FELINE CALICIVIRUS (FCV) INFECTION

Feline calicivirus (FCV) is a highly contagious virus that is one of the major causes of upper respiratory infections (URIs) and the cause of many other diseases in cats all over the world.

Together, Feline herpesvirus (FHV) and Feline calicivirus (FCV), are the cause of cat flu.

What Causes It

Feline calicivirus (FCV) is a small virus

How is it Transmitted

The virus is easily transmitted between cats through:

• Direct contact - through contact with saliva, eye or nasal secretions
• Inhaling sneezed droplets
• Sharing or food bowls and litter trays
• A contaminated environment (including bedding and feeding bowls and other equipment)

FCV is able to survive up to a month in the environment, although probably often does not survive more than 7-14 days.

The FCV virus is able to mutate readily during replication and this means that many different strains of the virus exist, some of which are a cause of more severe diseases.

Which Cats Are At Risk?

Cats in living in a colony are more at risk and because the disease is so infectious, it can spread very quickly throughout the population. The fact that cats in the colony are unlikely to have been vaccinated, could mean that some would also have contagious, multiple bacterial infections as well.

Signs and Symptoms.

The most common signs are:-

• Acute upper respiratory infection, typical signs include:-
- sneezing,
- discharge from the eyes and nose,
- conjunctivitis,
- ulcers on the tongue,
- lethargy,
- lack of appetite
- fever.

Symptoms may last from a few days to a few weeks and vary in severity.

- Gingivitis and inflammation of the lining of the mouth
- Limping syndrome - occasionally, in young cats in particular, infection may cause joint inflammation (arthritis).

This usually only lasts a few days, but it can be extremely uncomfortable with painful joints during this time.

Often, this is seen at the same time as URI

On rare occasions, due to mutation of the virus, more severe disease occurs, including pneumonia (particularly in young kittens), hepatitis (liver inflammation), pancreatitis, skin swelling and ulceration, and bleeding from the nose and intestine. Unfortunately in these outbreaks, up to 50% or more of affected cats may die.

**Diagnosis**

In most cases, a specific diagnosis of FCV infection will not be necessary. The typical signs of URI is enough to diagnose FCV (and/or feline herpesvirus - FHV) infection.

If a specific diagnosis is required, eye or oral swabs can be taken and sent to a veterinary laboratory where the virus can be detected and identified.

**Treatment**

FCV infections are frequently complicated by secondary bacterial infections, so treatment with antibiotics is usually necessary to eradicate these.
Good nursing care is critical and in severe cases, cats may need to be given intravenous fluid and special food.

Nebulisers and inhaling steam could help in cases of severe nasal congestion.

**Prevention.**

Vaccination for FCV is important for all cats. Two or three injections are recommended in kittens, starting at around 12 weeks of age. Cats should receive a booster at a year old, and after that should receive further booster vaccinations every 1-3 years.

Vaccination does not necessarily prevent infection with FCV but will greatly reduce the severity of clinical disease.

Additionally, as there are many different strains of the virus, it is difficult to design a vaccine that will protect against all of them. Some newer vaccines incorporate more than one strain of FCV to provide a broader range of protection.

In colonies of cats, any cat showing clinical signs should be isolated if at all possible, and strict hygiene should be ensured with disinfection, and use of separate feeding bowls, litter trays, implements and equipment. Hands should be carefully washed and disposable aprons and gloves, should be used.

**Prevention** is covered fully in the "**PREVENTION OF DISEASES IN CATS**" section above.