

Fecal shedding of infectious feline leukemia virus and its nucleic acids: A transmission potential

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1	Title
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4	transmission potential
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22 Abstract

23

24 Although it is assumed that fecal shedding of feline leukemia virus (FeLV) 25 constitutes a transmission potential, no study has been performed showing that feces 26 of infected cats can be a source of infection. In this study, we investigated fecal viral 27 shedding of FeLV and its role in viral pathogenesis with the goal to improve infection 28 control. FeLV RNA and DNA levels were determined in rectal swabs of 29 experimentally infected cats by real-time PCR, and the results were correlated with 30 proviral and viral loads in whole blood and plasma, respectively, and plasma p27 31 levels. All antigenemic cats shed FeLV RNA and DNA in feces. To determine 32 whether the viral RNA detected was infectious, virus isolation from feces was also 33 performed. Infectious virus was isolated from feces of antigenemic cats, and these 34 results perfectly correlated with the isolation of virus from plasma. Naïve cats exposed to these feces seroconverted, showing that infection through feces took 35 36 place, but remained negative for the presence of FeLV provirus and p27 in blood, an 37 outcome so far not described. Some of the organs collected after euthanasia were provirus positive at low copy numbers. From these results it is concluded that fecal 38 39 shedding of FeLV plays a role in transmission, but it is probably of secondary 40 importance in viral pathogenesis. Nevertheless, sharing of litter pans by susceptible and viremic cats could increase the environmental infectious pressure and 41 42 appropriate measures should be taken to avoid unnecessary viral exposure.

43

44 Keywords

45

46 FeLV, feces, transmission, nucleic acids, virus isolation

48 Introduction

49

50 Feline leukemia virus (FeLV) is an enveloped, positive-sense, single-stranded 51 RNA virus, member of the family Retroviridae, genus Gammaretrovirus. FeLV is one 52 of the most common agents causing cancerous diseases, blood disorders and 53 immunodeficiencies in cats worldwide.

54 It is assumed that FeLV initially infects the mucosae from the respiratory and 55 gastrointestinal tracts of the head, and replicates subsequently in the tonsils and local lymph nodes (Rojko et al., 1979). The germinal centers from the lymph nodes 56 57 and tonsils play an important role in this initial replication, functioning as an early 58 reservoir for the virus (Racz et al., 1990). From these lymphoid tissues, infected lymphocytes, monocytes and probably mucosal dendritic cells (Langerhans cells) 59 60 spread the virus to the bone marrow, thymus, spleen, and intestine, which favors the 61 initiation of a systemic infection (Rohn and Overbaugh, 1999; Rojko et al., 1979). 62 Infectious FeLV is found in great numbers in saliva (Hoover et al., 1972), and 63 transmission occurs mainly via the oronasal route, by mutual grooming and sharing 64 of eating dishes and drinking bowls (Hoover and Mullins, 1991). Persistently infected, antigenemic cats shed large quantities of infectious virus in saliva and nasal 65 66 secretions, and pose a great risk to susceptible cats (Hardy et al., 1973; Jarrett et al., 1973). 67

Although saliva is the most important vehicle for the transmission of FeLV, infectious virus has also been found in milk, urine, and rectal specimens (Hardy et al., 1976; Hinshaw and Blank, 1977). However, the importance of these clinical specimens in the horizontal transmission of the virus has been far less studied when compared to saliva.

73 Gastrointestinal dysfunction can be observed in cats persistently infected with 74 FeLV, but the etiology of this FeLV-associated enteritis has not been clearly defined 75 (Lutz et al., 1995; Reinacher, 1987, 1989). It was shown that p27 is expressed in 76 intestinal epithelial cells not only of cats showing clinical signs of enteritis, but also in 77 FeLV-positive cats without gastrointestinal disorders, suggesting that there is viral replication in those cells (Kipar et al., 2000). To our knowledge, although there are 78 grounds for suspecting that FeLV can be shed in feces, no study has verified fecal 79 80 viral shedding and its importance for the transmission of FeLV. In addition, no report 81 has examined the correlation between FeLV nucleic acids detection and isolation of infectious FeLV in feces and blood. 82

83 Recently we demonstrated that the shedding of FeLV RNA in saliva is a 84 consistent feature in viremic cats, and that latently infected cats (low proviral load, no 85 antigenemia) sporadically shed viral RNA in saliva, but no virus could be detected by 86 an infectivity assay (Gomes-Keller et al., 2006). To improve diagnosis and infection 87 control, and to gain a better understanding on the importance of latently infected 88 cats, it is essential that possible viral transmission routes are better investigated. In 89 this study we aimed at investigating the possible role of feces in the transmission of 90 the virus in cats harboring different proviral loads. We have applied noninvasive 91 methods for the detection of FeLV. Rectal swabs from 24 experimentally infected 92 cats were tested for the presence of FeLV RNA and DNA. In addition, the presence 93 of infectious virus in the feces of these cats was also investigated and a transmission 94 experiment was carried out to determine whether FeLV can be transmitted solely by 95 contact of naïve cats with feces from persistently infected cats, harboring infectious 96 virus.

98 Material and methods

99

100 Animals and study design

101 Two separate studies were performed with specific-pathogen-free (SPF) cats. 102 In the first study, 24 animals were acquired from Charles River Laboratories 103 (L'Arbresle, France), and were infected intraperitoneally with FeLV-A/Glasgow strain 104 (kindly provided by Dr. O. Jarrett) at 17 to 19 weeks of age. We examined shedding 105 of FeLV nucleic acids and infectious virus in the feces of these animals at week 98 106 post-infection, and correlated our findings with the presence of FeLV RNA, DNA, p27 107 and infectious virus in blood.

108 The second study consisted of a transmission experiment. Eight cats were 109 acquired from Liberty Research, Inc. (Waverly, NY), and entered the study at 12 110 weeks of age. For the transmission experiment, feces of 8 persistently infected cats 111 were carefully collected and placed in the litter pan (size of 0.4 X 2.0 m) localized in 112 the room that housed these 8 SPF cats. Feces were spread randomly on the surface 113 of the litter pan. This procedure was performed twice daily, once in the morning and 114 once in the afternoon, for a period of 26 weeks. Blood samples and rectal swabs 115 were collected weekly until week 12, and at weeks 18 and 26. Blood samples were 116 evaluated for the presence of FeLV-specific RNA and DNA sequences, anti-FeLV 117 antibodies, and p27. Rectal swabs were used for the detection of FeLV-specific DNA 118 and RNA.

In addition, 30 SPF cats acquired from Liberty Research, Inc., not infected by FeLV, were used as negative controls. These animals were acquired at the same time and at the same age as the animals from the first experiment, and were handled in the exact same manner. They were tested prior to the beginning of the experiment and shown to be negative for the presence of FeLV DNA and RNA sequences in

plasma and rectal swabs and p27 in plasma. Blood samples and rectal swabs from
these negative controls were used to test the specificity of our extraction and
detection methods.

127 All cited animals were kept under barrier conditions in large rooms furnished 128 with running boards, climbing trees, ladders, hammocks and elevated sleeping 129 places, under optimal ethological conditions at the Vetsuisse Faculty, Zurich, 130 Switzerland. Animal handling protocols were reviewed and approved by the Swiss 131 Federal Veterinary Office and followed strictly its guidelines.

132

133 Sample collection and processing

134 In study 1, to test whether cats shed FeLV-nucleic acids and infectious virus in 135 their feces, blood samples and rectal swabs were collected from the 24 animals previously cited on the same day and under identical conditions. Blood samples were 136 137 obtained by jugular venipuncture using evacuated tubes (Becton Dickinson, 138 Plymouth, UK) containing K₃EDTA. For virus isolation, an additional blood sample 139 was collected using evacuated tubes (Becton Dickinson, Plymouth, UK) containing 140 lithium heparin. Rectal swabs were collected with the aid of commercially available 141 cotton wool swabs, similar to Q-tips (Primella, Migros Genossenschafts-Bund, 142 Switzerland). Swabs were inserted into the anus of the cats and rubbed gently. After 143 collection, swabs were immediately placed into sterile 1.5-ml microcentrifuge tubes, 144 the external tip was removed, and the microcentrifuge tubes were closed. Swabs 145 were then processed as previously described (Gomes-Keller et al., 2006). Briefly, 146 200 µl of Hank's balanced salt solution (without calcium chloride, magnesium 147 chloride, or magnesium sulfate, GIBCO, Paisley, Scotland, UK) were pipetted into the 148 tubes and briefly mixed by pulse-vortexing. Samples were incubated at 42°C for 149 10 min. The tubes were subsequently centrifuged at 8'000 X g for 1 minute to remove

drops from the inside of the lid. Swabs were inverted and samples were eluted by centrifugation at 8'000 X g for 1 min. Swabs were then discarded, and 140 μ l of the whole eluate were used for extraction of total nucleic acids.

For study 2 (transmission experiment), 1 ml of blood was collected from 8 SPF cats using the closed collection system K₃EDTA S-Monovette (Sarstedt, Nümbrecht, Germany). Blood was collected weekly, starting from week 0 (no exposition to feces) until week 12, and at weeks 18 and 26.

157 For both experiments, plasma was obtained by centrifuging blood at 2300 X g, 158 for 10 min. Blood and plasma samples were immediately frozen at -80°C until they 159 were processed.

160

161 Nucleic acid extractions

162 One million blood leukocytes were used for DNA extraction using MagNA Pure LC DNA Isolation Kit I and MagNA Pure LC Instrument (Roche Diagnostics, 163 164 Mannheim, Germany), according to the manufacturer's recommendations. Leukocyte 165 counts were determined by an electronic cell counter (Cell-Dyn 3500, Abbott, Baar, Switzerland), and the appropriate volume containing 10⁶ cells were used for 166 167 extraction. Total nucleic acids were extracted from 140 µl of fecal eluate or 140 µl of 168 plasma using MagNA Pure LC Total Nucleic Acid Isolation Kit and MagNA Pure LC 169 Instrument (Roche Diagnostics, Mannheim, Germany) as recommended by the 170 manufacturer. Each sample was eluted in a final volume of 60 µl of elution buffer. 171 Extracted samples were stored at -80°C until analysis.

172

173 Detection and quantification of FeLV-DNA and RNA

174 FeLV DNA was detected by real-time PCR, and RNA by real-time RT-PCR175 (ABI 7700, Applied Biosystems, Foster City, USA). Five microliters of the eluate

176 obtained by nucleic acid extraction were used in each reaction. Primers, probe and 177 assay conditions were as described (Tandon et al., 2005). The detection limit of the 178 assays were determined using serial 10-fold dilutions of purified DNA and RNA from 179 FEA/FeLV-A, -B, and -C spiked into a given sample (sample extracted either from 180 blood, plasma or rectal specimens). The results obtained were compared to a 181 standard curve. In the case of FeLV DNA detection in blood and rectal swabs, the lower limit of sensitivity was one proviral molecule per PCR reaction. For FeLV RNA 182 183 detection, the RT-PCR procedure had a detection limit of 4.93 log10 copies/ml for 184 plasma RNA and 3.16 log10 copies/RT-PCR reaction for fecal RNA, which cannot be 185 compared directly as amounts of material in rectal swabs are not precisely 186 quantitatable.

187

188 Stability of total nucleic acids in rectal swabs

Four rectal swabs each from five FeLV-infected cats were collected as mentioned above. Dry swabs were kept at room temperature, and processed and assayed as cited on days 0, 7, 21 and 42 post-collection for the evaluation of the stability of FeLV nucleic acids in rectal swabs.

193

194 Spiking control experiment

To test for the presence of nonspecific inhibitors in fecal specimens, a spiking control experiment was performed. The experiment consisted of combining aliquots of pooled fecal swab eluates from SPF, non-infected cats, and supernatant of infected QN10S cells (virus stock), to reach an end volume of 200 μ l. The following volumes of virus stock were used: 0 (negative control), 15, 40, 60, 80, 100, 140, 160, and 200 μ l. The same procedure was performed using Hank's balanced salt solution (without calcium chloride, magnesium chloride, or magnesium sulfate, GIBCO,

Paisley, Scotland, UK), in place of fecal swab eluate. Combined samples were used for total nucleic acid isolation using the MagNA Pure LC total nucleic acid isolation kit and MagNA Pure LC instrument (Roche Diagnostics), as recommended by the manufacturer and tested for the presence of RNA by real-time RT-PCR, as described (Tandon et al., 2005).

207

208 ELISA for the detection of FeLV p27 in plasma and cell supernatant

FeLV p27 antigen was detected by a sandwich ELISA, as previously described (Lutz et al., 1983). Results are represented as percentages of absorbance in comparison to a positive control, FL-74 feline lymphoblastoid cell culture supernatant (Cockerell et al., 1976), which was considered to be 100%. In this study, p27 values above 5% were considered to be positive. Cats positive for p27 in plasma were considered to be antigenemic.

215

216 Measurement of anti-FeLV IgG in plasma

217 We detected anti-FeLV IgG in plasma, using ELISA wells coated with 218 200 ng/well of gradient-purified FL-74 FeLV under conditions previously described 219 (Lutz et al., 1980). Samples were analyzed in duplicate and the absorbances were 220 read using a microplate reader. For study 1, the results were calculated as the ratio 221 of the mean optical density (OD) in comparison to the mean OD of a serum pool of 222 the same 24 cats before inoculation with FeLV. In the case of study 2, the 223 transmission study, ratios were calculated using the individual ODs obtained pre- and 224 post-exposition to feces containing infectious FeLV. Ratios below 1.00 were 225 considered negative for the presence of FeLV-specific antibodies. In addition, for the 226 transmission experiment, Western blotting analysis (WB) was performed as 227 described previously (Lutz et al., 1988), using 1 µg of gradient-purified FL-74 per

nitrocellulose strip. We analyzed samples from weeks 0 (before experiment begin)and 18.

230

231 In vitro virus isolation from rectal swabs and plasma

232 Virus was isolated by cell culture assay from rectal swabs and plasma 233 specimens from cats from study 1 as described by Jarrett and Ganiere (Jarrett and 234 Ganiere, 1996), with few modifications (Gomes-Keller et al., 2006). Rectal swabs 235 were obtained from 21 experimentally infected cats as described above (same 24 236 cats cited above; 3 animals were not sampled), but swabs were immediately placed 237 into a 1.5 ml-microcentrifuge tube containing 500 µl of cell culture medium. Swabs 238 were processed essentially as described (Gomes-Keller et al., 2006). The 239 supernatant was filtrated into a sterile 1.5 ml-microcentrifuge tube using a syringe-240 driven filter unit (Millex-HV filter unit, 0.45 µm, Millipore Corporation, Bedford, MA). 241 Three hundred and fifty microliters of the filtrate were used for the infection of QN10S 242 cells. Alternatively, 200 µl of lithium heparin plasma were used for inoculation of 243 QN10S cells. Two hours after inoculation, the supernatant was replaced by fresh 244 medium. Development of cytopathic effects (CPE) was monitored daily. Supernatants 245 were tested on days 0, 10 and 18 post-inoculation by the detection of p27 in 246 supernatant using ELISA, and by RT-PCR using total nucleic acids extracted from 247 200 µl of cell supernatant as described above. Medium was replaced by 50% once a 248 week.

To test whether infectious virus was found in feces present in the litter pan of FeLV persistently infected cats, we randomly collected 1 g of 20 different fecal samples, being 10 collected in the morning and 10 collected in the afternoon. Fecal samples were resuspended in cell culture medium, and incubated for 10 min at RT. Samples were then centrifuged at 8000 X g for 1 min, and supernatant was filtrated

as described above. Three hundred and fifty microliters of the filtrate were used forthe infection of QN10S cells.

256

257 Detection of FeLV-DNA and virus isolation from tissues of cats in the 258 transmission experiment

259 Cats used in the transmission study (study 2) were euthanized in week 26, 260 and tissues samples from 27 organs were collected within 30 min post-mortem. 261 Samples were immediately snap-frozen in liquid nitrogen. Approximately 10 to 20 mg 262 of tissue were used for the extraction of DNA (DNeasy Blood and Tissue Kit, 263 QIAGEN, Hombrechtikon, Switzerland), following manufacturer's instructions. FeLV 264 DNA was detected by real-time PCR as described above, using 800 ng of total DNA 265 per reaction. For every eight cat samples, one water sample was co-extracted and tested by real-time PCR as negative control for extraction. In addition, four water 266 267 samples were included in each 96-well real-time PCR plate to detect any possible 268 contamination due to pipetting and processing.

269 In addition, we collected under sterile conditions samples from mesenteric 270 lymph node, urinary bladder, lung, thymus, spleen, and duodenum for virus isolation. 271 Tissue samples were processed and co-cultured with QN10S cells, in an attempt to 272 isolate small quantities of FeLV. Assay conditions were as described (Jarrett and 273 Ganiere, 1996), but tissue samples were cocultured with QN10S cells for 10 days, 274 instead of being removed after an initial incubation of approximately 2 h. Supernatants of the cocultures (200 µl) collected at day 10 post-inoculation were 275 276 used for total nucleic acid isolation (MagNA Pure LC Total Nucleic Acid Isolation Kit, 277 Roche Diagnostics) and samples were tested for the presence of FeLV RNA as cited 278 above.

280 Statistical analysis

281 The software StatView (Version 5. SAS Institute Inc., Cary, NC) was used to 282 determine whether a correlation between different parameters characterizing FeLV 283 infection and FeLV-RNA and DNA in feces existed (Spearman correlation analysis), 284 to access the stability of total nucleic acids in rectal swabs (Kruskal-Wallis analysis), 285 to analyze the results from virus isolation and to compare data in the spiking 286 experiment (Mann-Whitney U test). All statistical analyses were two-tailed and P-287 values < 0.05 were considered as significant. Distributions were tested for normality 288 by the Kolmogorov-Smirnov test using GraphPad Prism (version 3.00 for Windows, 289 GraphPad Software, San Diego California USA).

290

291 Results

292

293 Animal contact with infected feces in the transmission study

294 Before beginning the transmission study (study 2), we checked for the 295 presence of infectious virus in the feces of 8 FeLV persistently infected cats. We 296 randomly collected 20 fecal samples (10 in the morning and 10 in the afternoon) and 297 individually tested them for the presence of FeLV RNA at the day of collection. 298 Regardless the time of collection, all samples tested positive for the presence of 299 FeLV RNA. Samples from morning had in average a cycle threshold (Ct) value 300 (± SD) of 22.73 (± 1.87), while samples collected in the afternoon had a Ct value of 301 23.99 (\pm 0.78). There was no statistically significant difference between samples 302 collected in the morning and in the afternoon. Fecal samples were also used for viral 303 isolation to test for the presence of infectious virus, considering that FeLV looses 304 relatively rapidly its infectiousness in the environment (Francis et al., 1979). We were 305 able to detect infectious virus in all samples collected, except one from the morning

306 pool, as shown by the presence of FeLV RNA in the supernatant of QN10S cells, 307 detected 10 days after inoculation. There was no statistically significant difference 308 between samples collected in the morning and in the afternoon, regarding the Ct 309 values found by the real-time RT-PCR analysis of FeLV RNA in the supernatants of 310 positive samples. Of note, the amount of virus isolated from feces exposed to the 311 environment was relatively small in comparison to freshly collected feces (see results 312 below for virus isolation). Based on these results, we conclude that infectious virus is 313 commonly found in the feces of persistently infected cats and the virus remains 314 infectious, a prerequisite for its use in the transmission experiment, even though at a 315 lower load.

316 For the transmission study (study 2), feces from the same 8 FeLV persistently 317 infected cats cited above were spread over the litter pan in a room housing 8 naïve, 318 SPF cats. The procedure was performed daily in the morning and in the afternoon, 319 for a period of 26 weeks. We observed that, after the spread of the feces, naïve cats 320 entered in contact with the infected material as they immediately covered the 321 deposited feces with litter. In this manner, we could assure that naïve cats were 322 exposed twice daily to infectious virus present in the feces of persistently infected 323 cats.

324

325 Stability of total nucleic acids in rectal swabs

The stability of total nucleic acids over time was monitored in rectal swabs collected from experimentally FeLV infected cats known to be shedding virus in the feces by cell culture assay. Rectal swabs were stored at room temperature, and individually tested for the presence and the amount of FeLV RNA and DNA on days 0, 7, 21 and 42 post-collection (Figure 1). We did not observe any statistically significant difference among different time points with reference to FeLV RNA

(Kruskal-Wallis, P = 0.9719) or DNA Ct values (Kruskal-Wallis, P = 0.7089). These
results indicate that FeLV RNA and DNA present in feces are stable without
refrigeration for up to 42 days post-collection. Considering the Ct values obtained,
our results highly suggest that viral RNA is the predominant viral nucleic acid species
in these clinical samples.

- 337
- 338

FeLV-DNA and RNA detection in blood and rectal swabs by real-time PCR

339 We subsequently investigated the presence of RNA and DNA in blood 340 specimens and rectal swabs of experimentally FeLV infected cats from study 1. We 341 were able to confirm infection of all 24 cats by detecting provirus in whole blood by 342 real-time PCR (Table 1). FeLV RNA was detected in plasma of 22 (91.5%) of the 24 343 animals by RT-PCR. The levels of FeLV RNA and DNA in rectal swabs were 344 quantitated by RT-PCR and PCR, respectively. Twenty-two (91.5%) of the 24 cats 345 tested positive for both fecal RNA and DNA. Cats exhibiting an elevated proviral load 346 were likely to have a higher plasma viral burden (Spearman's correlation coefficient 347 $r_s = 0.850$, P < 0.0001), higher viral RNA burden in rectal swabs (Spearman's 348 correlation coefficient $r_s = 0.626$, P = 0.0027), and higher viral DNA levels in rectal 349 swabs (Spearman's correlation coefficient $r_s = 0.612$, P = 0.0033) than cats 350 harboring a low proviral load (Table 2). In addition, cats showing high plasma viral 351 load had higher levels of RNA (Spearman's correlation coefficient $r_s = 0.551$, P = 352 0.0082) and DNA (Spearman's correlation coefficient $r_s = 0.664$, P = 0.0014) in rectal 353 swabs (Table 2). Rectal swabs obtained from 30 control SPF cats tested negative for 354 the presence of both FeLV RNA and DNA (data not shown). To ensure that negative 355 RT-PCR results were not due to the presence of inhibitors in the feces, which could 356 affect the RNA extraction and detection procedures, we spiked pooled rectal swab eluates with a cell-free virus stock, using different volumes. The results were 357

358 compared to HBSS spiked with the same virus stock and identical volumes. As 359 shown in Figure 2, there was no statistically significant difference between Ct values 360 obtained from eluates of rectal swabs or HBSS spiked with virus stock at any volume 361 tested. This implies that negative results obtained for rectal swabs were not due to 362 the presence of elements, which might inhibit the efficient RNA extraction and 363 amplification, but rather due to the absence of FeLV RNA or too low amounts, not 364 detectable by our assay.

Cats from the study 2 (transmission study) did not become provirus positive in any week tested (data not shown). Considering that our assay is able to detect one copy per PCR reaction, we believe that these cats did not harbor FeLV in cells from whole blood or the amount of FeLV present was below our detection limit. Similarly, we were also not able to detect RNA in plasma of these cats at any occasion tested.

370

371 Detection of p27 in plasma

372 Plasma samples were also assayed for the presence of p27 using a sandwich 373 ELISA. In study 1, the antigen p27 was detected in plasma of 22 (91.5%) of the 24 374 cats tested, indicating an antigenemic state. There was a positive correlation 375 between levels of p27 in plasma and RNA (Spearman's correlation coefficient r_{s} = 376 0.662, P = 0.0015), and DNA (Spearman's correlation coefficient $r_s = 0.534$, P = 377 0.0105, Table 2) from rectal swabs. On the other hand, there was no correlation 378 between proviral load or FeLV RNA in plasma, and levels of plasma p27. Latently 379 infected cats (cats 24 and 68), with no detectable levels of p27 and plasma viral 380 RNA, tested negative for the presence of both RNA and DNA in rectal swabs.

We were not able to detect p27 at any occasion in cats from the transmission study (study 2, data not shown). Either these cats did not become antigenemic or the levels of p27 in the circulation were below the detection limit from our assay.

384

385 Detection of FeLV-specific IgG in plasma

386 The levels of FeLV-specific IgG were determined by ELISA in plasma. In study 387 1, the levels of FeLV-specific IgG in plasma of the 24 experimentally FeLV-infected 388 cats showed a strong negative correlation with proviral load (Spearman's correlation 389 coefficient $r_s = -0.865$, P < 0.0001) and with plasma RNA load (Spearman's 390 correlation coefficient $r_s = -0.865$, P < 0.0001). In addition, we also observed a strong 391 negative correlation between the antibody levels in plasma and the RNA load (Spearman's correlation coefficient $r_s = -0.592$, P = 0.0045) and DNA load 392 (Spearman's correlation coefficient $r_s = -0.719$, P = 0.0006) in rectal swabs. The 393 394 levels of viral-specific IgG showed no correlation with the levels of p27 in plasma 395 (Spearman's correlation coefficient $r_s = -0.332$, P = 0.1114).

396 To test for seroconversion by ELISA in the transmission study (study 2), samples collected at week 0 served as individual negative controls for samples 397 398 collected at week 18 and 26. The mean OD obtained by testing samples from these 399 two latter weeks was divided by the mean OD of the samples collected at week 0, 400 providing a ratio. Ratios below 1.00 were considered as negative for the presence of 401 specific antibodies against FeLV. Results were confirmed by WB analysis (only week 402 18). Results are presented in Table 3 and Figure 3. We observed seroconversion in 5 403 out 8 cats (62.5%), as shown by the ELISA and WB results. Interestingly, not all 404 positive ratios obtained by ELISA proved to be due to specific reactions to FeLV 405 proteins, as revealed in the WB analysis. We were not able to detect antibodies to 406 FeLV proteins other than p12 and p15. However, the seroconversion observed took 407 place clearly after exposition of susceptible cats to infected feces.

409 Isolation of infectious FeLV from plasma and fecal specimens from 410 experimentally infected cats

411 QN10S cells were inoculated with either a filtrate obtained from rectal swabs 412 or heparin-plasma from 21 FeLV experimentally infected cats of study 1 (same 413 animals cited above; 3 animals were not sampled). We monitored development of 414 CPE, and the results were confirmed by the detection of FeLV RNA extracted from 415 QN10S cell supernatant by real-time RT-PCR, and by the detection of p27 present in 416 the cell supernatant using ELISA on days 10 and 18 post-inoculation. FeLV was 417 isolated from rectal swabs and plasma of 17 (81.0%) out of 21 experimentally 418 infected cats (Figure 4). Samples testing positive for virus isolation by ELISA and RT-419 PCR consistently showed CPE (data not shown). Cats 24 and 68, which were 420 negative for the presence of p27 in plasma and did not shed fecal FeLV nucleic 421 acids, tested negative for the presence of infectious virus. In addition, we were not 422 able to isolate virus from cats 18 and 53, which tested positive for the presence of 423 both p27 in plasma and FeLV RNA and DNA in rectal swabs. Cats with a negative 424 result in virus isolation had a significantly lower proviral load (Mann-Whitney U Test, 425 P = 0.0023), plasma RNA load (Mann-Whitney U Test, P = 0.0023), RNA (Mann-Whitney U Test, P = 0.0023) and DNA loads in rectal swabs (Mann-Whitney U Test, 426 427 P = 0.0023), and levels of p27 in plasma (Mann-Whitney U Test, P = 0.0031). In 428 addition, cats testing negative for the presence of infectious virus in rectal swabs and 429 in plasma showed significantly higher concentrations of IgG in plasma than cats 430 testing positive for virus isolation (Mann-Whitney U Test, P = 0.0031). In 28.5% of 431 the cats, detection of virus in positive cultures inoculated with rectal swabs eluate 432 required a longer incubation time than that required for detection of virus in plasma 433 cultures (Figure 4).

435 **Presence of FeLV proviral sequences in tissue samples from cats positive only**

436 *in serological assays*

437 At week 26 of feces exposure, cats from the transmission study (study 2) were 438 euthanized, and different tissue samples were collected and analyzed for the 439 presence of FeLV DNA sequences. In cats J1 and J2, which did not seroconvert, we 440 were not able to detect FeLV DNA in any tissue examined. However, although we 441 were also not able to detect seroconversion in cat F1, we were able to amplify viral 442 DNA sequences in rectum, parotid gland and aorta. In cats that seroconverted (G1, 443 G2, G3, I1 and I2), we found FeLV DNA in different tissues, such as aorta, 444 diaphragm and myocardial muscles, thymus, popliteal lymph node, rectum, urinary 445 bladder, thyroid, mandibular gland and lungs. The copy numbers were in average 446 very low (2.5 copies/reaction). We were not able to detect viral DNA in tissue 447 samples from the following organs: bone marrow, spleen, liver, kidneys, brain 448 (cortex), spinal cord, ischiadic nerve, mesenteric, submandibular and sternal lymph 449 nodes, tonsils, duodenum, jejunum, ileum, colon, and thigh muscle. Water samples 450 co-extracted together with cat tissue samples and water negative controls added to 451 real-time PCR plate tested negative for FeLV-specific DNA.

452 We also attempted to isolate infectious FeLV from mesenteric lymph node, 453 urinary bladder, lungs, thymus, spleen and duodenum. However, we were not 454 successful in isolating virus from any of these tissues.

455

456 **Discussion**

457

To gain a better knowledge on the pathogenesis, routes of transmission and control measures for FeLV, viral shedding patterns in different body fluids and secretions must be comprehensively elucidated. Although it has been cited

461 extensively that feces might play a role in the transmission of FeLV, there are no 462 published studies on the fecal shedding of infectious virus and the importance of this 463 route for transmission of FeLV. In addition, no report is available, which 464 demonstrates the correlation between proviral and viral loads in blood, and FeLV 465 fecal shedding, in the form of either nucleic acids or infectious virus. With the advent 466 of real-time PCR and RT-PCR, an excellent diagnostic tool with high analytical 467 sensitivity and specificity, and fast turnaround time became available for the 468 detection of FeLV in different specimens.

In this study we demonstrated that FeLV nucleic acids are consistently found in rectal swabs of antigenemic cats. Our results showed that the proviral load strongly correlates with the viral load in rectal swabs and in plasma, as well as with the proviral load in rectal swabs. Latently infected cats, however, do not appear to shed either FeLV RNA or DNA in feces. These cats were positive only for the presence of provirus in whole blood, and tested negative for the presence of viral RNA and p27 in plasma.

476 We also observed that the FeLV-specific IgG levels strongly and negatively 477 correlate with the proviral load in whole blood, viral load in rectal swabs and in 478 plasma, and DNA load in rectal samples. Interestingly, no correlation between the 479 levels of p27 in plasma and antibody titers could be observed. These results are in 480 agreement with a previous study performed in this laboratory (Gomes-Keller et al., 481 2006), suggesting that IgG plays an important role in viral containment. Animals 482 testing negative for virus isolation in feces tended to have higher plasma IgG levels 483 than those shedding infectious virus. We can only speculate that increased levels of 484 anti-FeLV specific antibodies may lead to an increase in the rates of viral removal 485 from the circulation, which would justify the strong negative correlations observed. Of 486 note, we did not evaluate in this study whether the FeLV-specific antibodies found

were present in the form of circulating immune complexes and whether theypossessed neutralizing activity.

489 There are several studies reporting the detection of RNA and DNA in fecal 490 specimens in viral infections causing gastrointestinal clinical signs for diagnostic 491 purposes (Decaro et al., 2004; Pang et al., 2004; Phan et al., 2005). Cats persistently 492 infected with FeLV can present viral-associated enteritis, characterized by 493 histopathologic features in the small intestine similar to those observed in cats with 494 feline panleukopenia (Reinacher, 1987). Of note, none of the 24 cats examined 495 showed signs of gastrointestinal alterations, such as diarrhea, constipation or 496 vomiting, suggesting that despite the involvement of the gastrointestinal tract, the 497 FeLV-specific nucleic acids are consistently shed in feces of antigenemic and viremic 498 cats without apparent clinical signs. It is known that tissues frequently infected in 499 persistently infected cats include the gastric, intestinal and colonic epithelia (Rojko 500 and Kociba, 1991), and villous stromal cells (Kästner, 1992). The FeLV RNA 501 detected in rectal samples by our system could originate both from viral particles and 502 from FeLV-infected cells originating from those tissues. In view of the fact that 503 antigenemic cats shed also FeLV DNA, which had to be expected to originate from 504 cellular material, at least part of the FeLV RNA detected most certainly originated 505 from cells. However, the mean difference between Ct values from samples extracted 506 from rectal swabs obtained by PCR (DNA measurement) and RT-PCR (RNA 507 detection) was of 4.54 (SD = 2.30), and, therefore, FeLV DNA accounts for only 4.3% 508 of the total signal obtained. Consequently, although total nucleic acids were extracted 509 from fecal swabs, the signal obtained in the real-time RT-PCR originates mainly from 510 viral RNA and not DNA. Of note, by performing a spiking experiment, we could 511 exclude the presence of inhibitors affecting RNA extraction and amplification as a 512 cause for a lack of a signal in the detection of the specific FeLV nucleic acid by real-

513 time RT-PCR. The PCR assay for detecting the presence of viral nucleic acids in 514 rectal swabs of FeLV experimentally infected cats was shown to be of high diagnostic 515 sensitivity and specificity, taking into consideration that we correctly diagnosed all 516 antigenemic cats and we did not obtain a single false-positive result when testing 517 fecal samples from 30 control SPF cats processed in an identical manner. These 518 results are very similar to results obtained previously for the detection of FeLV nucleic acids in saliva (Gomes-Keller et al., 2006). We also observed that FeLV RNA 519 520 and DNA are very stable at RT, considering that we were able to detect FeLV nucleic 521 acids in rectal swabs stored for at least 42 days, even though very high 522 concentrations of RNases appear to be present in fecal specimens. However, if we 523 compare the collection of buccal swabs with the one of fecal swabs, it is 524 comprehensible that saliva samples are easier to collect than rectal swabs. 525 Nevertheless, the use of fecal swabs, rather than crude feces, due to the presence of 526 large amounts of debris in the latter ones, remains an additional alternative as clinical 527 sample that can be used for the diagnosis of FeLV. When this clinical specimen is 528 used for diagnosis, it is important to keep in mind that cats with access to outdoors 529 should necessarily be sampled by using rectal swabs, considering that feces from these animals are rarely available for collection. In addition, in a multiple cat 530 531 household, collection of feces from a litter pan leads to cross-contamination with 532 samples originating from different cats. Therefore, collection of individual rectal 533 swabs avoids the risk of a false diagnosis.

534 Infectious virus was isolated from 17 (81%) fecal and plasma samples out of 535 21 tested. All 21 cats tested positive for the presence of provirus in whole blood, 536 confirming infection with FeLV. Nineteen cats out of 21 (90.5%) tested positive for the 537 presence of both FeLV RNA and DNA in rectal samples, as well as for the presence 538 of viral RNA and p27 in plasma. Therefore, the presence of FeLV RNA in feces does

539 not absolutely reveal the production of infectious virions by intestinal and colonic 540 epithelia. This is reflected by the fact that we were not able to isolate infectious virus 541 from two cats, which tested positive for the presence of FeLV RNA in feces. 542 However, the fact that virus was detected in rectal samples and concomitantly in 543 plasma of 81% of the cats tested demonstrates that fecal shedding is a frequent 544 feature of the infection. The reason why we were not able to isolate infectious virus in 545 rectal swabs and plasma from two cats, which tested positive for the presence of 546 FeLV RNA in both specimens, could be the presence of virus neutralization activity in 547 these samples. Nevertheless, this possibility remains to be determined. This study 548 confirms that antigenemia (presence of p27 in plasma) is a good marker for infection 549 but a less reliable marker for viremia. We were not able to detect either FeLV RNA in 550 plasma or isolate infectious virus from plasma from two cats testing positive for the 551 presence of p27, indicating that antigenemia is not a synonym for viremia.

552 This is the first study to show that feces from persistently infected cats harbor 553 an infectious potential to susceptible cats. However, it appears that viral load present 554 in feces exposed to environmental conditions is relatively low, leading to a novel 555 outcome, in which cats only seroconvert, indicating infection, but virus replicates at 556 very low levels, below the detection limit of very sensitive molecular assays. Based 557 on this outcome, we can conclude from our results that the bone marrow was not 558 successfully infected by FeLV, considering that cats tested always negative for the 559 presence of viral DNA in whole blood. In addition, we could not detect FeLV in bone 560 marrow samples from any of the 8 cats tested. The likelihood that all cats have been 561 exposed to the virus is high, because we could observe that all cats equally entered 562 in contact with feces harboring infectious virus. The level of antibodies remained low. 563 This could be associated to either a limited initial viral replication (undetectable to our 564 assay), or to a weak immune response directed to the viral particles present in the

565 feces. We were not able to test in this study whether the antibodies found possessed 566 neutralizing activity. Interestingly, we were only able to detect seroconversion to p12 567 and p15 by WB analysis. In a previous experiment, we observed that antibodies to 568 these two proteins appear very early after FeLV experimental infection (week 4 post-569 challenge) and last, in some individuals, up to week 98 (M. A. Gomes-Keller and H. 570 Lutz, unpublished data). However, in this previous experiment, it appears that 571 antibodies specific to p12 and p15 were not protective.

572 Although positive findings for seroconversion in a small population are difficult 573 to generalize, our results suggest that infection with FeLV can occur by exposing 574 susceptible cats to feces containing infectious virus, leading to solely development of 575 a weak humoral response. However, virus was not completely eliminated, 576 considering that we were able to find FeLV DNA sequences in a number of tissue 577 samples from the euthanized cats. In an attempt to isolate infectious virus from mesenteric lymph node, urinary bladder, lungs, duodenum, spleen and thymus, we 578 579 were not able to obtain a positive result. Tissues for virus isolation were collected at 580 the same time as tissues for DNA isolation, and there were no means to know which 581 samples were positive for the presence of DNA before sample collection. With the 582 exception of thymus, we were not able to find DNA in any other tissue used for virus 583 isolation. In addition, the number of DNA copies found in a single positive thymus 584 sample was very low (1.21 copies/reaction). Thus, it appears that the presence of 585 very low copy numbers of DNA in a certain tissue or its complete absence could be 586 the reason for a negative result *in vitro* for virus isolation. In addition, our PCR assay 587 amplifies both integrated and unintegrated FeLV DNA sequences. For viral 588 replication, DNA must integrate before transcription can take place. The FeLV DNA 589 sequences found in different tissues could originate from unintegrated DNA, justifying 590 the negative result obtained. Low copy numbers could also be explained by

591 contamination of some of the samples. However, contaminations are very unlikely as 592 all negative controls, which were routinely included during RNA and DNA extraction, 593 as well as during the real-time PCR testing, tested negative.

594

595 Conclusion

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597 The present study raises some important points. First, the fact that FeLV RNA 598 and DNA, and infectious virus are consistently shed in feces of persistently viremic 599 cats, and that susceptible cats exposed to these feces seroconvert, demonstrates a 600 role of feces in the transmission of the virus. Although this route of transmission 601 appears to have a secondary importance, when compared to saliva, special care should be taken when handling litter pans. However, to utterly evaluate the potential 602 603 for contact transmission via feces, the minimum dose required leading to infection of 604 susceptible cats, the duration and the titers of fecal shedding by persistently infected 605 cats remain to be determined. Second, the finding that FeLV nucleic acids and 606 infectious virus are shed in feces from persistently viremic cats, but not from latently 607 infected cats, i.e. cats testing positive only for the presence of provirus in whole 608 blood, but negative for p27 in plasma, provides a better understanding of the FeLV 609 epidemiology. This finding confirms that latently infected cats may not pose a direct 610 risk to susceptible cats at the time of proviral determination. Nevertheless, under 611 stressful conditions or coinfections, the infection may be reactivated, and latently 612 infected cats could become viremic. Finally, we were able to detect a novel outcome 613 of FeLV, which resulted to the exposition of susceptible cats to very low loads of the 614 virus. Whether this outcome has clinical importance or contributes to the 615 pathogenesis of FeLV remains to be defined. However, considering that these cats 616 tested negative for the presence of DNA and RNA in blood, and that the only signs

617 for an infection were a weak immune response and the presence of FeLV DNA in 618 some organs, we believe that such infection state does not pose a risk to susceptible 619 cats. Nevertheless, it would be interesting to induce such outcome in a larger 620 population to further investigate these findings.

621

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623

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710 Figure captions

711

FIG. 1. Stability of FeLV RNA and DNA in fecal swabs stored at room temperature for
up to 42 days. Results are expressed as the mean of cycle threshold (Ct) values from
5 experimentally infected cats and the respective standard deviations; RNA (□), DNA
(■).

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FIG. 2. Virus spiking control experiment. Supernatant of infected QN10S cell cultures (virus stock) that contained FeLV RNA were added into either pooled fecal swab eluates or HBSS before extraction and amplification of viral RNA. NC, negative control; PC, positive control. Results are expressed as cycle threshold (Ct) values from samples spiked with different volumes (μ l) of virus stock (X axis); HBSS (\Box), pooled fecal swab eluates (**•**). As there were only two measurements, no standard deviation or error could be calculated.

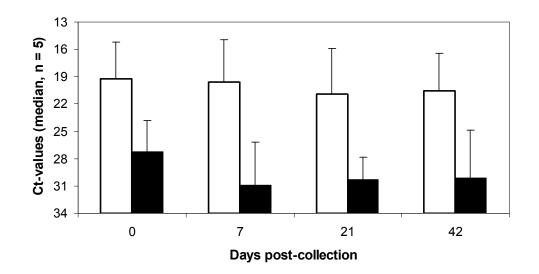
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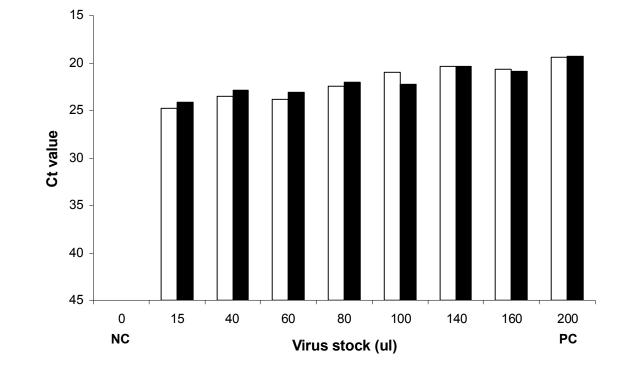
FIG. 3. Western blotting using gradient-purified FL-74 and sera from susceptible cats exposed to feces containing infectious FeLV. Strips 1 and 9, negative controls; strips 8 and 20, positive controls; strips 2 (cat G1), 4 (cat G2), 6 (cat G3), 10 (cat F1), 12 (cat I1), 14 (cat I2), 16 (cat J1) and 18 (cat J2), sera before exposure to infected feces (week 0); strips 3 (cat G1), 5 (cat G2), 7 (cat G3), 11 (cat F1), 13 (cat I1), 15 (cat I2), 17 (cat J1) and 19 (cat J2), sera after exposure to infected feces (week 18).

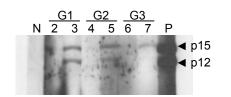
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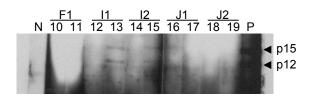
FIG. 4. FeLV virus Isolation from feces and plasma from experimentally infected cats at days 10 and 18 post-inoculation using QN10S cell cultures. Results are expressed as Ct value 45 (considered to be negative) minus Ct values measured obtained by real-time RT-PCR done in total nucleic acids extracted from QN10S cell culture

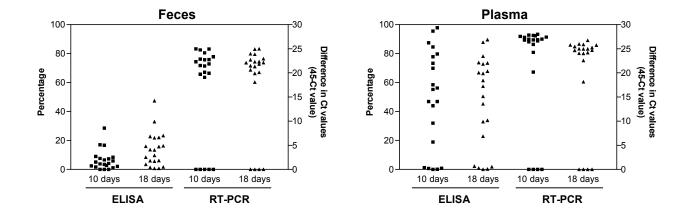
supernatant after inoculation; and as percentage obtained by p27 ELISA performed
using cell culture supernatant as sample, in comparison to a positive control (FL74
feline lymphoblastoid cell culture supernatant), which was considered to be 100%.
The four cats found to be negative in RT-PCR and p27 ELISA were identical.











Tables

TABLE 1. Detection of FeLV DNA and RNA in rectal swabs, plasma and blood samples, and detection of p27 in plasma from FeLV infected cats collected one year after experimental infection

Cat	Provirus ^a	Plasma RNA [♭]	Fecal RNA ^c	Fecal DNA ^c	Plasma p27 ^d	Plasma IgG ^e
8	7.66	9.24	5.86	4.93	33.64	0.248
9	7.13	8.95	5.02	3.34	27.51	0.600
10	6.76	8.91	4.76	3.58	42.83	1.303
14	5.36	7.18	4.58	2.95	15.95	3.731
16	6.68	8.77	5.78	3.63	52.49	2.007
17	6.99	8.90	5.90	3.41	45.09	1.655
18	4.06	5.55	3.19	0.13	11.10	5.083
21	7.79	9.51	5.75	3.22	42.78	0.221
24	2.82	nd	nd	nd	< 5.00	3.862
27	6.89	9.07	5.54	3.78	46.13	0.745
28	7.01	8.83	5.36	3.45	32.60	0.483
31	6.89	8.76	4.96	3.78	33.30	1.834
33	6.90	8.90	5.34	2.98	47.34	2.434
38	7.23	8.92	5.24	3.70	29.71	1.469
39	7.11	8.98	5.10	3.19	39.25	1.414
41	6.87	8.58	5.32	3.34	51.45	1.807
42	6.94	8.72	5.31	2.89	33.12	1.524
43	7.23	9.22	5.22	3.87	51.62	0.331
47	6.99	8.63	5.93	3.65	53.12	1.462
53	4.60	6.00	3.81	2.69	22.78	4.828
54	6.85	8.40	5.33	3.14	60.87	2.924
56	6.90	8.66	5.62	4.06	62.54	1.110
63	7.70	9.63	6.53	3.96	33.47	0.234
68	3.17	nd	nd	nd	< 5.00	2.931

nd, not detectable, that is below the lower detection limit of the assay (1 copy/PCR reaction for provirus in blood and for fecal DNA; 4.93 log10 copies/ml for plasma RNA; 3.16 log10 copies/reaction for fecal RNA).

^a copies (log 10)/10⁶ cells

^b copies (log 10)/ml of plasma

^c copies (log 10)/reaction

^d values are expressed in percentage in comparison to a positive control (FL74 feline lymphoblastoid cell culture supernatant), which was considered to be 100%. ^e values are expressed as ratios of the mean optical density (OD) in comparison to the mean OD of samples collected from the same cats before infection (n=24) and processed in an identical manner. Ratios \leq 1 are considered negative for the presence of FeLV-specific antibodies.

TABLE 2. Correlation between different parameters characterizing FeLV infection and FeLV-RNA and DNA levels in rectal swabs

	Correlation with fecal viral load		Correlation with fecal viral load		
	(log ₁₀ FeLV RNA copies/reaction)		(log ₁₀ FeLV DNA copies/reaction)		
Variable	Spearman's r _S ^e	P value [†]	Spearman's	P value ^t	
			r _S ^e		
Plasma FeLV RNA ^a	0.626	0.0027	0.612	0.0033	
Provirus ^b	0.551	0.0082	0.664	0.0014	
Plasma p27 ^c	0.662	0.0015	0.534	0.0105	
Plasma anti-FeLV IgG ^d	-0.592	0.0045	-0.719	0.0006	

^a Detection of FeLV RNA sequences by real-time RT-PCR in plasma samples;

^b Detection of FeLV DNA sequences by real-time PCR in whole blood;

^c Concentrations of p27 in plasma samples were measured by ELISA assay;

^d Levels of anti-FeLV IgG in plasma samples were determined by ELISA assay;

^e Spearman's r_s, Spearman's correlation coefficient;

2 CoR

^f P-values < 0.05 were considered as statistically significant;

TABLE 3. Detectable anti-FeLV antibodies against gradient-purified whole FeLV and its proteins in cats exposed to feces from FeLV persistently infected cats

Cat	ELISAª		WB ^b		
	Week 18	Week 26	p12	p15	
F1	0.674	0.720	-	-	
G1	2.682	2.808	+	+	
G2	1.411	1.811	+	Ŧ	
G3	1.235	1.426	_	+	
11	1.593	1.537	+	+	
12	1.321	1.612	+	+	
J1	1.216	1.162		_	
J2	0.918	1.194	O	_	

^a Anti-FeLV IgG in plasma samples were determined by ELISA. Values are expressed as ratios of the mean optical density (OD) in comparison to the mean OD of samples collected from the same cat before FeLV exposition and processed in an identical manner. Ratios \leq 1 are considered negative for the presence of FeLV-specific antibodies;

^b Anti-FeLV IgG measured by WB analysis. Responses defined as (+) for a positive reaction, and (-) for a negative reaction to either p12 and/or p15. Responses to other FeLV proteins could not be detected in our assay. WB analysis was performed at week 18 of exposition; plasma samples collected at week 0 (no exposition to FeLV-infected feces) tested negative for the presence of anti-FeLV antibodies.