

Coxsackie Virus: Herpangina & Hand-Foot-And-Mouth

About half of all children with coxsackie virus infection have no symptoms. Patients with symptoms often have fever. In addition to fever, coxsackie viruses usually cause one of two primary patterns of symptoms:

Herpangina

- Usually caused by group A coxsackie viruses, often in the summer or early fall, most commonly age 3-10 years old
- Small blisters at the back of throat especially near the tonsils and/or roof of mouth that can rupture to form larger ulcers.
- Can also have headaches, vomiting or abdominal pain.
- Oral lesions usually resolve spontaneously in less than 3-5 days.

Hand-Foot-And-Mouth

- Usually caused by A16 coxsackie virus (less commonly enterovirus 71), often in spring or early summer, most commonly less than 5-10yo.
- Small blisters on the tongue, gums, inside of cheeks, and roof of the mouth.
- Small tender blisters on the hands (especially palms and between fingers), soles of feet, buttocks and genitals.
- Typical symptom resolution: Fever up to 3 days, mouth ulcers up to 7 days, rash on hands and/or feet up to 10 days.
- Virus can also affect the nail plate (onychomadesis), therefore causing abnormal fingernail or toenail growth over the next few months.

Contagiousness

Coxsackie viruses are contagious, but typically cause mild and harmless disease.

A child may return to child care or school after fever is gone, drooling from mouth sores has stopped, and the child's needs do not compromise the staff's ability to care for other children.

Coxsackie viruses are passed from person to person on unwashed hands or surfaces contaminated by stool. They can also be spread through droplets of fluid sprayed into the air when someone sneezes or coughs. The typical incubation period (time from exposure to symptom onset) is 3-6 days. The rash is not contagious.

Care Advice

- Fever and/or pain control as needed for comfort
- Gargle with 1-2 teaspoons of refrigerated liquid antacid (such as Maalox) up to 4x/day as needed for throat pain (it is okay to swallow)
- Encourage cool fluids via cup, spoon, or syringe
- Soft, non-acidic, non-spicy foods as tolerated

When to Call

- Child looks or acts very sick
- Signs of dehydration (very dry mouth, no tears, no urine for more than 8 hours)
- Stiff neck, severe headache, or acting confused
- Very red, swollen and tender gums
- Heavy breathing and/or excessive tiredness even when there is no fever
- Fever above 101F for more than 3 days

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Prevention

Hand washing is the best mode of prevention. Remind the members of your family to wash their hands frequently, particularly after using the toilet (especially those in public places), after changing a diaper, before meals, and before preparing food. While your child has fever, avoid swimming pools or sharing bath with another child.

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Disclaimer: These guidelines are to help the caretaker with treatment at home. However, if you are ever concerned about your child's health, you should see a physician in person.