

Enterovirus 71 (EV71) Neurological Disease

Enterovirus 71 (EV71) neurological disease is a rare but serious complication of infection with enterovirus 71, a virus which most commonly causes the mild childhood illness hand, foot and mouth disease. Cases and outbreaks of enterovirus 71 neurological disease are rare. The last outbreak of EV71 neurological disease in Australia was in Perth in 1999 with 14 cases.

Signs and Symptoms:

Many people with enterovirus 71 infection have no or very mild symptoms. Hand, foot and mouth disease usually starts with a slight fever followed by blisters or ulcers in the mouth and on the hands and feet. Very rarely, people with EV71 infection go on to develop neurological disease such as meningitis (inflammation of the lining of the brain), encephalitis (inflammation of the brain itself), or paralysis. EV71 neurological disease can result in death or permanent brain damage.

Treatment:

Treatment of EV71 neurological disease usually focuses on the person's symptoms. Currently there is no specific treatment.

Transmission:

EV71 infection is transmitted from person to person by direct contact with nose and throat secretions, saliva, fluid from blisters or the faeces of infected people.

The virus may continue to be excreted in the faeces for several weeks. A person is infectious for as long as the virus is present in the faeces.

Prevention:

Good hygiene is the single most effective way of preventing the spread of EV71 infection. Hands should be washed thoroughly in soap and water for at least 20 seconds and then dried thoroughly. It is important to wash hands after going to the toilet, touching soiled linen or articles, changing nappies and before preparing or eating food. Teach children to wash their hands effectively before eating or drinking and after going to the toilet.

Control

Children with hand foot and mouth disease should be excluded from child care and schools until all blisters have healed.

Children with enterovirus 71 neurological disease should be excluded from childcare/school until they have a written medical clearance from a doctor or public health unit confirming that the virus is no longer being excreted in their faeces.

Help and assistance:

For further information please contact your local doctor, nearest [public health unit](https://www.health.qld.gov.au/system-governance/contact-us/contact/public-health-units) (<https://www.health.qld.gov.au/system-governance/contact-us/contact/public-health-units>) or the [13HEALTH](http://www.health.qld.gov.au/13health/default.asp) (<http://www.health.qld.gov.au/13health/default.asp>) information line (13 43 25 84).

Related content

[Hand foot and mouth \(/HealthConditions/2/Infections-Parasites/41/Viral-Infections/765/H-Foot-Mouth-Disease\)](/HealthConditions/2/Infections-Parasites/41/Viral-Infections/765/H-Foot-Mouth-Disease) fact sheet

References

Heymann, D., ed. 2008. Control of Communicable Diseases Manual, 19th edition. Washington, DC: American Public Health Association.

1 [Hand Hygiene Australia \(http://www.hha.org.au\)](http://www.hha.org.au) and [Draft Staying Healthy in Childcare recommend 20 seconds now \(http://www.hha.org.au/UserFiles/file/Brochures/ChildrenBrochure2011-05-09.pdf\)](http://www.hha.org.au/UserFiles/file/Brochures/ChildrenBrochure2011-05-09.pdf)

The footnote is for the consultation phase only.