



Date: 18 Oct 2023



Dear Y1 Parents,

RE: Hand, Foot and Mouth Disease (HFMD)

We have been notified by a parent that their child has “Hand, Foot and Mouth disease”. As this is a notifiable communicable disease, we are informing all parents in this year level as precaution.

We would like to remind all parents that Hand, Foot and Mouth Disease is prevalent at this time of year and request that you read the following information provided by the Department of Health, in order to prevent your child from becoming infected.

What is Hand, Foot and Mouth Disease?

Hand, Foot and Mouth Disease is a viral infection. HFMD caused by enterovirus 71 (EV71) is of particular concern as it is more likely associated with severe complications (such as viral meningitis, encephalitis and poliomyelitis-like paralysis) and even death. The usual peak season for HFMD in Hong Kong is from May to July and a smaller peak may also occur from October to December. The incubation period is usually around 3 to 7 days.

Mode of Transmission

The infection is mainly transmitted from the faeces of infected persons to the mouth of the next person but can also be **spread through droplets or direct contact with objects (such as toys) contaminated by respiratory secretions**. Direct contact with open and weeping skin vesicles may also spread the virus.

Symptoms

The disease is mostly self-limiting and resolves in 7 - 10 days. It usually begins with fever, poor appetite, tiredness and sore throat. One to two days after fever onset, painful sores may develop in the mouth. They begin as small red spots with blisters and then often become ulcers. They usually appear on the tongue, gum and inside of the cheeks. There may also be a skin rash that is non-itchy and sometimes accompanied by blisters. The rash usually appears on the palms of the hands and





soles of the feet and may also appear on the buttocks and/or genitalia. A person with HFMD may not have symptoms, or may only have rash or mouth ulcers.

Management

There is no specific drug treatment for HFMD. Stays hydrated and take adequate rest, and patients may receive symptomatic treatment to reduce fever and pain from oral ulcers.

Sick children should stay away from school or gatherings till all vesicles have dried up to avoid spreading the disease. If the infection is caused by EV71, the patient is advised to stay at home for two more weeks after recovery from the disease (i.e. fever and rash have subsided, and vesicles have dried and crusted).

Parents should monitor the child's condition closely and seek medical advice immediately if there is persistent high fever, decrease in alertness or deterioration in general condition.

Preventive Measures:-

1. Maintain good air circulation.
2. Good hands wash with soap before meals and after going to the toilet, or other stool soiled material.
3. Avoid close contact (such as kissing, hugging) with infected persons.
4. Cover the nose and mouth with tissue paper when sneezing or coughing. Dispose of soiled tissue paper into a lidded rubbish bin, then wash hands thoroughly.
5. Regularly clean and disinfect frequently touched surfaces such as furniture, toys and commonly shared items with 1:99 diluted household bleach, leave for 15 - 30 minutes, and then rinse with water and keep dry. For metallic surface, disinfect with 70% alcohol.
6. Refrain from attending class at school until their fever and rash have subsided and all the vesicles have dried and crusted.
7. Avoid going to overcrowded places or gathering when sick.
8. Use serving chopsticks and spoons at meal time. Do not share food and drinks with others.

Strict personal hygiene is of utmost importance in preventing Hand, Foot and Mouth disease.

Our school will thoroughly disinfect the concerned area.

Best regards,
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