Enterovirus 71 (EV71) infection



Enterovirus 71 (EV71) is one of a large family of viruses which multiply in the human gastrointestinal tract (gut). EV71 infection can cause illness ranging from mild through to serious with life threatening complications.

Reports of EV71 infection occur from time to time in Australia. Outbreaks have been reported in Asia over many years, and occasionally in Australia (for example in NSW in 2012 and 2013).

How enterovirus 71 is spread

Spread is from person to person through contamination of hands or objects (for example, toys) with infected faeces. The virus is then taken in by the mouth. Spread also occurs by contact with the saliva, nasal mucus or sputum (phlegm) of an infected person. In people with hand, foot and mouth disease, direct contact with fluid from blisters on the infected person can also spread the virus.

Signs and symptoms

EV71 is one of many possible viruses that cause hand, foot and mouth disease. Not all children with EV71 infections will have HFMD. In South Australia most cases of hand, foot and mouth disease are caused by other viruses.

The symptoms of <u>hand</u>, <u>foot and mouth</u> <u>disease</u> are:

- > fever
- > rash
- > tiredness

- > loss of appetite
- vulcers or blisters in the mouth, and on the hands and feet. Often there is a sore mouth for a few days before the ulcers or blisters appear and affected young children may refuse to eat or drink.

EV71 infection usually causes only a mild illness in adults and children. However children under 5 years old, especially those under 2 years, are at higher risk of developing a severe EV71 infection.

Serious infection may involve the brain (encephalitis) and the meninges (the lining of the brain and spinal cord, causing meningitis). Signs may include:

- > fever
- > stiff neck
- > vomiting
- > rash
- > cough
- > irritability
- > seizures (fits)
- vnsteadiness
- > weakness
- > paralysis.

The infection can also involve the heart, causing fast or slow heart rate, high blood pressure, or breathing difficulties.

Most cases recover completely but some need a short stay in hospital, and a very small number may have long-term consequences.

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Diagnosis

Hand, foot and mouth disease is diagnosed by the signs and symptoms.

Laboratory testing of samples from the throat, faeces or CSF (cerebrospinal fluid: the fluid surrounding the brain and spinal cord) is needed to make a definite diagnosis of EV71 infection.

Incubation period

(time between becoming infected and developing symptoms)

3 to 5 days.

Infectious period

(time during which an infected person can infect others)

People with hand, foot and mouth disease are infectious as long as there is fluid in the blisters. The faeces can remain infectious for several weeks.

Treatment

There is no specific treatment for EV71 infection. With severe infection, hospital admission is needed to monitor for any complications involving the brain and heart.

Prevention

Infections with EV71 can be prevented by the following measures:

- > Exclude people with hand, foot and mouth disease from childcare. preschool, school and work until all blisters have dried
- > wash your hands properly and make sure children wash their hands thoroughly
- regularly clean environmental surfaces (for example in the kitchen and bathroom) with detergent and warm water
- > cover a cough or sneeze with a tissue or your arm, not with your hand
- dispose of used tissues at once into a rubbish bin, and then wash your hands.

Useful links

- > SA Health: www.sahealth.sa.gov.au
 - Keeping areas clean
 - Exclusion from childcare, preschool, school and work.
- > You've Got What?:

www.sahealth.sa.gov.au/YouveGotWhat

- Hand, foot and mouth disease.
- > Wash, Wipe, Cover: www.sahealth.sa.gov.au/WashWipeCover

You've Got What? 5th Edition

Communicable Disease Control Branch

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Email: HealthCommunicableDiseases@sa.gov.au The SA Health Disclaimer for this resource is located at

www.sahealth.sa.gov.au/youvegotwhat





