

FLASH VetID™ M. felis

A fastidious organism that culture keeps missing

Fast test for the qualitative detection of DNA of *Mycoplasma felis* in conjunctival, nasal, or oropharyngeal swabs of the cat.



35 minutes

TOTAL ASSAY TIME

Detects bacterial
DNA

TEST

Room
temperature

STORAGE

12 months

SHELF LIFE
(FROM MFG)

Sample: Oropharyngeal swab (essential); add a conjunctival or nasal swab if secretions are present
Sensitivity 91.23% & specificity 100.00% (n=324)
Aids in antibiotic course duration decision

Clinical suspicion:

- Serous-to-mucopurulent ocular discharge poorly responsive to routine treatment
- Concurrent mild upper respiratory signs (sneezing, nasal discharge)
- Lower respiratory signs (cough, dyspnoea) in kittens or immunocompromised cats
- Unilateral or bilateral conjunctivitis with chemosis and blepharospasm
- Recurrent conjunctivitis in a multi-cat household or cattery

Screening / prevention programs:

- New arrivals into catteries and shelters with a history of eye disease
- Chronic or recurrent conjunctivitis work-up alongside *Chlamydia felis* and FHV-1
- Cats under stress or immunosuppression (concurrent FeLV/FIV, corticosteroid therapy)
- Cattery-level screening where recurring conjunctivitis outbreaks are reported



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The Pathogen and Transmission

Mycoplasma felis is a small, cell-wall-deficient bacterium of the class *Mollicutes*, transmitted directly between cats by aerosol and close contact. Indirect transmission via fomites is not significant, since mycoplasmas survive poorly outside the host. It is distributed worldwide and is a common, though frequently under-recognised, contributor to feline upper respiratory tract disease (URTD).

Species-Specific Manifestations

M. felis is most often associated with URTD, where signs can include nasal and/or ocular discharge, sneezing, coughing, conjunctivitis, and chemosis, together with lethargy and anorexia. Conjunctivitis is one of several presenting signs, not a defining one. The organism is also implicated in lower respiratory tract infection and pneumonia, particularly in very young, elderly, or immunocompromised cats, as well as in pyothorax, keratitis, and mono- or polyarthritis.

The Diagnostic Value Proposition

M. felis is fastidious and slow-growing in culture. Nucleic-acid detection by FLASH VetID™ M. felis is faster and more sensitive than cytology, and distinguishes *M. felis* from *Chlamydia felis* or FHV-1 at the point of care. Both bacterial causes are treated with doxycycline, but the required course length differs: confirming which organism is involved avoids under-treating a mycoplasma infection that needs a longer systemic course to clear (typically 6 to 8 weeks compared to 4 weeks for *C. felis*, as per ABCD and similar guidelines).

+ Positive Result

Confirms *M. felis* DNA in the sampled sites. Interpret alongside clinical signs, as the organism can be present as a commensal; a positive test in a cat with compatible clinical signs supports *M. felis* as a contributing cause.

- Negative Result

Makes clinically significant *M. felis* infection at the sampled site less likely. It does not exclude disease caused by other agents of the feline conjunctivitis/URTD complex.

Gold-standard confirmation

Where quantification would change management (e.g. monitoring response to therapy), follow up with laboratory qPCR.

Differential diagnostics

It is recommended to run alongside FLASH VetID™ FHV, FLASH VetID™ C. felis, and FLASH VetID™ FCV, since feline URTD agents frequently co-circulate and ocular presentations in particular can look alike on examination alone.