

Anigen Rapid FIV Ab/FeLV Ag

Feline Immunodeficiency virus (FIV) Antibody (Ab)

Feline Leukemia Virus (FeLV) Antigen (Ag)

• When to use Rapid FIV Ab / FeLV Ag¹ ?



When first adopted



Prior to
initial vaccination



Potential exposure
to infected cats



Clinical signs
are displayed

• Why use Rapid FIV Ab / FeLV Ag² ?

- ▶ FIV and FeLV are **retroviral infections** primarily associated with **feline neoplasms**.
- ▶ **FeLV infection significantly increases the risk of developing neoplasms** by more than 60 times, particularly lymphoma and leukemias.
- ▶ In **FIV infection, chronic diseases or opportunistic infections** are commonly observed.

• Clinical Evaluation^{3,4,5}

1 Comparison of 3 FeLV POC Ag test kits using blood and saliva



- ▶ The University of Sydney (Australia), 2017
- ▶ Comparative method: PCR
- ▶ Result: When compared to other POC kits, Anigen has shown similar equivalence in diagnosing progressively FeLV infected cats.

	A company	B company	Anigen Rapid FeLV Ag
Specificity	94%	98%	98%
Sensitivity	100%	91%	91%

* Regressively FeLV-infected cats were excluded from analysis

2 Determining the FIV status of FIV-vaccinated cats using POC Ab kits

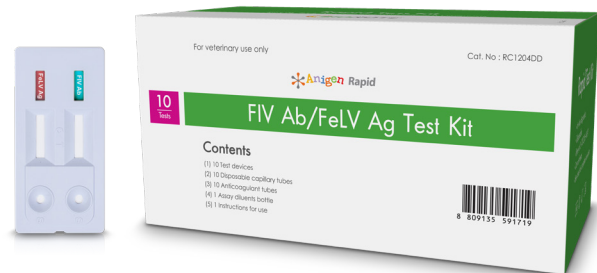


- ▶ The University of Sydney (Australia), 2015
- ▶ Comparative method: PCR, virus isolation
- ▶ Result: When compared to other POC kits, Anigen has demonstrated the ability to identify FIV infection status and differentiate vaccinated cats.

	A company	B company	Anigen Rapid FIV Ab
Specificity	64%	98%	100%
Sensitivity	100%	100%	100%

• Specification

- ▶ Species : Cat
- ▶ Sample : Whole blood, Serum or Plasma
- ▶ Testing Time : 10 ~ 20 minutes
- ▶ Special Features :
 - Simultaneous detection of FIV Ab and FeLV Ag
 - One-step testing procedure
 - Accurate results



References

1) Infectious disease of the dog and cat 4th ed.(Greene). 2) Canine and Feline Infectious Diseases.2014. 3) Australian Veterinary Journal Volume 97 No 3, March 2019. 4) Comp Immunol Microbiol Infect Dis. 2015 Oct;42:43-52. 5) Comp Immunol Microbiol Infect Dis. 2017 Feb;50:88-96.



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