FIP Monitoring tests and expectations:

We have direct experience of FIP cats with all blood components back within normal ranges (the main goal prior to stopping treatment) including the a:g ratio and Alpha-1-acid glycoprotein (AGP) and excluding the ALT liver score before the recommended official 12 week treatment protocol.

This highlights the need for tailored treatment and monitoring for individual cats with shared expectation baselines about what the end goal is in terms of blood test results and clinical presentation.

ALL blood components back within normal ranges should ideally be demonstrated at 2 consecutive blood tests performed 2 weeks apart (within the 12 week treatment plan ie at week 8 and 10 or week 9 and 11.)

This allows time for lab results to be returned before the end of the 12 week period and also means extra medication is not unnecessarily administered just because of waiting on lab results.

The test results should include the a:g ratio and Alpha-1-acid glycoprotein (AGP.) If the a:g ratio is not within normal range (as we have seen in several FIP cats) this can be given approval by using the Alpha-1-acid glycoprotein (AGP) result (or a Serum protein electrophoresis - SPE) to confirm there is no lingering FIP related inflammation.

Blood tests should ideally be carried out at:

- diagnosis (normally in-house full haematology and biochemistry) PLUS 'FIP Profile' at University of Glasgow Vet Diagnostic Services***
- week 2 (haematology and biochemistry especially for an anaemic cat)
- week 6 (full haematology and biochemistry)

(Week 6 is the opportunity to gauge the efficacy of the treatment.

Specifically, red blood cells and white blood cells should be normal. If they are not, this means there is still ongoing viral activity.

If the blood test results by week 6 are within normal ranges, it is worth discussing what to do at a retest at week 8 regarding continuing treatment for another 4 weeks and if there is a need.)

 during weeks 8 and 10 (full haematology and biochemistry PLUS Alpha-1-acid glycoprotein AGP)

OR

 during weeks 9 and 11 (full haematology and biochemistry PLUS Alpha-1-acid glycoprotein AGP)

Where <u>finances are limited</u>, blood tests (full haematology and biochemistry PLUS Alpha-1-acid glycoprotein AGP) should be done (to confirm it is ok to stop treatment at:)

weeks 9 and 11

(By week 10 if results including the AGP are not within normal limits, they likely won't be by week 12 and how to address this should be acted on by your Vet promptly.)

Observation blood monitoring (ie once treatment has stopped) should be done at:

- Week 4
- Week 12

(Full haematology and biochemistry. Optional:Alpha-1-acid glycoprotein AGP - there is no need for AGP if globulins are normal in biochemistry.)

*** The 'FIP Profile' at University of Glasgow Vet Diagnostic Services provides results for:

• FCoV (Feline Coronavirus) antibodies

*the reason our group of owners are keeping this marker as significant whereas some Vets may not be is because FIP does not occur unless there is a source of FCoV.

We are aware some cats may show 0 FCoV antibodies but we believe, at this stage, the cat will be very near death. We are also aware many cats may have very high FCoV antibodies and be very healthy ie no FIP but we understand the healthy cat being presented and other results will confirm in cases like this that FIP can be ruled out.

Haematology panel

•	An Albumin to Globulin ratio (a:g) of less than 0.8. (Other conditions can also cause this, so it is not to be used standalone but instead with all other markers to reach a FIP diagnosis)
•	Alpha-1-acid glycoprotein (AGP) which if above 1500 raises the suspicion for FIP further.
•	Fluid analysis (Wet FIP)