



Hand, Foot and Mouth Disease Cases

Morbidity Week 30: July 26 – August 1, 2015

Epidemiology Bureau
Public Health Surveillance Division

Introduction

Hand, Foot and Mouth Disease (HFMD) is a common infectious disease caused by a group of enteroviruses, including *Coxsackievirus A16* (CA16) and *Enterovirus 71* (EV71). Infection with EV71 is of particular concern as it can cause severe disease in children, sometimes resulting in death.

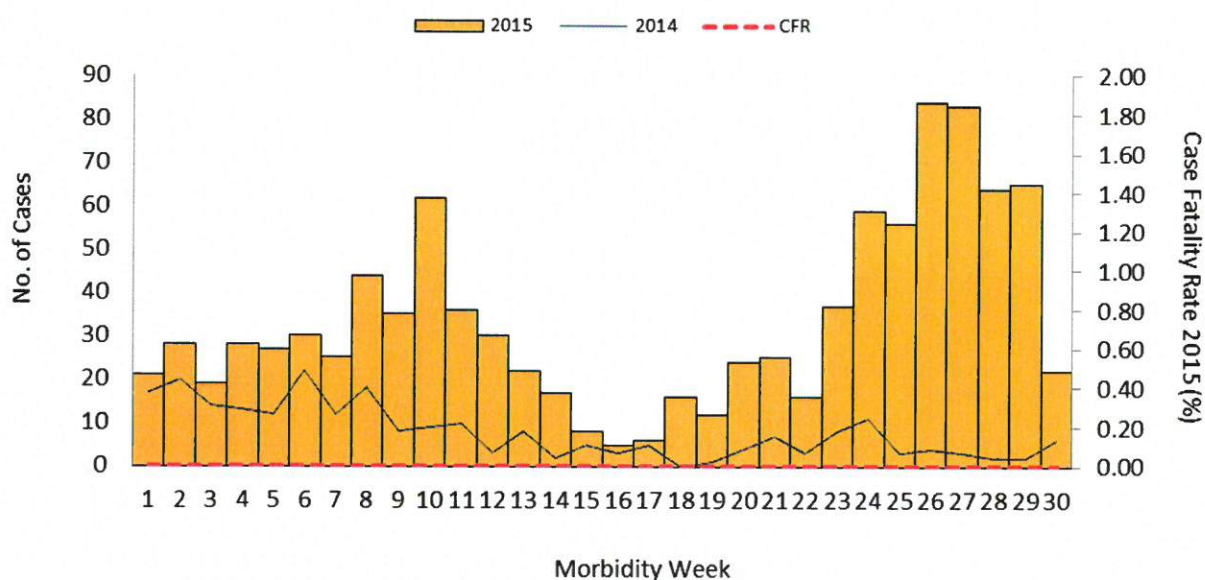
Hand, foot and mouth disease is characterized by a brief febrile illness in children and typical skin rash, with or without mouth ulcers. Typically, the rash is papulovesicular and affects the palms or soles of the feet, or both. However, cases involving the central nervous system (CNS) and/or pulmonary edema have also been observed.

HFMD is spread from person to person by direct contact with the infectious viruses that cause this disease. These viruses are found in the nose and throat secretions (such as saliva, sputum or nasal mucus). Infected persons are most contagious during the first week of the illness. Viruses that cause this disease can remain in the body for weeks after a person's symptoms have gone away.

Trend in the Philippines

A total of **1,006** suspect hand, foot and mouth disease cases were reported nationwide from January 1 to August 1, 2015. This is **328.1%** higher compared to the same time period last year (**235**).

Fig. 1 Suspect Hand, Foot and Mouth Disease Cases by Morbidity Week, Philippines, as of August 1, 2015
2015* vs 2014 (N=1,006)



*NOTE: Case counts reported here do NOT represent the final number and are subject to change after inclusion of delayed reports and review of cases.



Hand, Foot and Mouth Disease Cases

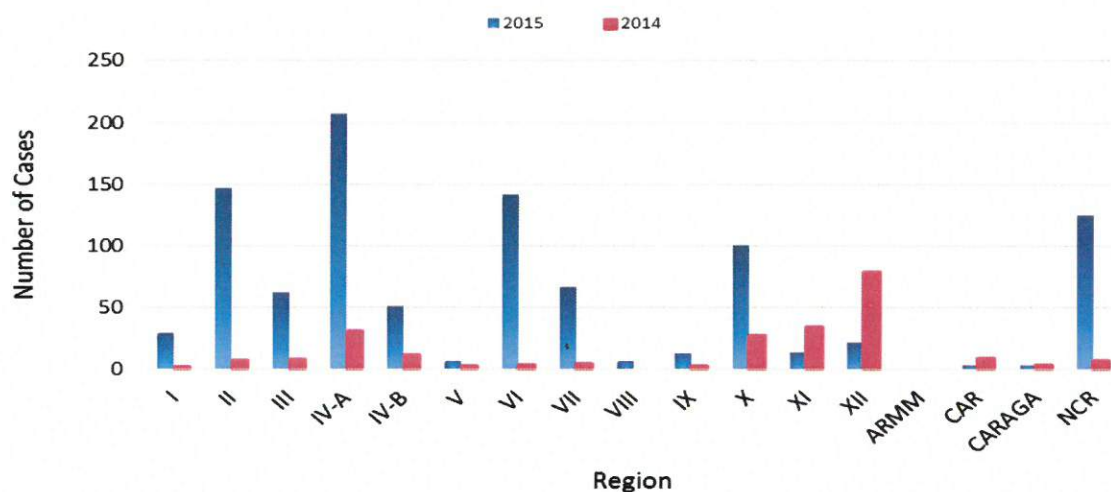
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Geographic Distribution

Most of the cases were from the following regions: **Region IV-A (20.7%), Region II (14.7%), Region VI (14.1%), NCR (12.5%)** and **Region X (10%)**.

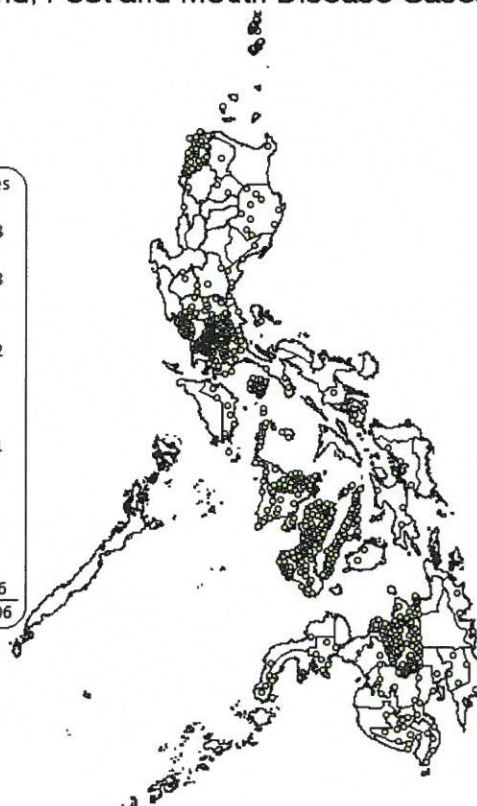
Fig. 2 Suspect Hand, Foot and Mouth Cases by Region Philippines, 2015 vs 2014*



Suspect Hand, Foot and Mouth Disease Cases as of MW30

Region	Cases
I	30
II	148
III	63
IVA	208
IVB	51
V	7
VI	142
VII	67
VIII	7
IX	13
X	101
XI	14
XII	22
ARMM	1
CAR	3
CARAGA	3
NCR	126
TOTAL	1006

Legend
1 DOT = 1 Case



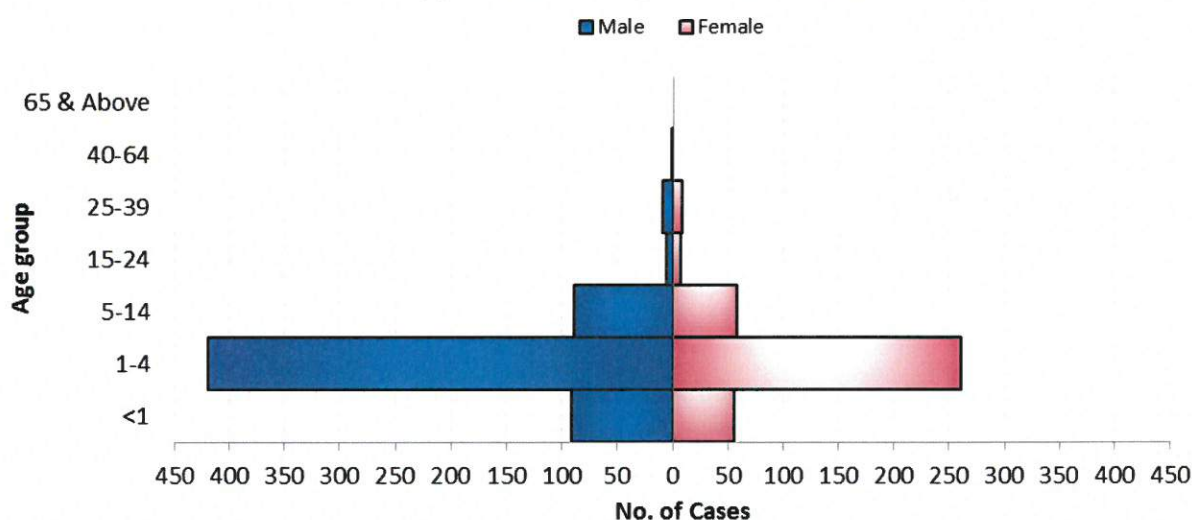
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Profile of Cases

Ages of cases ranged from less than 1month to 47 years old (median = 2 years). Majority of cases were male (61.2%). Most of the cases belonged to the 1 to 4 years age group (67.6%) (Fig. 2). There were no deaths reported.

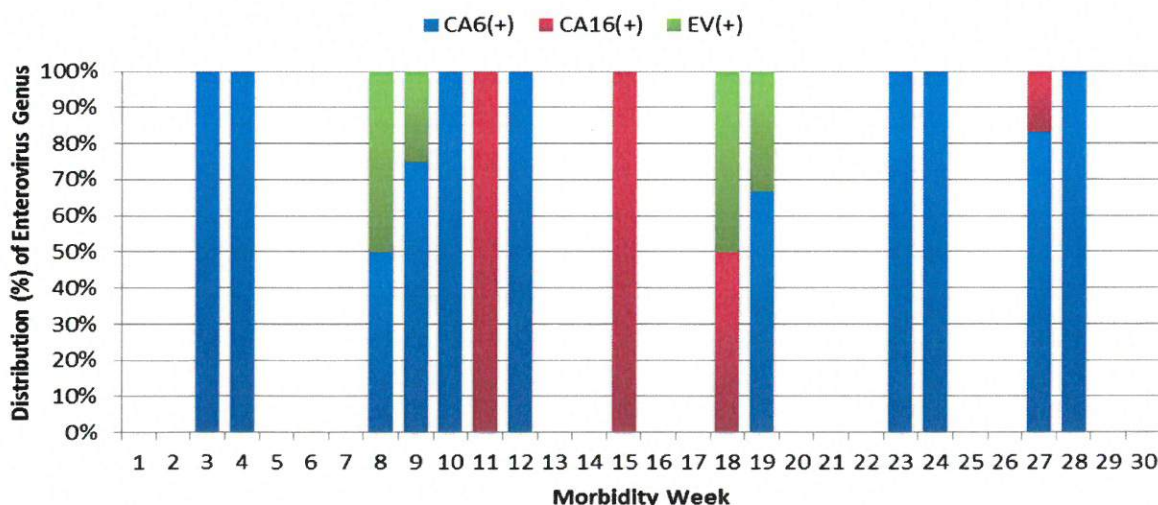
Fig. 3 Suspect Hand, Foot and Mouth Disease Cases by Agegroup and Sex
Philippines, as of August 1, 2015 (N=1,006)



HFMD Enterovirus Genus Distribution in the Philippines

Hand, foot, and mouth disease enterovirus genus data are based on the samples collected from the suspected HFMD cases in all regions of the Philippines. There were 35 laboratory confirmed HFMD cases in the Philippines. The predominant enterovirus genus during the first seven months of 2015 is *Coxsackievirus* A6 (CA6) (74.3%), *Coxsackievirus* A16 (CA16) (14.3%) and other *Enterovirus* (11.4%), mostly Region II (28.6%).

Fig. 4 Weekly Distribution of Enterovirus Genus
Philippines, as of August 1, 2015 (n=35)





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Fig. 5 Confirmed HFMD cases by Region and Enterovirus Genus
 Philippines, as of August 1, 2015 (n=35)

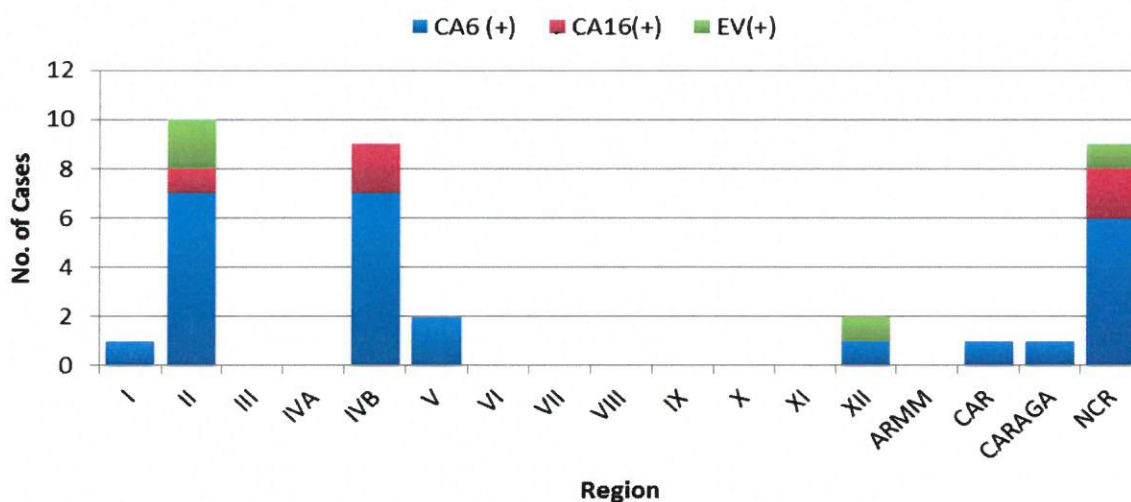


Table 1. Hand, Foot and Mouth Disease Cases & Deaths by Region
 Philippines, 2015* vs 2014

Region	Cases			Deaths			
	2015	2014	% Change	2015	CFR (%)	2014	CFR (%)
I	30	2	1400.00	0	0.00	0	0.00
II	148	7	2014.29	0	0.00	0	0.00
III	63	8	687.50	0	0.00	0	0.00
IV-A	208	31	570.97	0	0.00	0	0.00
IV-B	51	12	325.00	0	0.00	0	0.00
V	7	3	133.33	0	0.00	0	0.00
VI	142	4	3450.00	0	0.00	0	0.00
VII	67	5	1240.00	0	0.00	0	0.00
VIII	7	0	0.00	0	0.00	0	0.00
IX	13	3	333.33	0	0.00	0	0.00
X	101	27	274.07	0	0.00	0	0.00
XI	14	34	-58.82	0	0.00	0	0.00
XII	22	79	-72.15	0	0.00	0	0.00
ARMM	1	0	0.00	0	0.00	0	0.00
CAR	3	9	-66.67	0	0.00	0	0.00
CARAGA	3	4	-25.00	0	0.00	0	0.00
NCR	126	7	1700.00	0	0.00	0	0.00
Total	1006	235	328.1	0	0.00	0	0.00

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**Table 2. Weekly Hand, Foot and Mouth Disease Summary Report by Region
 Philippines, as of August 1, 2015**

Region	Morbidity Week				30th Morbidity Week		Cumulative Total 1st wk to 30th wk	
	26	27	28	29	2015	2014	2015	2014
I	3	0	0	0	0	0	30	2
II	3	1	0	2	0	0	148	7
III	8	9	6	9	0	0	63	8
IV-A	21	21	15	15	10	0	208	31
IV-B	0	3	2	7	4	0	51	12
V	2	1	1	0	0	1	7	3
VI	20	24	19	10	0	0	142	4
VII	12	12	6	5	0	0	67	5
VIII	0	0	1	2	0	0	7	0
IX	0	0	0	0	0	0	13	3
X	2	0	0	4	1	0	101	27
XI	2	0	0	1	1	3	14	34
XII	0	0	0	0	0	2	22	79
ARMM	0	0	0	0	0	0	1	0
CAR	0	1	1	0	0	0	3	9
CARAGA	0	0	0	0	0	0	3	4
NCR	11	11	13	10	6	0	126	7
Total	84	83	64	65	22	6	1006	235

Treatment

- Treatment is directly toward relief of symptoms (fever and sore throat).
- There is no specific treatment. Signs and symptoms usually clear in 7-10 days.
- A topical oral anesthesia may help relieve the pain of mouth sores.
- Over-the-counter pain medications other than aspirin, such as acetamenophin or ibuprofen, may help relieve general discomfort.

Prevention

- There is no specific way to prevent the infection. Good hygiene (e.g., proper handwashing) can decrease the risk of spreading the disease.
- Desinfect premises and all infected materials (implements, cards, clothes, etc.).




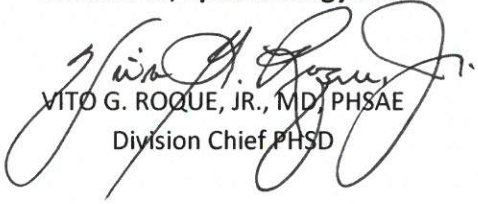
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

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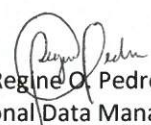

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