

Adopting Out Cats with FeLV

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INFECTIOUS DISEASE | APRIL/MAY 2021

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In the Literature

Lockhart HL, Levy JK, Amirian ES, Hamman NT, Frenden MK. Outcome of cats referred to a specialized adoption program for feline leukemia virus-positive cats. *J Feline Med Surg*. 2020;22(12):1160-1167.

FROM THE PAGE...

FeLV has historically been considered a devastating infectious disease, but little is known about the long-term outcome for cats living with FeLV. Exploring the consequences of this retrovirus infection could help improve management.

This retrospective study focused on the outcomes of cats with suspected FeLV infection referred to a specialized FeLV adoption program. A total of 801 cats with an initial positive FeLV test result were referred to the program. FeLV infection could not be confirmed in 18.6% of cats when they were rescreened during admission. Most (78.8%) of the FeLV-positive cats were adopted; however, 16.7% died or were euthanized. The most common cause of death was presumed to be FIP (61.5%), but this was not

confirmed via antemortem testing or necropsy. Although the most common comorbidity of FeLV-positive cats was upper respiratory infection, the infection rate was not significantly different as compared with the rate in FeLV-negative cats.

...TO YOUR PATIENTS

Key pearls to put into practice:

- 1** A single positive FeLV test result is not adequate for diagnosis. FeLV infection could not be subsequently confirmed on a retest in almost 19% of cats after 2 positive point-of-care ELISA tests were performed separately on whole blood and serum samples. Retesting 16 weeks after an initial test should be considered because the status can transition with abortive or regressive infection. Confirmatory modalities (eg, immunofluorescent antibody or PCR testing) can be used if available.
- 2** Clinicians should prepare for and proactively manage infections in FeLV-infected cats. These immunocompromised cats are susceptible to infection (especially upper respiratory infection) but have the potential to recover and become immunocompetent. Efforts should be made to prevent secondary infection by minimizing contact with unknown cats, performing twice-yearly examinations, and maintaining an up-to-date vaccination status.
- 3** FeLV-positive cats do not necessarily need to be euthanized, as 57.8% of confirmed FeLV-positive cats in the study were healthy on admission, and most (83.3%) were still alive at the end of the study. These cats can be adopted with proper pet owner education and counseling.
- 4** This study demonstrated there is a high demand for lifesaving options for FeLV-positive cats. Through its FeLV adoption program, the shelter in this study dedicated a significant amount of time, education, and resources to cats with this disease. Proper community leadership—guided by research—along with sound clinical decision making are essential to the success of these adoption programs. Outcomes may have been different in a setting in which overpopulation and lack of resources are significant concerns, as priorities are often limited to healthy, adoptable cats. Shelters and feline caretakers should be aware that organizations devoted to FeLV-positive cats exist and could be helpful resources for managing these cases.

SUGGESTED READING

- ▶ Association of Shelter Veterinarians. Management of cats who test positive for FeLV or FIV in animal shelters. Shelter vet website. <https://www.sheltervet.org/assets/docs/position-statements/managementofcatswhotestpositive.pdf>. Published July 2014. Accessed March 2021.
- ▶ Little S, Levy J, Hartmann K, et al. 2020 AAFP feline retrovirus testing and management guidelines. *J Feline Med Surg*. 2020;22(1):5-30.
- ▶ Spada E, Perego R, Sgamma EA, Proverbio D. Survival time and effect of selected predictor variables on survival in owned pet cats seropositive for feline immunodeficiency and leukemia virus attending a referral clinic in northern Italy. *Prev Vet Med*. 2018;150:38-46.
- ▶ Stone AE, Brummet GO, Carozza EM, et al. 2020 AAHA/AAFP feline vaccination guidelines. *J Feline Med Surg*. 2020;22(9):813-830.

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For global readers, a calculator to convert laboratory values, dosages, and other measurements to SI units [can be found here](#).

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