



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.

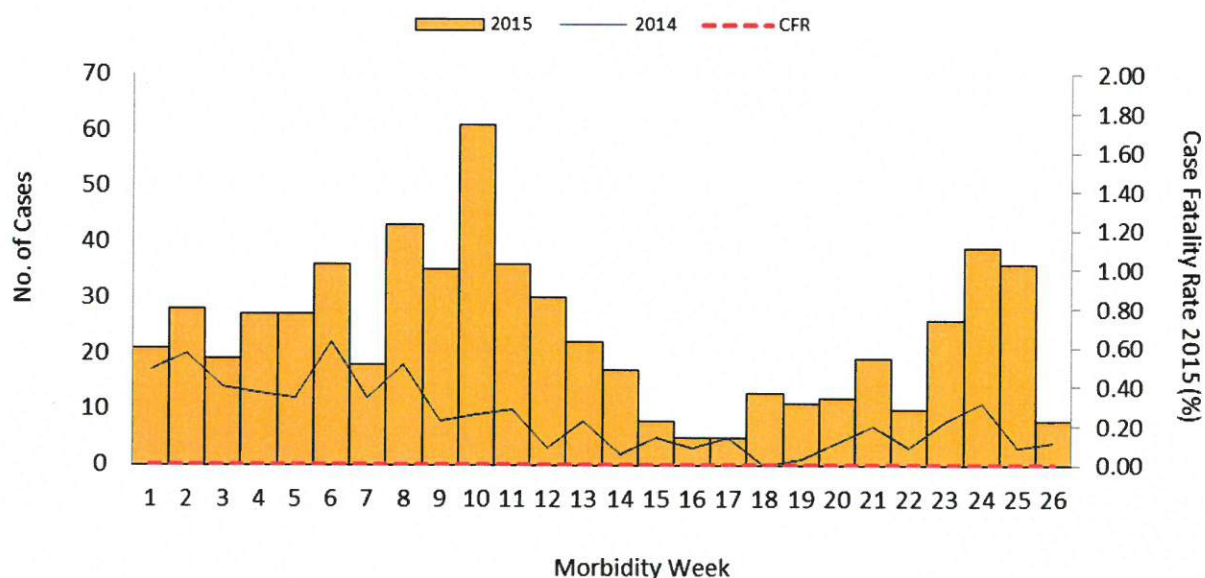
Hand, foot and mouth disease is characterized by a brief febrile illness in children and typical skin rash, with or without mouth ulcers. Typically, the rash is papulovesicular and affects the palms or soles of the feet, or both. However, cases involving the central nervous system (CNS) and/or pulmonary 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 **612** suspect hand, foot and mouth disease cases were reported nationwide from January 1 to July 4, 2015. This is **175.7%** higher compared to the same time period last year (**222**).

Fig. 1 Suspect Hand, Foot and Mouth Disease Cases by Morbidity Week,
Philippines, as of July 4, 2015
2015* vs 2014 (N=612)



*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

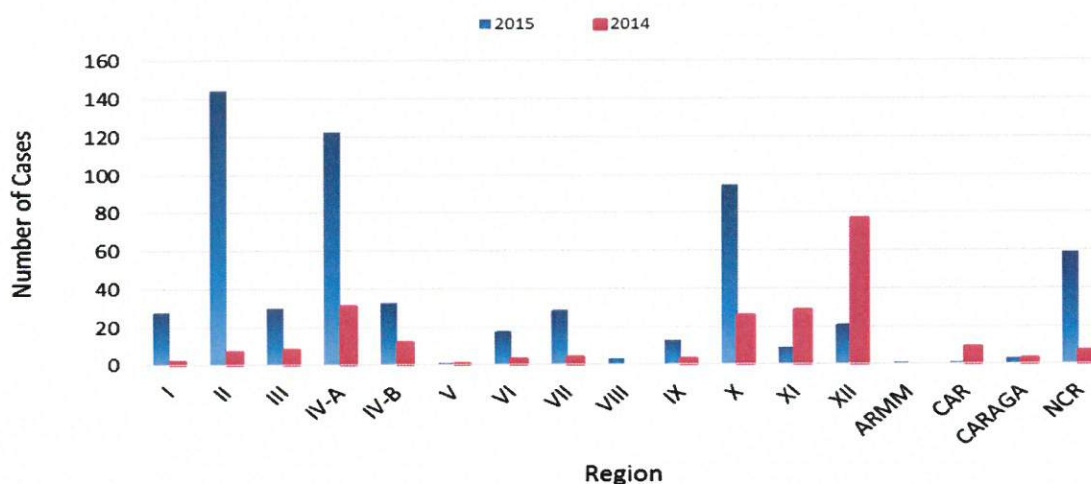
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Geographic Distribution

Most of the cases were from the following regions: **Region II** (23.7%), **Region IV-A** (20.1%), **Region X** (15.5%), **NCR** (9.6%), and **Region IVB** (5.4%).

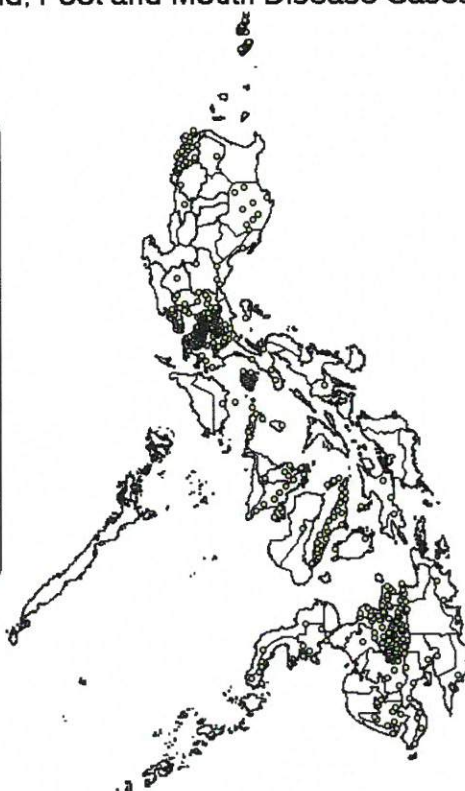
**Fig. 2 Suspect Hand, Foot and Mouth Cases by Region
Philippines, 2015 vs 2014***



Suspect Hand, Foot and Mouth Disease Cases as of MW26

Region	Cases
I	28
II	145
III	30
IVA	123
IVB	33
V	1
VI	18
VII	29
VIII	3
IX	13
X	95
XI	9
XII	21
ARMM	1
CAR	1
CARAGA	3
NCR	59
TOTAL	612

Legend
1 DOT = 1 Case



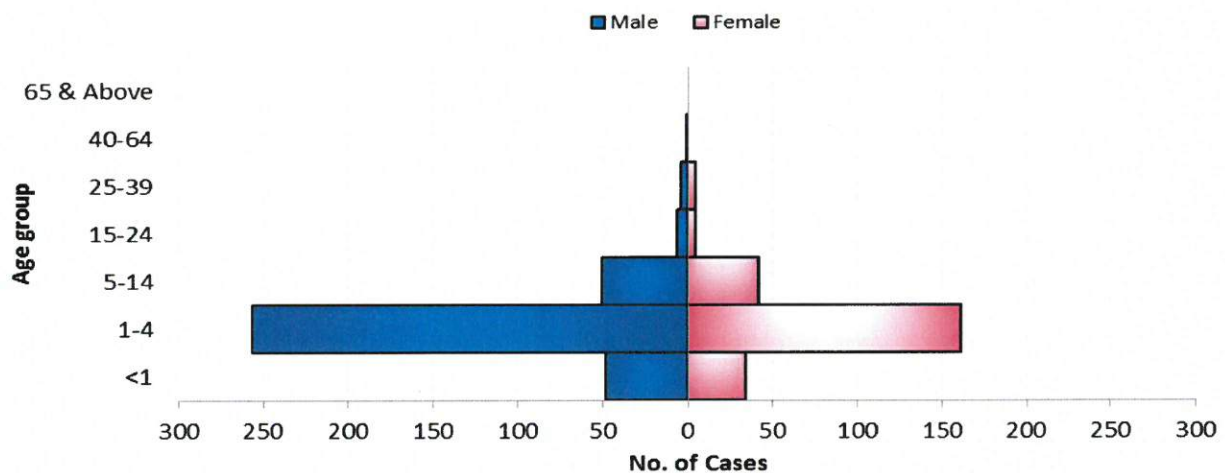
**NOTE: Case counts reported here do NOT represent the final number and are subject to change after inclusion of delayed reports and review of cases.*



Profile of Cases

Ages of cases ranged from less than 1month to 47 years old (median = 2 years). Majority of cases were male (60%). Most of the cases belonged to the 1 to 4 years age group (68%) (Fig. 2). There were no deaths reported.

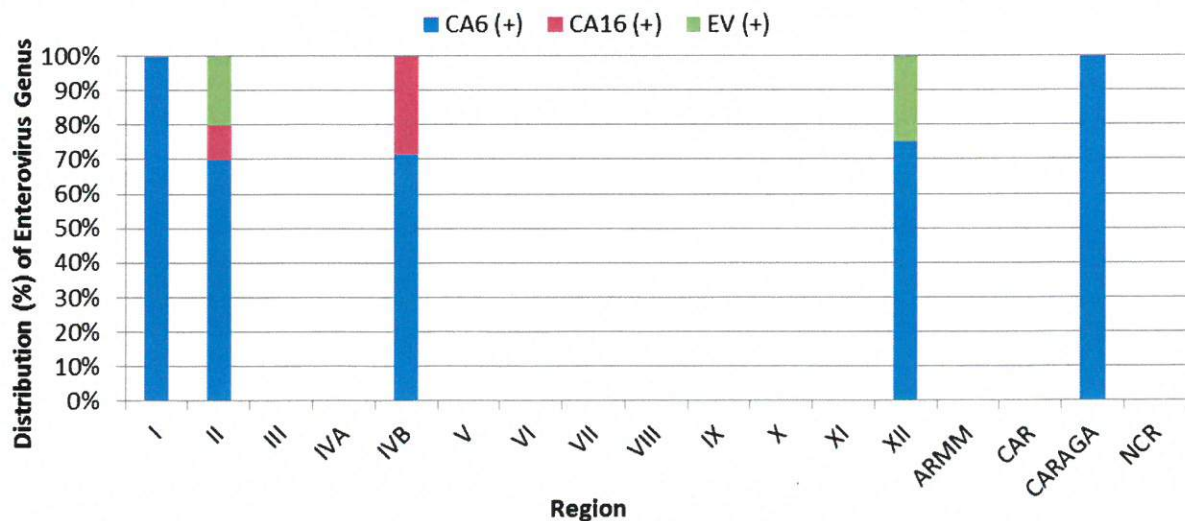
Fig. 3 Suspect Hand, Foot and Mouth Disease Cases by Agegroup and Sex Philippines, as of July 4, 2015 (N=612)



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 21 laboratory confirmed HFMD cases in the Philippines. The predominant enterovirus genus during the first five months of 2015 is Coxsackievirus A6 (CA6) (74%), Coxsackievirus A16 (CA16) (13%) and other Enterovirus (13%), mostly Region II (43.5%).

Fig. 4 Weekly Distribution of Enterovirus Genus Philippines, as of July 4, 2015 (n=21)





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Fig. 5 Confirmed HFMD cases by Region and Enterovirus Genus
 Philippines, as of July 5, 2015 (n=21)

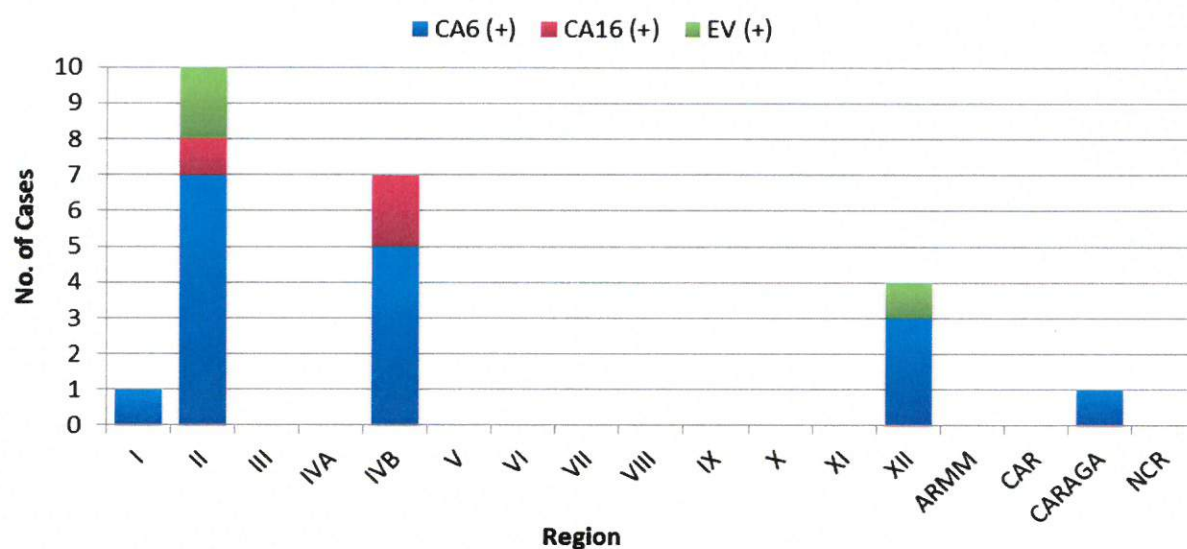


Table 1. Hand, Foot and Mouth Disease Cases & Deaths by Region
 Philippines, 2015* vs 2014

Region	Cases			Deaths			
	2015	2014	% Change	2015	CFR (%)	2014	CFR (%)
I	28	2	1300.00	0	0.00	0	0.00
II	145	7	1971.43	0	0.00	0	0.00
III	30	8	275.00	0	0.00	0	0.00
IV-A	123	31	296.77	0	0.00	0	0.00
IV-B	33	12	175.00	0	0.00	0	0.00
V	1	1	0.00	0	0.00	0	0.00
VI	18	3	500.00	0	0.00	0	0.00
VII	29	4	625.00	0	0.00	0	0.00
VIII	3	0	0.00	0	0.00	0	0.00
IX	13	3	333.33	0	0.00	0	0.00
X	95	26	265.38	0	0.00	0	0.00
XI	9	29	-68.97	0	0.00	0	0.00
XII	21	77	-72.73	0	0.00	0	0.00
ARMM	1	0	0.00	0	0.00	0	0.00
CAR	1	9	-88.89	0	0.00	0	0.00
CARAGA	3	3	0.00	0	0.00	0	0.00
NCR	59	7	742.86	0	0.00	0	0.00
Total	612	222	175.7	0	0.00	0	0.00

*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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**Table 2. Weekly Hand, Foot and Mouth Disease Summary Report by Region
 Philippines, as of July 4, 2015**

Region	Morbidity Week				26th Morbidity Week		Cumulative Total 1st wk to 26th wk	
	22	23	24	25	2015	2014	2015	2014
I	1	2	9	10	1	0	28	2
II	0	0	0	1	3	1	145	7
III	1	0	3	2	0	0	30	8
IV-A	1	8	10	9	2	1	123	31
IV-B	1	3	4	0	0	0	33	12
V	0	0	0	0	0	0	1	1
VI	0	1	0	3	0	0	18	3
VII	2	6	2	2	0	0	29	4
VIII	0	0	0	0	0	0	3	0
IX	0	0	0	0	0	0	13	3
X	1	2	2	0	1	0	95	26
XI	0	1	1	0	0	2	9	29
XII	1	0	0	2	0	0	21	77
ARMM	0	0	0	0	0	0	1	0
CAR	0	0	0	0	0	0	1	9
CARAGA	0	0	0	0	0	0	3	3
NCR	2	3	8	7	1	0	59	7
Total	10	26	39	36	8	4	612	222

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.).

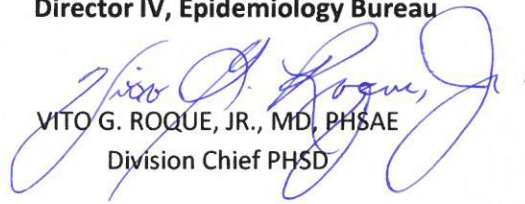



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

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