

本署檔號 Our Ref.: (30) in DH SEB CD/8/22/1 II

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To Principals / Persons-in-charge,

**Updated situation of Hand, Foot and Mouth disease (HFMD)
and Enterovirus 71 (EV71) infection**

Further to the letter dated March 25, I would like to provide you with the latest information of HFMD and EV71 infection, and to urge you again to be vigilant against these diseases in your institution.

In Hong Kong, the usual peak season of HFMD occurs from May to July. An early rise in HFMD activity was recorded recently. In March this year, 29 outbreaks of HFMD/herpangina were reported in institutions, as compared with 10 outbreaks reported in each month of January and February. Besides, the sentinel surveillance system based at child care centres and kindergartens has also detected a significant increase in HFMD activity recently. So far this year, there were 9 confirmed cases of EV71 recorded and all suffered from mild symptoms only, without severe complication.

There are also recent increased activities of HFMD and EV71 infection in the neighbouring areas including the Guangdong Province and Singapore.

A series of health talks are now being arranged this month in collaboration with Education Bureau and Social Welfare Department. Representatives from schools will be invited to attend the health talks to reinforce the preventive and control measures against HFMD outbreaks and EV71 infection. Details will be announced later.



HFMD is a viral infection commonly seen in children. The infection can occur throughout the year but is more commonly found in summer months from May to July. In the past few years, a smaller winter peak of HFMD activity also occurred from October to December. The main symptoms are fever, sore throat and skin rash over the hands and feet. Although the illness is self-limiting in most cases, some cases may be caused by EV71 virus and may be associated with complications like myocarditis, encephalitis or poliomyelitis-like paralysis. No specific treatment is available for HFMD. Good hygiene practices are the most important measures to prevent HFMD and EV71 infection.

To prevent HFMD outbreak and EV71 infection in your institution, I would recommend you taking the following steps:

1. Maintain good communication with parents and help them to understand the need to keep children at home for rest when they develop fever or rash. Advise them to see doctor promptly if they develop symptoms suggestive of HFMD.
2. Encourage staff to screen for sick children before they enter the school. Children with HFMD should be excluded from schools until fever has subsided and all the vesicles have dried and crusted. (As an extra precaution, children with EV71 infection are advised not to go to school for another two weeks after all symptoms subsided, since the virus may be excreted in stool for some weeks and is associated with a higher risk of complications.)
3. Supervise children on personal hygiene practices, especially on how to wash the hands properly with liquid soap before meals and after going to toilet, cover nose and mouth while sneezing or coughing, and proper disposal of nasal and mouth discharge.
4. Keep the environment clean and hygienic, and follow the Guidelines on Prevention of Communicable Diseases in Child Care Centres, Kindergartens, and Schools which is available at http://www.chp.gov.hk/files/pdf/School_full_eng_20090115.pdf
5. Last but not least, please also incorporate in your health education to children that, when they are having holidays outside Hong Kong, they should also remember to keep their hands clean and avoid touching vesicles on hands of other sick children.

If you suspect a HFMD outbreak (e.g. two or more children in the same class develop HFMD within a period of 7 days), please inform the Central Notification Office of CHP as early as possible at Fax: 2477 2770 or Tel: 2477 2772. CHP will give advice on the management of such cases and take appropriate control measures. For more information, please visit the website of CHP at <http://www.chp.gov.hk>

We may consider to advise you to suspend classes for a period of 14 days when situation warrants. Examples of such scenarios include occurrence of further cases in an institution attended by a confirmed EV 71 case after stepping up control measures, OR occurrence of an EV71 case who is suffering from severe complication and the institution the child is attending has an associated HFMD outbreak.

Yours sincerely,



(Dr SK CHUANG)

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