

Potent form of common child illness deadly in Asia

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Tran Nam Trung adjusts a tube of the respirator attached to his son Tran Minh Giang who has been hospitalized for the past seven months at the National Hospital of Pediatrics in Hanoi, Vietnam on Thursday, July 12, 2012. The 20-month-old boy fell victim to a particularly menacing form of hand, foot and mouth disease that has killed hundreds of young children across Asia recently. (AP Photo/Tran Van Minh)

(AP) — Tran Minh Giang has spent more than a third of his young life in a Vietnamese hospital, and it could be many months more before he can go home. All for a disease that in Asia is as common as chicken pox, and usually about as severe.

The 20-month-old boy was sickened by a particularly menacing form of hand, foot and mouth disease that has killed hundreds of young children across the region. They sometimes suffer high fever, brain swelling,



paralysis and respiratory shutdown, even though they may have been infected by people with few or no symptoms.

When the strain hit Cambodia recently, doctors there had no idea what it was, and even now experts don't fully understand why it can be so devastating. Seven months after becoming sick, Giang still breathes using a ventilator connected to a hole in his tiny throat.

"It may take time, maybe years, before he can recover. When he sleeps, his lungs don't work," his father, Tran Nam Trung, said Thursday while fanning the toddler. "When he first got a high fever, I didn't think that he would be in a situation like this."

The enterovirus 71 strain, or EV-71, raised fears earlier this week when it was detected in some lab samples taken after 52 of 59 Cambodian children died suddenly from a mystery illness that sparked international alarm. The World Health Organization said via Twitter on Thursday that its investigation has found most cases were caused by the disease.

An expert at the U.N. health agency earlier said it's the first time EV-71 had been identified in the country, but it's a well-known pathogen elsewhere in Asia. In the first half of this year alone, 356 people in China and 33 in Vietnam have died from it.

The scale of the disease was clear last week on the crowded ground floor of a hospital in China's hard-hit central Hunan province. Dozens of crying children were packed into two small rooms, sitting or lying on chairs with IV drips hooked to them. Hunan reported 33 hand, foot and mouth disease deaths in May, a quarter of the country's total that month.

The disease has exploded across the region since 1997, when the first major outbreak was reported in Malaysia. Since then, Japan, South Korea, Singapore, Mongolia, Taiwan and Australia have all wrangled



with it.



Cambodian villagers line up to wait for a medical check-up for children outside Kuntha Bopha children's hospital in Phnom Penh, Cambodia, Wednesday, July 11, 2012. The enterovirus 71 strain, or EV-71, raised fears earlier this week after it was detected in some lab samples taken after 52 of 59 Cambodian children died suddenly from a mystery illness that sparked international alarm. Health officials are still investigating, but say the virus is likely to blame. (AP Photo/Heng Sinith)

EV-71 is one of a group of viruses that cause the disease, but it has become a more dominant strain over the past decade in Asia. Still, only a small percentage of children infected experience severe symptoms, and experts aren't exactly sure why. There is no vaccine or specific treatment to cure it, but severe cases are given supportive care and blood proteins are also sometimes administered intraveneously.

"There's a buildup of that susceptible population, like many viruses, and this happens to be the children who have not been exposed to different types of enteroviruses before," said Dr. Zarifah Hussain Reed, co-author of a WHO report on hand, foot and mouth disease and medical director at a Malaysia-based biotech company researching a vaccine for it. "Then



this buildup somehow explodes in a way that suddenly you get severe cases of EV-71."

She said it's unclear why it remains largely confined to certain parts of Asia — India and Indonesia, for instance, have not reported large outbreaks — and it's not understood if EV-71 is more infectious or perhaps just better at invading the neurological system than other strains.

The disease is in the same family as polio and gets its name from the telltale symptoms it causes, including rash, mouth sores and blisters covering the hands and feet. It mainly affects children younger than 5, and is difficult to control because it spreads easily through sneezing, coughing and contact with fluid from sores or infected feces.

In daycare centers and schools, it's nearly impossible to keep little blistered hands from coming into contact with other children and everything they touch. Another problem is that many infected kids never get sick, but they can still transmit the virus to others. Frequent handwashing and disinfection of toys and surfaces are advised, and sometimes schools are forced to close to help halt the spread.

The first EV-71 infection with neurological symptoms was reported in California in 1969. Outbreaks have since occurred periodically in the U.S. and Europe, but the disease has been a stubborn menace in Asia, typically occurring in cycles. Some experts have warned that if the virus isn't controlled, it can jump borders and threaten other regions as well. In fact, some wonder if the recent Cambodia cases could have spread from Vietnam, where about 63,000 cases have been reported so far this year.

Dr. Pham Nhat An, vice director of the National Hospital of Pediatrics in Hanoi, says he has dealt with the disease for three decades. But it didn't start killing until two years ago, when the number of hospitalized cases started to spike.



"It's worrying," he said in his office. "We need to think about a vaccine. It will help, especially for the EV-71."

In a unit on the other side of the building, the dedicated father, Trung, sits on the edge of a bed fanning little Giang, who probably caught the disease from a mildly ill cousin who was staying with them at the time.

Giang was just 13 months old when he began burning hot with fever. He didn't seem overly sick and continued to play, so his parents believed it was a bug that would quickly pass. By morning, the baby was purple and convulsing. His lungs were shutting down.

Now the chubby boy can sit, and he occasionally musters a quick smile. But he remains lethargic, with tubes running out of his nose and throat. Trung had to quit his job to help his wife care for the child 24 hours a day in the hospital, which is common in many parts of Asia where nursing staff is thin.

"This is a very serious disease, and it can result in very serious health consequences," Trung said. "People need to be very cautious and they need to strengthen surveillance to try to prevent the disease."

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