had close contact with an infected person may need to take antibiotics to prevent infection. This includes people at high risk of serious complications (eg. children aged less than one year who are not fully vaccinated and women near the end of their pregnancy) and others who live or work with people at risk.

Control

A person with whooping cough should stay away from work, school, preschool and child-care until they have had at least 5 days of their course of antibiotics, or until 21 days after the cough began.

If children who have had less than three doses of whooping cough vaccine are close contacts of an infected person, they should stay away from preschool and childcare until they have taken a full course of antibiotics, or for 14 days after their last exposure to the infected person.

Prevention:

Vaccination is the most effective way to prevent whooping cough. The vaccine is recommended and available free for:

- all children at 2, 4 and 6 months of age and 4 years of age. Vaccines due at 2 months of age can be given from 6 weeks, and those due at 4 years can be given from 3 years 6 months
- Year 10 students (booster).

A booster dose is also recommended for any adults who haven't had a previous booster, particularly:

Whooping Cough (Pertussis)

- parents planning a pregnancy, or as soon as the baby is born
- anyone working with or caring for babies and young children, especially healthcare workers, childcare workers and grandparents.

Help and Assistance

For further information please contact your local doctor, community health centre, nearest public health unit or the 13HEALTH information line (13 43 25 84).

Other Resources and Related Content

Immunise Australia website

Whooping cough and immunisation - Queensland Health fact sheet

References

Heymann, D. (Ed) 2008. *Control of Communicable Diseases Manual*, 19th edition. Washington, DC: American Public Health Association.

National Health and Medical Research Council, 2008. *The Australian Immunisation Handbook (9th Ed.)* Canberra: National Capital Printing.