A New Era for Cats: Groundbreaking FIP Treatments Explained

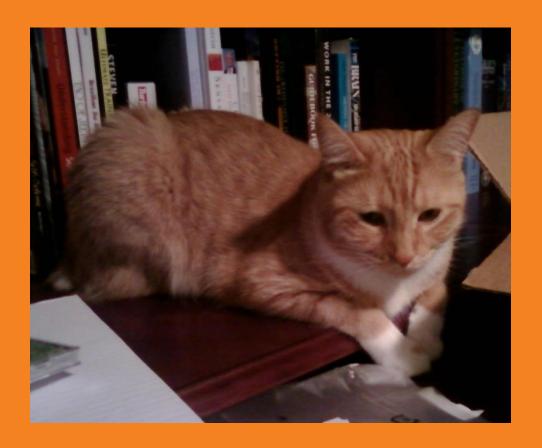
Best Friends Network Webinar

November 14, 2024

BFNetwork@bestfriends.org



In loving memory of Judo, and the many other cats we honor with this work.





Available to live attendees

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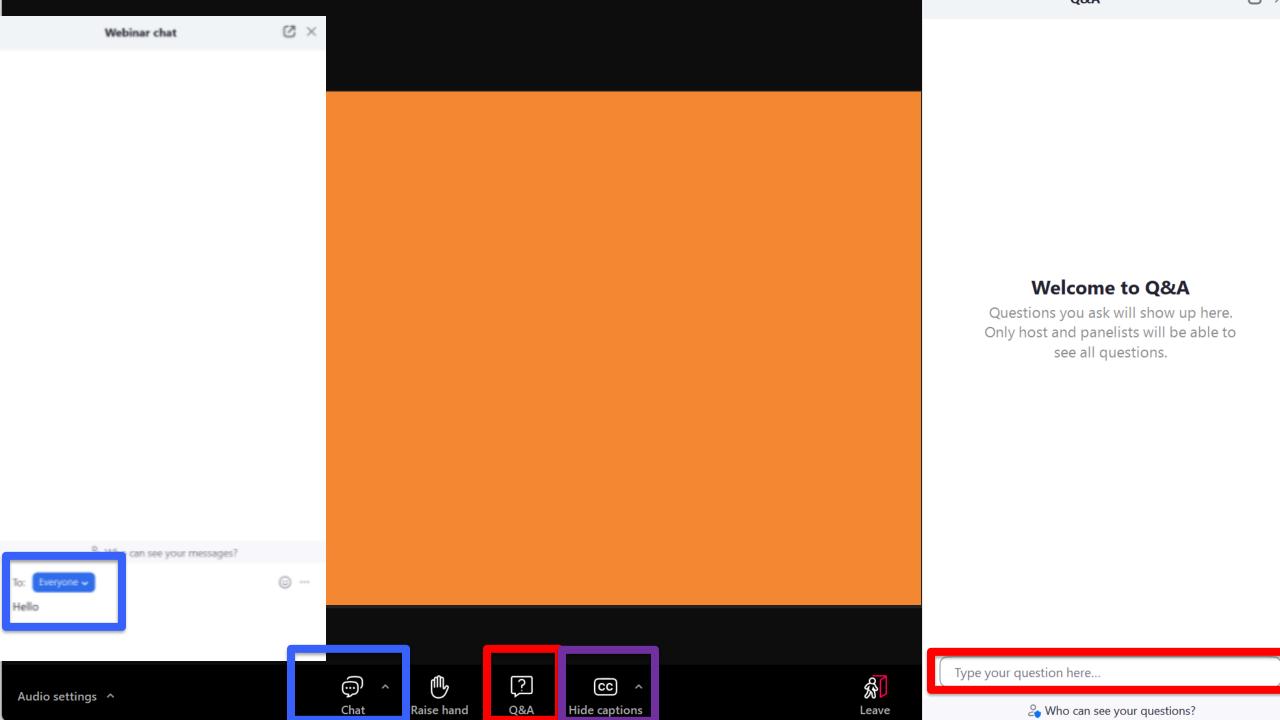
 At the end of this presentation, we will share a link to a form to submit your information for RACE credit.



Housekeeping

- Feedback:
 - One-question short survey at the end
 - Email <u>bfnetwork@bestfriends.org</u>
- We will make the webinar recording and presentation deck available in ~3 business days
- Please submit your questions for the panelists through the Q&A
- Please use the chat to share reactions, ideas, and resources







Today's Topics and Speakers

Diagnosis, Treatment, and Follow-ups (25 minutes)

- Dr. Colleen Guilfoyle, Veterinarian, National Shelter Medicine, Best Friends Animal Society (she/her/hers)
- Dr. Jennifer Bledsoe-Nix, Veterinarian, Best Friends Animal Society (she/her/hers)

The Future of FIP Treatment and Next Steps (20 minutes)

- Dr. Samantha Evans, Assistant Professor of Clinical Pathology, College of Veterinary Medicine and Biomedical Sciences Colorado State University (she/her/hers)
- Nicole Jacque, FIP Researcher, co-founder FIP Global CATS (she/her/hers)

Q&A

Moderator: Katelyn Durkin, Manager, Network Partner Relationships, Best Friends Animal Society, bfnetwork@bestfriends.org (she/her/hers)

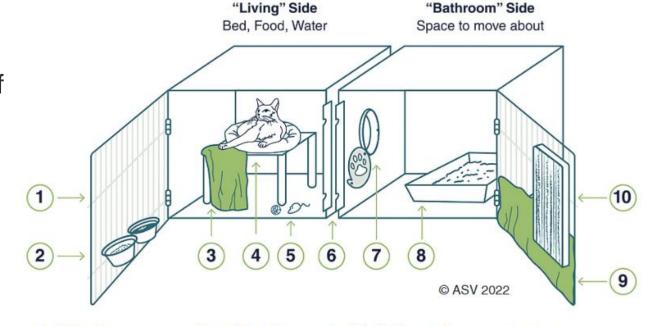
Prevention, Diagnosis, Treatments, and Follow-ups

with Dr. Colleen Guilfoyle and Dr. Jennifer Bledsoe-Nix



Prevention

- Stress can be a key factor in the onset of FIP.
- Population management is key!
 - Overcrowding
 - Length of stay
 - Stress mitigation



- Open Bars
 - Interaction
 - Ventilation
- 2. Food and water
- Draped Towel
 - Hiding place
 - Interaction choice
- 4. Raised Bed
 - Soft resting place
 - Retreat space
- 5. Toys

- Quiet latches and hinges
- 7. Portal
 - Ease of daily care 9.
 - Separation of spaces
 - Open except during cleaning

- 8. Litter box
 - Full size
 - No shelf above
 - Partial Cage Cover
 - Retreat space
 - Interaction choice
- 10. Scratching Material





- 1. FeLV/FIV testing
- 2. FIP in littermates
- 3. Effusion
- 4. Neuro/Ocular
- 5. Non-specific clinical signs



"Bindi" - Survived neurologic FIP and adopted!



Diagnosis

(Reasonably) Definitive Diagnosis

- Effusion with positive FIP RT-PCR (with specific mutation) or positive Rivalta's in a young cat.
 - Low to moderate cellularity
 - High protein concentration, low A:G ratio
- Therapeutic trial
 - A therapeutic trial of 24-72 hours can be considered when diagnosis is suspected.
 - Fever/clinical condition should improve within 24-72 hours of initiating therapy.



"Sonny" - Survived effusive FIP and adopted!



Diagnosis



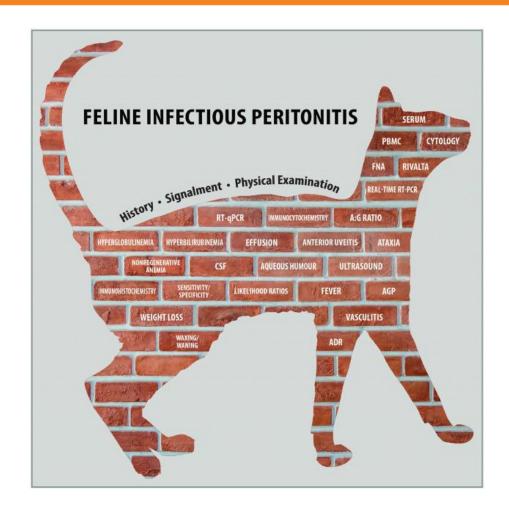
"Rihanna" - Survived effusive FIP (pleural) and available for adoption!

Presumptive Diagnosis

- Characteristic effusion
 - High viscosity/high protein, low cellularity
- □ Littermates with FIP
- ☐ Kitten/young cat with neurological disease or characteristic ocular changes (uveitis), other more common causes deemed less likely or ruled out via empirical treatment or testing.
- ☐ Kitten/young cat with non-specific clinical picture (fever, failure to gain weight (or weight loss), unthrifty, diarrhea) and non-specific bloodwork abnormalities (anemia, increased total bilirubin, increased globulins).



Diagnosis



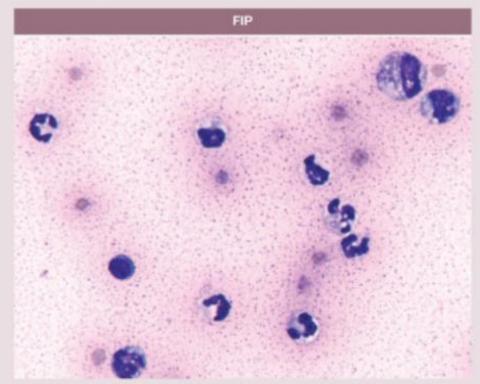


Figure 16a FIP (effusion): mixed cell population (non-degenerate neutrophils, macrophages and one lymphocyte) dispersed with a few erythrocytes in a granular eosinophilic proteinaceous background commonly observed in FIP effusions. Modified Wright stain, x 100

Treatment - Dosing

GS-441524 Oral Dosing

These doses represent the minimum dose. Dose escalation may often be necessary.

Clinical Presentation	GS-441524 PO Dosage		
Effusion(s) and without ocular or neurological	15mg/kg q24hrs or split q12hrs		
signs			
No effusion and without ocular or neurological	15mg/kg q24hrs or split q12hrs		
signs			
Ocular signs present +/- effusion	15-20mg/kg q24hrs or split q12hrs		
Neurologic signs present +/- effusion	10mg/kg (minimum) q12hrs		

Treatment - Dosing

Molnupiravir (EIDD 2801) Oral Dosing

Clinical Presentation	EIDD 2801 PO Dosage			
Effusion(s) and without ocular or neurological	10-15mg/kg q12hrs			
signs				
Ocular signs present +/- effusion	15mg/kg q12hrs			
Neurologic signs present +/- effusion	10-20mg/kg (minimum) q12hrs			



Treatment



US Pharmacies Offering Compounded FIP Treatment

Pharmacy Name	Formulations offered	Sample 12 Week Treatment Cost*				
	GS: Tablets, liquid oral suspension EIDD-1931: Tablets	\$1146.60 (Tablets)				
Stokes	Available in all 50 states. Uses the BOVA compounded GS-441524 formulation which has severa years of clinical use in the UK and AUS, and has been used in multiple studies https://www.stokespharmacy.com					
Wedgewood	Molnupiravir: Capsules, liquid oral suspension	\$148.50 (Oral Suspension)				
weagewood		Available in all 50 states. https://www.wedgewood.com				
Mixlab	GS :Tablets, liquid oral suspension	\$755.16 (Tablets)				
MIALED	Available in all 50 states. Offers 50% discount to rescues/shelters. https://mixlab.com					
	GS : Capsules, chewable, liquid oral suspension	\$186.73 (oral suspension)				
Specialty Vet Pharmacy	Available in all states EXCEPT: AL, AR, KY, LA, MD, NC, NE, OR and TN. https://www.sypmeds.com					
	GS: Tablets	\$756				
Avrio	Available in all states EXCEPT: AL, AR, CA, LA, MA, MD, MS, NH, NJ, OK, TN, WV https://avriorx.com					
	GS: Capsules, liquid oral suspension	\$732 (oral suspension)				
Wood Dale	Available in AK, AZ, CO, CT, DE, FL, GA, ID, IL, IN, MA, MD, MI, MS, MT, NC, NH, NJ, NY, OH, OR, PA, RI, SD, TN, TX, WV, WI, WY https://wooddalepharmacy.com					
Ethos	GS: Troche, tablets, liquid oral suspension	\$746.55 (oral suspension)				
Ethos	Available in MA, NH, VT, ME, CO, NY, WI, IL and HI. https://ethospetrx.com					
an sales	GS: Capsules, liquid oral suspension	Not available				
Pet Pharmacy NW	Available in OR and WA only. https://petpharmacynw.com					
	GS: Capsules	\$840				
Las Colinas	Available in TX only. https://www.lascolinaspharmacy.com					



*Sample 12 Week Treatment cost is based on expected base cost for a 3 kg (6.6 lb) cat with wet/dry (no ocular or neurological involvement) at the recommended dosages for treatment. This does not include adjustment for weight gain during treatment, and is meant to give a general comparison of treatment costs. Actual treatment cost will vary depending on cat's response to treatment, weight gain, and other factors.



Treatment and Observation Follow-up

Treatment Follow-Up – based on clinical severity of FIP

- If clinically stable:
 - Recheck exam or telemedicine recheck 2-4 weeks after starting treatment
 - Recheck CBC and chemistry at 6-8 weeks and 10-11 weeks of treatment
 - Monitoring improvement in previously abnormal values
 - Albumin, total protein and globulin abnormalities
 - Anemia, neutrophilia, total bilirubin and other abnormalities if present
 - If values are not improving, dose may need adjustment
- If ocular or mild neurologic FIP, recommend photos and/or videos to monitor improvements
- If not clinically stable, follow recommendation from veterinarian

NAME: Rhubarb Age: 4 Months / Sex: Female, S

Type of FIP: Ocular

Symptoms: Hyphema, no blepharospasm or ocular discharge. Mild normocytic, normochromic anemia (29%)

Other: Sibling to Carrot Top FIP+ with Abdominal Effusion. Cedar City

Diagnosis	4 Weeks GS	8 Weeks GS	12 Weeks GS	4 Weeks Post GS	
Date: 8/17/23	Date: 9/12/23	Date: 10/9/23	Date: 11/8/23	Date: 12/6/23	

	Test	Test Name	Normal low	Normal high	units*	Value	Value	Value	Value	Value	
FIPRed cells	RBC	Red blood cells	6.54	12.2	M/uL	7.17	9.02	9.06		8.37	
	нст	Hematocrit	30.3	52.3	%	29.6	39.2	42.6		36.6	
	HGB	Hemoglobin	9.8	16.2	g/dl	8.4	12.5	12.6		12.7	
FIPWhite cells	WBC	White blood cells	2.87	17.02	K/uL	9.52	17.34	9.51		14.38	
	%LYM	% Lymphocytes	20	45	%	21.6	35.2	40.4		25.0	
	%NEU	% Neutrophils	35	75	%	71.5	57.9	51.1		66.3	
	LYM	Absolute Lymphocyte Count	0.92	6.88	K/uL	2.05	6.10	3.84		3.60	
	NEU	Absolute Neutrophil Count	2.3	10.29	K/uL	6.80	10.03	4.86		9.54	
FIP Chemistry	TP	Total protein	5.2	8.2	g/dl	10.5	7.4	7.0	7.4	8.3	
	ALB	Albumin	2.5	3.9	g/dl	2.9	3.2	3.0	3.4	2.9	
	GLOB	Globulin	2.8	4.8	g/dl	7.6	4.2	4.0	4.0	5.4	
	A/G	ALB to GLOB ratio	0.35	1.5	n/a	0.38	0.76	0.75	0.85	0.54	
	TBIL	Total Bilirubin	0.0	0.9	mH/dL	0.3	0.3	0.3	0.3	0.3	
Kidney	CREA	Creatinine	0.6	2.4	mg/dl	1.1	1.2	0.8	1.0	1.2	
	BUN	Blood urea nitrogen	14	36	mg/dl	19	26	22	29	21	
Liver	ALT	Alanine Aminotransferase	12	115	U/L	42	47	49	51	52	
	ALP	Alk Phos	6	102	U/L	30	71	85	70	38	
	•										

Weight	KG	1.72	2.40			
Temperature	F	103.5	Normal	Normal	Normal	Normal
GS Brand		Diagnosis	Aura Blue 20	Aura Blue 20	Aura Blue 20	Observation
Dose MG/KG		Diagnosis	12 mg/kg	12 mg/kg	12 mg/kg	Observation
Dose ML	ml	Diagnosis	1.44			Observation



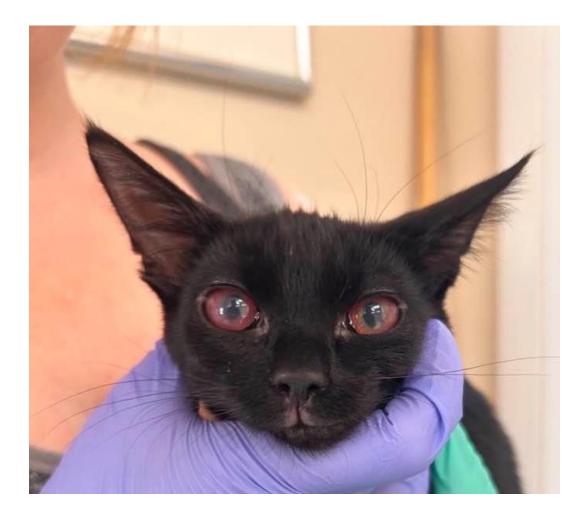


Treatment and Observation Follow-Up

Observation Follow-Up

- Observation period begins after treatment completed
- We follow an 84-day observation phase
- During that time, CBC and chemistry is checked every 4 weeks
 - Monitor for signs of relapse
 - Relapse uncommon is otherwise healthy animals in low stress environment
- Vaccinations can be performed as recommended based on environment and risk
- Spay/Neuter can be performed if at least 1 month remaining in treatment (and clinically stable) or any time during observation

Case Review – Rhubarb



Ocular FIP – rubeosis iridis

- 4-month-old FS DSH
- No abnormalities in activity or appetite noted by caregivers
- During morning feeding, caregiver noted red eyes and requested doctor evaluation
- Bilateral neovascularization of iris
- CBC mild anemia with HCT 29.6%
- Chemistry elevated total protein and globulin with A:G ratio 0.38
- Mildly febrile at 103.5 F
- Started on ocular doses GS

Survived FIP and adopted!



Case Review - Freyja

2-year-old FS Siamese Manx cross Symptoms: decreased activity, poor appetite, weight loss and overall lower activity

- No effusion on exam; not febrile
- CBC all normal values
- Chemistry mildly elevated amylase with very elevated total protein and globulin
- Albumin:Globulin ratio of 0.3
 - Confirmatory protein electrophoresis submitted – gamma, alpha-2 and beta globulins all elevated supporting FIP diagnosis
- Started treatment with GS injections (before lab results)
 - Within 2 days, appetite improved
 - Within 1 week, normal activity





The Future of FIP Treatment and Next Steps

with Dr. Samantha Evans and Nicole Jacque

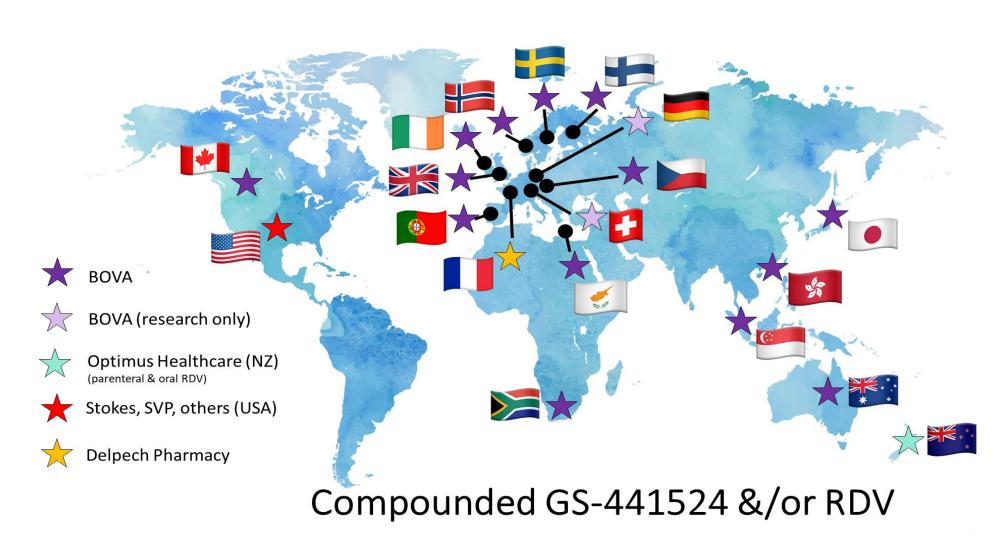




- FIP Treatment
 - New treatment options
 - Combined antiviral therapy
 - Shorter treatment duration
- Better understanding of FIP pathogenesis
 - Transmission
- Improved diagnostics
- Effects of heredity on susceptibility to FIP
- FIP Prevention



Compounded GS Around the Globe





Current treatment options in the US









GS-441524 Compounded

Molnupiravir Compounded

Remdesivir Off-label

Paxlovid Off-label



- Future new treatment option:
 GC376
 - First antiviral to successfully treat FIP
 - 3CLPro protease inhibitor
 - Anivive is working towards
 FDA approval
 - Submitted Reasonable
 Expectation of Effectiveness
 section to the FDA-CVM





Efficacy of a 3C-like protease inhibitor in treating various forms of acquired feline infectious peritonitis

Niels C Pedersen¹, Yunjeong Kim², Hongwei Liu¹, Anushka C Galasiti Kankanamalage³, Chrissy Eckstrand⁴, William C Groutas³, Michael Bannasch¹, Juliana M Meadows⁵ and Kyeong-Ok Chang²

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- Combination Therapy
 - Common strategy for human viral diseases
 - Synergistic combinations increase effectiveness
 - Combination therapy prevents viral resistance



Front Vet Sci. 2022; 9: 1002488.

Published online 2022 Oct 28. doi: 10.3389/fvets.2022.1002488

PMCID: PMC9650422

PMID: 36387398

Effect of GS-441524 in combination with the 3C-like protease inhibitor GC376 on the treatment of naturally transmitted feline infectious peritonitis

Jinbao Lv, Yang Bai, Yingyun Wang, Liu Yang, Yipeng Jin, [™] and Jun Dong [™]

► Author information ► Article notes ► Copyright and License information PMC Disclaimer



- Shorter Treatment Duration
 - Some cats may be able to have a shorter treatment duration with current protocols – as little as 6 weeks has shown non-inferiority in some cases
 - New protocols may enable even shorter treatment duration

Open Access Article

Short Treatment of 42 Days with Oral GS-441524 Results in Equal Efficacy as the Recommended 84-Day Treatment in Cats Suffering from Feline Infectious Peritonitis with Effusion—A Prospective Randomized Controlled Study

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by Anna-M. Zuzzi-Krebitz 1,* ≥ , Katharina Buchta 1 ≥ , Michèle Bergmann 1 ≥ , Daniela Krentz 1 ≥ , Katharina Zwicklbauer 1 ≥ , Roswitha Dorsch 1 ≥ , Gerhard Wess 1 ≥ , Andrea Fischer 1 ≥ , Kaspar Matiasek 2 ≥ , Anne Hönl 1,2 ≥ , Sonja Fiedler 2 ≥ , Laura Kolberg 3 ≥ , Regina Hofmann-Lehmann 4 ≥ , Marina L. Meli 4 ≥ , Andrea M. Spiri 4 ≥ , Andrea M. Spiri 4 ≥ , Andrea M. Katrin Helfer-Hungerbuehler 4 ≥ , Sandra Felten 5 ≥ , Yury Zablotski 1 ≥ , Martin Alberer 3 ≥ , Ulrich von Both 3,6 ≥ , and + Show full author list
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Combined Antiviral Therapy for FIP

CSU/Best Friends Animal Society/MedVet Columbus:

Ongoing clinical trial with combined **oral** GS-441524 and GC376

(all FIP phenotypes)

"GS-441524 combined with GC376 can be safely and effectively used to treat FIP and reduces the treatment period to **4 weeks**, with an excellent cure rate." - Lv et al, 2022





- Virus sequencing and surveillance
 - Identification
 - Transmission
 - Virulence



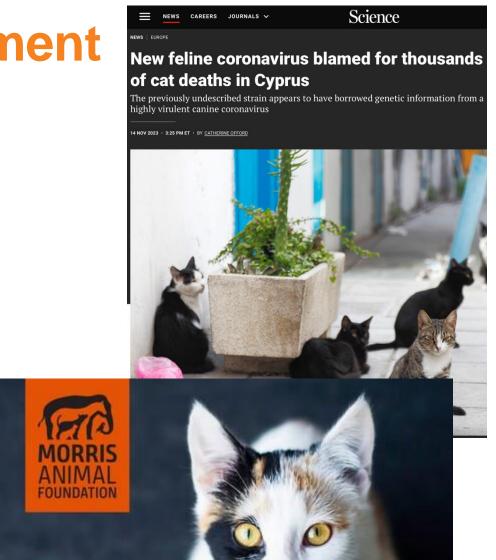




3 | Virology | Research Article

Molecular detection using hybridization capture and nextgeneration sequencing reveals cross-species transmission of feline coronavirus type-1 between a domestic cat and a captive wild felid

Ximena A. Olarte-Castillo,1,2 Laura B. Goodman,2,3 Gary R. Whittaker1,3,4





Investigating genetic susceptibility to FIP

polygenic





Article

Evaluation of Interferon-Gamma Polymorphisms as a Risk Factor in Feline Infectious Peritonitis Development in Non-Pedigree Cats—A Large Cohort Study

Emi N. Barker ^{1,2,*}, Philippa Lait ^{1,2}, Lorenzo Ressel ³, Emily-Jayne Blackwell ², Séverine Tasker ^{2,4}, Helen Kedward-Dixon ⁵, Anja Kipar ^{6,7} and Christopher R. Helps ^{1,2}



Strawberry Diagnosed 9/22

Peaches
Diagnosed 10/24



- Wouldn't it be great if we could prevent FIP in the first place?
 - Previous vaccine efforts
 - Not effective
 - May have increased chance of developing FIP!
 - ■DO NOT USE!





 New mRNA vaccine development is in progress at UC Davis





The Future of FIP Diagnosis

Response to therapy (supportive)

Multiplex Fluorescent Immunocytochemistry (MF-ICC) and flow cytometry

Plasma proteomics and serum biomarkers

Machine learning algorithms using clinicopathologic data

Non-S gene mutations or whole genome sequencing

CRISPR-based point-of-care diagnostics?

Raman spectroscopy?

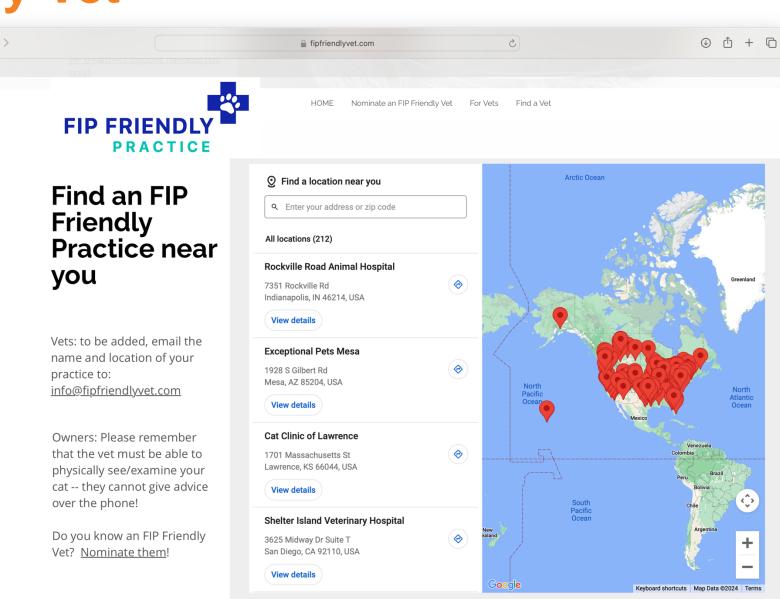
---> Watch this space!





FIP Friendly Vet

Find and Nominate FIP Friendly Vets!



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