

FLASH VetID™ FeLV

See beyond antigen testing

Fast test for the qualitative detection of cell-associated proviral DNA of Feline leukemia virus (FeLV) in whole blood of the cat.



40 minutes

TOTAL ASSAY TIME

50 µL
EDTA whole blood

SAMPLE

Room
temperature

STORAGE

12 months

SHELF LIFE
(FROM MFG)

Detects integrated, cell-associated FeLV proviral DNA in both progressive and regressive infections
Essential for antigen-discordant cases

Clinical suspicion:

- Kittens or young cats from shelters or multi-cat households; cats with outdoor access or contact with an FeLV-infected cat
- Unexplained non-regenerative anaemia, neutropenia, or other evidence of bone-marrow suppression
- Persistent fever, weight loss, stomatitis, diarrhoea, or unusually severe secondary infections
- Lymphoma, leukaemia, or a mediastinal mass, or other suspected FeLV-associated neoplasia
- Reproductive failure, fading kittens, or illness in a cat whose retrovirus status is unknown

Screening / prevention programs:

- First presentation when FeLV status is unknown and an immediate decision is needed
- Following known or suspected exposure, or before introducing a cat into an FeLV-negative household
- To identify antigen-negative regressive infection, which a negative antigen result alone cannot exclude
- Before vaccination, breeding, or immunosuppressive treatment, when unrecognised infection would change management
- Blood-donor screening, since antigen-negative regressive cats remain unsuitable donors
- Pair with p27 antigen testing for a more complete assessment



FLASH VetID™ FeLV

The Pathogen and Transmission

Feline leukemia virus (FeLV) is an enveloped, single-stranded RNA gammaretrovirus. After entering a susceptible cell, viral RNA is reverse-transcribed and integrated into the cat's genome as proviral DNA. FeLV spreads mainly through saliva during prolonged close contact, including mutual grooming and shared food or water dishes; biting, vertical transmission, and contaminated blood products can also transmit infection. Kittens are most susceptible to progressive infection.

Clinical course and manifestations

Outcome after exposure depends on the immune response. Cats that fail to control the virus develop progressive infection, with persistent antigenaemia, high proviral load and the highest risk of bone-marrow suppression, lymphoma, and death. Cats that mount a partial response develop regressive infection: aviremic and not actively shedding, but retaining low-level proviral DNA that can reactivate under stress. A minority develop abortive infection, clearing the virus before it reaches the bone marrow and left with antibodies only. Distinguishing these courses is central to prognosis and management.

The diagnostic value proposition

Proviral DNA FLASH VetID™	p27 Antigen	Likely course
Positive	Positive	Progressive infection – current antigenaemia; persistent p27 over time confirms the progressive course
Positive	Negative	Regressive infection (once very early infection is excluded) – not shedding, but provirus-positive for life and unsuitable as a blood donor
Negative	Negative	Infection unlikely – consistent with a low-risk cat without recent exposure
Negative	Positive	Unresolved – does not fit a typical infection pattern; repeat both tests

+ Positive Result

Confirms FeLV proviral DNA in the sample. Interpret alongside p27 antigen status per the matrix above to classify progressive versus regressive infection.

– Negative Result

No proviral DNA detected; in a low-risk cat without recent exposure, systemic infection is unlikely. A positive p27 alongside a negative proviral result is unresolved – repeat both tests.

Gold-standard confirmation

For discordant results or recent high-risk exposure, repeat testing at least 30 days after exposure or use reference-laboratory confirmation.

Differential diagnostics

Test in parallel with FLASH VetID™ FIV to establish complete retrovirus status.