UPDATE ON FIV: WHAT EVERY SHELTER NEEDS TO KNOW

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Presentation Outline

· What we know about FIV

- · Epidemiology Prevalence and risk factors
- Transmission
- Diagnosis
- Clinical signs
- Vaccination
- Antiviral treatment
- What we need more evidence about for cats naturally infected with FIV
 - Markers of disease progression
 - · Optimal management For shelters and adopters
 - Prognosis
- What we are learning from the Maddie's Purdue FIV Study



WHAT WE KNOW ABOUT FIV



EPIDEMIOLOGY Prevalence and risk factors



Hi I'm Charlie: I don't have FIV but I'm enrolled in the Maddie's Purdue FIV Study because I'm a match for JoJo



Prevalence and risk factors

· Worldwide

- Prevalence varies 1-14% in healthy cats; higher in sick cats, but exact % depends on study design
- $^\circ$ USA, 2004 345 veterinary clinics (3.1% of 9970 cats) and 145 animal shelters (1.7% of 8068 cats)^1
- Canada 4.3% of 11,144 cats tested in 2007²

Major risk factors

- Age Adult
- Gender Male (MN 4.3%, MI 3.3%) and intact status¹
- Lifestyle
 - Free-roaming/outdoor access
- Shelter Relinquished 1.4%, Stray 1.6%, Feral3.9%¹
- Health status Current illness (6.1%)¹
 - 1. Levy et al., J Am Vet Med Assoc 2006;228:371–376 2. Little et al., Can Vet J 2009; 50:644-648



PLOS one







Modes of FIV transmission¹

Most common

Bite wounds

- · Also documented but much less common
 - · Infected mother to kittens during pregnancy, birth or lactation
- Blood donation from infected cat
- Only demonstrated under laboratory conditions
 - Mucosal transmission via oral, rectal or vaginal mucosa
 - Mucosal infection requires up to 10,000x more virus than other routes
- Fomite transmission not important
 - · FIV loses infectivity outside the host
 - Susceptible to all disinfectants

· Strain differences can be important



1. Burkhard and Dean, Curr HIV Res 2003;1:15-29.

Published studies of closed 'mixed' populations

FIV-positive (n)	FIV-negative in-contact (n)	In-contact cats infected (n)	Laboratory/ Home	Observation period
18	14	0	Laboratory	4-14 months
16	31	0	Home	Median 2 years ²
5	68	0	Home	3.5 years ³
NR	20	1 10/19 FIV PCR+	Laboratory	2-4 years ⁴
9	17	6	Home	10 years ⁵
1. Yamamot 2. Shelton e 3. Shelton e 4. Dandekar 5. Addie et	o et al., AJVR 1988;49:1 t al., 1989;25:7-12. t al., J Ac Imm Def Syn et al., J Virol 1992;66:4 Vet Pace 2000:146:41	246-1258. 1990;3:623-630. 040-4049. 9-424		

Maddie's Purdue FIV Transmission Study

Aim

 To document the FIV serological status of cats living longterm in a stable multi-cat household containing FIVpositive and FIV-negative cats

Hypothesis

 That viral transmission would not occur from FIV-positive to FIV-negative cats





FIV Transmission Study - Protocol

Cats

- Stable multi-cat household of 138 cats with unrestricted access to one another
- another
- All cats indoor only except for 1 FIV-positive indoor/outdoor cat
 - 1 FIV-positive indoor/outdoor cat
 1 FIV-negative cat that escaped for a 12-month period, then returned

Testing

- FIV SNAP Test 1 All cats FIV ELISA tested on intake¹
- 8 FIV-positive 6MN 2FS; Median age 28 months (Range 5mths-10 years)
- 130 FIV-negative 71MN 59FS; Median age 4 months (Range 2mths-12 years)
 All cats FeLV-negative
- FIV SNAP Test 2
 - ELISA testing repeated in 5 FIV-positive and 45 FIV-negative cats (SNAP Test 1 results)
- FIV SNAP Test 2 performed median 28 months after Test 1 (Range 1-106 months)



1 - IDEXX FIV SNAP Combo; 2 - IDEXX FIV PCR.

Results of FIV SNAP Test 2

FIV ELISA test results in all 50 cats were unchanged from the FIV SNAP Test 1 results

- 5 FIV-positive cats and 45 FIV-negative cats
- FeLV ELISA test results from SNAP Test 2 -
- One cat was FeLV-positive FIV-negative
- A further 5 of the 50 cats were tested a 3rd time
- Results were the same as at FIV SNAP Test 2 1 FIVpositive cats and 4 FIV-negative cats
- The 3rd FIV SNAP test was performed median 3 months after FIV SNAP Test 2 (Range 1-45 months)
- All 5 cats were FeLV-negative





Cumulative exposure to FIV

- Cumulative exposure to FIV-positive cats (n=8) calculated for each FIV-negative cat with ≥2 FIV ELISA test results (n=45)
- · Date calculations performed using XL -
 - Entry date to last negative test date for all FIV-negative cats
 - Number of days exposure to each FIV-positive cat calculated individually by comparing residence dates
- Median cumulative exposure duration of each FIVnegative cat to FIV-positive cats = 11.98 years (3.9-13.7 years)





FIV Transmission Study – Conclusions

- Mutual grooming, mild aggression, shared food bowls, litter boxes etc. did not transmit FIV over many years of cumulative exposure in a mixed group of FIV-negative and FIV-positive cats kept in a stable multi-cat household
- Viral load and phenotype could be important in risk of transmission
- Feline behavior, virology, immunology underpin recommendations for 'mixed' housing







Clinical signs

- Clinical signs might take years to develop, if at all
 - · 41/89 FIV-positive cats enrolled in the Maddie's Purdue FIV Study had no clinical signs at enrollment
 - · Asymptomatic period can last for years and clinical signs are generally seen in older cats
- Chronic inflammation
 - Oral cavity
 - Skin
- Secondary infections
- · Viral, bacterial, fungal, protozoal
- Neoplasia Lymphoma
- Signs of neurological or renal disease
- Slow, progressive weight loss







IDEXX FIV RealPCR[™] test

- Can potentially distinguish cats that are vaccinated but FIVuninfected from FIV-infected cats
- Relies on adequate amounts of certain amino acid sequences from field strains of FIV being 'recognized' by the test
- Maddie's Purdue FIV Study found that both the sensitivity and specificity of this test was approximately 94%
- Strain information is also provided

Virus isolation –

- Performed at reference laboratories
- · 'Reference standard' method that takes at least 28 days to perform





Diagnosis – Which cats to test

- Sick cats
- · Cats and kittens that will be group housed
- Cats and kittens at adoption, and a minimum of 60 days later if negative
- Cats with recent exposure to FIV-positive cat or cat of unknown FIV status, especially if there is a bite wound, and a minimum of 60 days later if negative
- · Cats living with FIV-infected cats should be tested annually
- High risk cats Outdoor, free-roaming cats, cats with bite wounds
- Before considering vaccination against FIV
- Blood donor cats



TREATMENTS FOR FIV



Targeting the immune system Interferon therapy

Recombinant feline interferon¹

- Not available in US naturally infected FIV-positive cats A
- 7 naturally infected FIV-positive cats; 3 healthy, 4 unhealthy
- 5 untreated FIV-positive cats as controls; 8-week treatment period
- · Healthy/mildly unhealthy cats remained stable (4 cats)
- · Unhealthy cats had improved clinical scores (3 cats)

Oral human interferon – low-dose oral treatment²

- 30 naturally infected unhealthy FIV-positive cats; 24 treated, 6 placebo
- · Total 14 months treatment
- · Clinical improvement in the first 2 months
- Treated cats had significantly longer survival than placebo
- · No change in CD4:CD8 or other hematological parameters
- Doménech et al., Vet Immunol Immunopathol 2011;143:301-306
 Pedretti et al., Vet Immunol Immunopathol 2006;109:245-254





Targeting the virus – Anti-viral therapy

• PMEA and Zidovudine (AZT) - Work on Step 3

· Zidovudine (AZT)¹

- Placebo-controlled study showed stomatitis and CD4:CD8 improved ; 3 weeks treatment used
- Can cause dose-dependent anemia; anemia often resolves in the first 3 weeks of treatment
- AZT-resistant strains of FIV can arise
- Not suitable for cats with signs of bone marrow suppression

• PMEA¹

- Associated with clinical improvement in one placebo-controlled study; 3 weeks treatment used
- · Caused more severe anemia than AZT-treated cats



1. Hartmann et al., Vet Immunol Immunopathol 1992;35:167-175











1. Richards et al., JAVMA 2006;229:1405-1441.

FIV Vaccination in Shelters?

FIV vaccination is not recommended for use in shelters or free-roaming \mbox{cats}^1

- Resources are better used elsewhere, such as spay/neuter/rabies vaccination programs
- FIV vaccination requires at least 3 doses to be effective and protection is strain-dependent
- Reduced aggression in spayed/neutered cats makes FIV transmission less likely
- Free-roaming cats are more likely to be presented as strays at veterinary hospitals and shelters where it might be assumed that they are FIV-infected



1. Levy et al., JFMS 2008;10:300–316

WHAT WE NEED MORE EVIDENCE ABOUT FOR CATS NATURALLY INFECTED WITH FIV





Factors associated with disease progression

· Clinical staging not well characterized or widely adopted

· Changes in the immune response

- CD4 T-lymphocyte count and CD4:CD8 decline in terminal stages
- $\,\cdot\,$ Decreased IL-2 and increased TNF- $\!\alpha$

· Changes in viral proteins¹

- Errors occur during viral replication, resulting in 'evolution' of the virus over time
- 'Natural selection' of viral variants that resist the host immune response and lead to progression of disease

Viral load²

- Study of 33 naturally infected cats divided into High and Low viral load groups at enrollment
- Survival of High viral load group was significantly reduced over the next
 4 years and the viral loads increased just prior to death



1. Kraase et al., Vet Immunol Immunopathol 2010; 134:96-106 2. Goto et al., 2002 J Virol;76:10079













Shelter considerations - Testing

- · Test all cats before adoption, or before group housing
 - Repeat testing 60 days after initial test and annually for cats kept in long-term group housing
 - Test cats individually; testing representatives of a group or pooled specimens is unreliable
- TNVR Programs
- Testing optional
- · Educate prospective adopters/foster parents
 - Advise them to test a newly acquired cat and resident cats prior to co-housing if testing has not already been performed; follow up testing should be performed after 60 days





Shelter considerations - Management

- Spay/neuter all shelter cats, including FIV-positive cats
 Display FIV status
 - On the cage/room where FIV-positive cats are housed
 - On paperwork for FIV-positive cats
- House FIV-positive cats away from kittens or sick cats
 To protect the FIV-positive cat as their immune response might be inadequate
- Educate prospective adopters/foster parents
- House FIV-positive cats indoor-only
- Monitor FIV-positive cats carefully for clinical signs of disease, especially if there are multiple FIV-positive cats in the same household
- · Provide regular 6-monthly wellness checks with their veterinarian
- Consider anti-viral therapy if FIV-related disease progresses
 Explain the possible risks of transmission to FIV-negative cats in the same household
- There is no evidence that FIV can infect humans



WHAT WE ARE LEARNING FROM THE MADDIE'S PURDUE FIV STUDY



Hí I'm Fíona. I have FIV and I'm enrolled in the Maddie's Purdue FIV Study.



The Purdue FIV Study 'A Tale of Two Cities'



Study Protocol

- Five-year controlled study of naturally-infected FIV-positive cats, starting January 1 2010
- Data collection every 6 months for FIV-infected cats and every 12 months for age- and sex-matched FIV-negative control cats
- Clinical history, general physical exam, gingival score, serum biochemistry, CBC, CD4/CD8, UA
- Cat owners receive reports to discuss with their regular DVM
- Virology data provided by University of Glasgow Retrovirus Research Laboratory and IDEXX West Sacramento
- Necropsies performed by one pathologist at Purdue
- Memphis FIV-positive cats weighed monthly
- Three-monthly email/phone check-in with all cat owners

Study Enrollments

- Two-year enrollment period January 2010-January 2012
- All cats classified as 'Healthy' or 'Not healthy' at the time of enrollment
- Healthy = No abnormalities found on a physical examination by AL
- Not healthy = One or more abnormalities found on a physical examination by AL
- · All Control cats must be 'Healthy'
- · FIV-positive cats can be 'Healthy' or 'Not healthy'





multi-cat household



FIV-Positive Cats - Chicago and Memphis Comparisons

	Chicago (n=38)	Memphis (n=51)	P value
Age at enrollment	Median 4 years (1.5-11)	Median 5 5 years (2-10)	0.02
No. enrolled in Healthy group	55% (21/38)	39% (20/51)	
No. enrolled in Not Healthy Group	45% (17/38)	61% (31/51)	Not significant
Time from first FIV diagnosis to enrollment	Median 6 months (1 month-5 years)	Median 2 years (1 month-8 years)	<0.0001
Length of time enrolled	Median 1.9 years (1.3-2.9 years)	Median 3.2 years (1.2-3.2 years)	<0.0001
Housed with >5 cats	10/38	51/51	0.01

A STATE

FIV-positive cats enrolled in Memphis are older; have been known to be FIV-positive longer; have been enrolled in the study longer; and are housed differently to FIV-positive cats from Chicago.



More results ...

Lymphoma -

- Of the 38 FIV-positive cats that have died so far, 13 (34.2%) have had lymphoma identified at necropsy
- 9/13 were from the Not Healthy group and 4/13 were from the Healthy group
- Lymphoma was always found in the bone marrow; often in other sites also

Weight loss -

- · Weight loss usually precedes FIV-related death
- · Often >10%/month for at least 3 months

Viral transmission

- Three cats originally enrolled in the FIV-negative group have become FIV-positive
- All 3 had significant bite wounds and required hospitalization
 Two were from large multi-cat households with mixed populations
- No.
- One was a territorial outdoor cat



Clinical and laboratory results ...

FIV subtypes

- FIV subtypes A, B, D and F have been identified
- No associations have been made so far between subtype and health status

Physical exam findings

 Stomatitis, faucitis, bowel thickening on palpation, allergic skin disease and non-inflammatory alopecia are common in the FIV-positive cats

Lab results

 CD4 T-lymphocyte count and CD4:CD8 are lower in FIV-positive cats at enrollment and over the study period so far





Shelter medicine research solving practical problems

- Which factors provide early information about naturally infected cats to predict outcomes so we can advise potential adopters or foster parents?
- Are there particular co-morbidities that are important and/or common in FIV-infected cats?
- Are changes to the immune response and viral loads the cause and/or the result of clinical progression?
- What are the optimal management plans for FIV-infected cats in shelters and adoptive homes?



Acknowledgements

- Maddie's Fund
- Kristen Hall, Dr. Jamieson Nichols, Dr. John Christian, Becky Bierman, Purdue University College of Veterinary Medicine
- Amber Freiwald
- Fitzhugh B. Crews FIV Cat Sanctuary
- PAWS Chicago
- Tree House Humane Society, Chicago
- IDEXX Laboratories
- University of Glasgow Retrovirus Research Laboratory
- Drennan Animal Hospital, Cordova TN
- Animal Medical Clinic, Jasper GA
- Parkway Village Companion Animal Hospital, Memphis TN
- Maddie's Purdue FIV Study cats and their owners



Standing on the shoulders of giants ...







Dr. Jules Beatty

ord Dr. warga

Dr. Julie Levy



Useful resources

- 2008 American Association of Feline Practitioners' feline retrovirus management guidelines
 - Available for free download at http://jfm.sagepub.com/content/10/3/300.full.pdf+html
- Feline immunodeficiency. ABCD guidelines on prevention and management
 - Use link on right of page at –
 - http://www.sheltermedicine.com/node/42



