



- ◆ Hand, Foot and Mouth Disease likely caused by CVA6 is coming back!

Hand, Foot and Mouth Disease Likely Caused by *Coxsackievirus A6* is coming back in the Community!

Hand, foot, and mouth disease (HFMD) is caused by viruses that belong to the



Enterovirus genus.

This group of viruses includes polioviruses, coxsackieviruses, echoviruses, and enteroviruses.

Coxsackieviruses are divided into two groups: A and

B. At least 23 serotypes (1-22, 24) of group A and six serotypes (1-6) of group B have been identified. Coxsackievirus A16 (CVA 16) is the most common cause of hand, foot, and mouth disease in the United States. Enterovirus 71 (EV 71) has also been associated with hand, foot, and mouth disease and outbreaks of this disease.

In 2012, a new strain, *Coxsackievirus A6* (CVA 6) was identified by the Centers for Disease Control and Prevention (CDC) in association with outbreaks in the States of Alabama, California, and Nevada. Between February and Sept. of 2012, multiple outbreaks of HFMD caused by CVA 6 were reported from local child care centers and preschools in Washoe County. ***CVA 6 had been identified in other countries but had not been associated with outbreaks in the U.S prior to 2012.***

From the management of these outbreaks of HFMD caused by CVA6 in 2012 it was observed that previously accepted control measures for the more common strains of HFMD were not effective against this new CVA 6 strain.

Beginning June 17, 2013 Washoe County Health District (WCHD) began receiving

reports from three local child care centers that were experiencing increases of HFMD illness in children and employees. Based on information received to date, the clinical presentation appears to be consistent with HFMD caused by CVA 6. One hospitalization due to dehydration has been reported so far.

WCHD is recommending healthcare providers do the following when seeing patients with suspected Coxsackievirus infection to assist in controlling the spread of this illness in our community.

- ◆ Educate the patient and family about differences associated with this new strain of CVA 6 causing atypical HFMD. The uniqueness for CVA 6 caused HFMD may include 1) more severe skin rash and/or lesions; 2) Skin rash/lesions may appear on parts of the body other than hands, feet or mouth (e.g., groin, buttocks, torso, arms, legs, face); 3) Adults may present with HFMD symptoms; 4) Some cases may experience onychomadesis (nail shedding) about 1-2 months after illness onset.
- ◆ Provide parents with the printed fact sheet for atypical HFMD prepared by WCHD, which can be downloaded at WCHD's website: <http://www.washoecounty.us/repository/files/4/English-CVA6-Fact-Sheetv2-8-7-2012.pdf>. Both English and Spanish versions are available. See following page for the English version.
- ◆ Use the stricter exclusion criteria (all sores dry or scabbed over and no new sores for 24 hours). Reporting of sporadic cases is NOT required. However, if you notice that your patients come from same child care facility, **please call Washoe County Health District (WCHD) at 775-328-2447 to report.**



Atypical Hand, Foot, and Mouth Disease Caused by *Coxsackievirus A6* (CVA6)



Public Health
Prevent. Promote. Protect.

WASHOE COUNTY HEALTH DISTRICT EPIDEMIOLOGY AND PUBLIC HEALTH PREPAREDNESS DIVISION Updated, August 2012

A rare strain of hand, foot, and mouth disease (HFMD) has made its way to the Truckee Meadows. Over four hundred self-reported cases of HFMD have been received by WCHD in 2012. Typical HFMD, most commonly caused by either *Coxsackievirus A16* (CVA16) or *Enterovirus 71* (EV 71) is a common illness of infants and children ≤ 5 yrs.

What is Atypical HFMD caused by *Coxsackie A6* (CVA6)?

This specific virus (CVA6) has been identified as, an emerging disease (new to the U.S. in 2012), causing outbreaks of HFMD. The disease presentation associated with CVA6 differs from the more commonly seen forms of HFMD (e.g. CVA16 and EV 71) in that:

- 1) Transmission from children to adults is more common with CVA6,
- 2) The sores associated with CVA6 can be impressive and painful, appearing not only on the hands, feet and mouth but also on the buttocks, groin, face and extremities,
- 3) Some cases report nail shedding or peeling (onychomadesis) weeks after initial onset, and
- 4) This strain is not confined to just the summer months as with other viruses causing HFMD.

What are the signs & symptoms of HFMD caused by CVA6?

- Fever, rash, sores and a vague feeling of illness.
- A rash may appear as small pimply sores at first progressing to larger sores (some fluid filled) that scab over after a day or two.
- The sores do not usually itch but can be painful as they emerge and may appear on parts of the body other than the hands, feet or mouth (e.g. groin, buttocks, torso, arms and face). Sores in the mouth and/or throat may cause loss of appetite and/or dehydration.

Persons infected with the virus that causes HFMD may not have all the signs and symptoms of the disease. Some people may not have any symptoms but are infected with the virus and able to spread it to others.

How is HFMD treated?

The ill person should rest; take food and fluids as they are able; use fever reducing medications appropriately and consult a physician if needed. As there is no treatment or vaccine for HFMD the best defense is prevention. It is

believed that immunity occurs following infection but lasts only a short time.

How is HFMD spread?

HFMD is spread by direct contact with nose and throat discharges (coughing, sneezing), saliva, or fluid from blisters. It is also shed in the stool and spread by touching contaminated surfaces and then touching your mouth or food prior to washing, therefore, good hygiene is essential to control the spread of HFMD.

How long is a person with CVA6 contagious?

HFMD is very contagious during the first week of the illness when fever and sores are present and; for several weeks after the symptoms have disappeared because the virus continues to be shed in the stool for weeks afterwards.

How is HFMD diagnosed?

Your primary care provider can typically diagnose HFMD based on signs and symptoms; laboratory testing is not usually performed to verify the diagnosis.

Doctors should advise their patients to remain at home until they have no fever, all lesions have dried or scabbed over, and no other lesions have appeared for two days

How is HFMD caused by CVA6 prevented and controlled?

Interrupting person-to-person and surface-to-person transmission controls the spread of HFMD. **If people practice good personal hygiene after going to the bathroom and before eating it may limit the spread of the disease.**

Protect Yourself and Prevent the Spread of HFMD.

- Wash hands with soap and water carefully and frequently, especially after going to the bathroom, after changing diapers, and before preparing and/or consuming foods or beverages.
- Disinfect surfaces and items, including toys. First wash the items with soap and water; then disinfect them with a solution of 2 tablespoons of bleach to 4 cups of water.
- Avoid close contact such as kissing, hugging, or sharing eating utensils or cups with infected people.
- Remain at home until all three following criteria are met:
 - 1) fever free for 24 hours without the use of a fever reducer,
 - 2) all lesions have dried or are scabbed over, and
 - 3) no new lesions have appeared for two days.