Hand-Foot-Mouth disease is a common childhood febrile illness that is characterized by a vesicular eruption of the hands, feet, and buttocks, as well as oral erosions. 1-3 4 The pathogen most often identified is coxsackie virus A16, but a number of other enteroviruses have been implicated as well.1-2 4 6 Hand-foot-mouth disease is rarely reported in adults. Additionally, the illness is self-limited. Theoretically, it should not respond to acyclovir due to enterovirus thymidine kinase deficiency.1 Here we present an atypical, severe case of hemorrhagic bullous hand-foot-mouth disease in an adult with rapid response to antiviral therapy with acyclovir.

A 48-year-old male with history of insulin dependent diabetes mellitus type 2 was evaluated in the emergency department due to a three-day history of painful bullous eruptions involving the hands and feet. The patient denied recent sick contacts and toxic exposures. He also denied a history of “chicken pox” and had not received the varicella vaccination.

Vital signs were notable for a temperature of 100.5°Fahrenheit. Physical exam revealed edema of the hands and feet bilaterally, as well as large hemorrhagic bullae on the ulnar aspects of the hands and plantar surfaces of the feet. Discrete clear vesicles were noted on the dorsal aspect of the hands, forearms, and upper arms, as well as erythematous patches with scale and vesicles on the cheeks and lateral eyebrows. (Figure 1a, 1b, 1c, 1d) The conjunctivae, nasal, and oropharyngeal mucosa were uninvolved on physical exam, but the patient did report pharyngeal ulceration and pain prior to evaluation.

Early in his hospitalization, the patient was started on IV acyclovir due to concern for primary varicella infection. He showed remarkable improvement with this treatment. He received 7 days of intravenous acyclovir, followed by a 7 day course of oral acyclovir at a dose of 200mg three times daily. The patient was discharged in good condition with a diagnosis of adult atypical cutaneous Hand, Foot and Mouth disease.

DISCUSSION

Hand, Foot and Mouth disease (HFMD) is a highly contagious viral illness that occurs most often in children under 5 during the spring and summer months. Coxsackie A16 and Enterovirus 71 are the most commonly identified causative pathogens. 4 Children classically present with a vesicular, bullous, or erosive eruption of the hands, feet, and buttocks. Oral vesicles and erosions are often seen, and onychomadesis may occur up to two months after resolution. Treatment in children is usually supportive, and spontaneous resolution occurs in 7-14 days. 4 6

REFERENCES