

Fast + Simple
Focused on Veterinary Diagnostics

FASTest® FIP ad us. vet.

From FCoV to FIPV – a virus mutation with fatal consequences

Fast test for the qualitative detection of antibodies against the Feline Coronavirus (FCoV/FIPV) in whole blood, plasma, serum or effusion of the cat

Important diagnostic tool for diagnosis of feline coronavirus /FIP

Routine test before FIP vaccination and at the annual check-up

Identification of asymptomatic chronic FCoV carriers (new additions/cat breedings)

Reorganisation of cat breedings, animal shelters



- Simple test procedure with whole blood, plasma, serum or effusion
- Fast test interpretation after 15 minutes
- Reliable clinical diagnostics
- Sensitivity 84.6% & Specificity 100%
- Storage at room temperature (15–25 °C)
- Long shelf life
- Compact test box with 2, 10 or 25 tests

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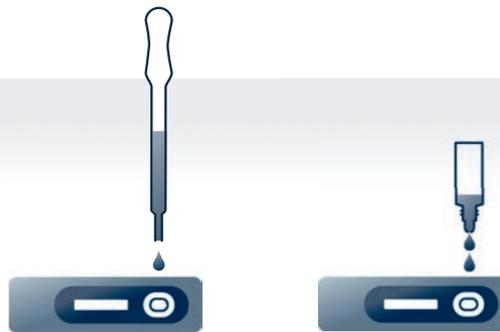
Feline infectious peritonitis (FIP) is a world-wide spread chronic progressive virus infection, often with a fatal end.

To latest studies, FIP is not an infection transmitted from cat to cat. FIP occurs sporadic in domestic cats and wildcats infected oronasally with the apathogenic Feline Coronavirus (FCoV). Due to stress the apathogenic FCoV mutates into the pathogenic FIP Virus. FCoV antibody prevalences vary depending to the way of housing: in cat breedings with multiple cat households from 50% up to 80%, in private households only 15%.

Clinically, FIP varies due to progression and manifestation in organs. Usually there is a smooth transition between the FIP forms, so FIP can be more "wet" or more "effusive". Therefore, all cats showing unclear symptoms like recurrent fever resistant of antibiotic therapy, unclear organ alterations, chronic weight loss, pleural and/or peritoneal effusion should be considered as suspicious for FIP.

Due to the fact that actually no test method exists which can differentiate between FIP virus and FCoV, FCoV antibody detection is a very important diagnostic tool. Healthy cats with a negative antibody test are most likely neither carriers nor eliminators of FCoV. Therefore, **FASTest® FIP**, based on highly specific and recombinant FCoV antigens, is an optimal screening test for the reliable detection of FCoV antibodies in whole blood, plasma, serum and effusion of the cat.

Test procedure



Test interpretation



POSITIVE



NEGATIVE



In cats with effusion symptoms, the effusion should be principally aspirated and tested by means of **RIVALTA FIP-VETube**.

Cats with FIP also have markedly elevated levels of acute-phase proteins such as alpha-1-acid glycoprotein (AGP), serum amyloid A (SAA), or haptoglobin in the blood or effusion. Therefore, if FIP is suspected, an additional **FASTest® SAA** is recommended. However, a positive **FASTest® SAA** is not pathognomonic for the presence of FIP!

High to very high antibody titres are known to be helpful diagnosing FIP. Therefore, a positive **FASTest® FIP** should be confirmed using a quantitative antibody test method (e. g., **MegaFLUO® FCoV**) in a laboratory to determine the FCoV end titre.

Due to the correlation of FCoV antibody titre in blood and the FCoV antigen concentration in feces, the **FASTest® FIP** should be supplemented by the **FASTest® FCoV Strip** (antigen test in feces).

Distribution:

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