

VACCICheck®

- In Clinic Titer Testing for Core Vaccines

Be Wise and Immunize, But Immunize Wisely



New WSAVA Guidelines – Editorial - Professor Richard Ford



- ✓ The WSAVA guidelines also include new, important information on the role of **serological testing** for the purpose of assessing vaccine associated immunity among individual patients.
- ✓ With improved point-of-care testing technology, as well as increasing concerns among pet owners over risks associated with excessive vaccination, the opportunity to monitor antibody responses to vaccination at the time of appointment represents a relevant application for clinical practice.

Source: [Editorial WSAVA Vaccination Guidelines 2016](#)



In-practice serological test kits – Recommended by WSAVA

Source: [WSAVA Vaccination Guidelines 2016](#)

“Since publication of the 2010 guidelines there have been advances in the availability of rapid and simple in-practice serological test kits that can detect the presence of protective antibody specific for CDV, CAV and CPV-2 in individual dogs.....

Two commercially produced test kits are available and have been applied and validated in the practice and shelter setting (Gray et al. 2012, Litster et al. 2012) [EB1]. These test kits have proven popular with veterinarians who wish to be able to offer their clients an alternative to routine core revaccination at 3-yearly intervals,”

Puppy Titer Testing

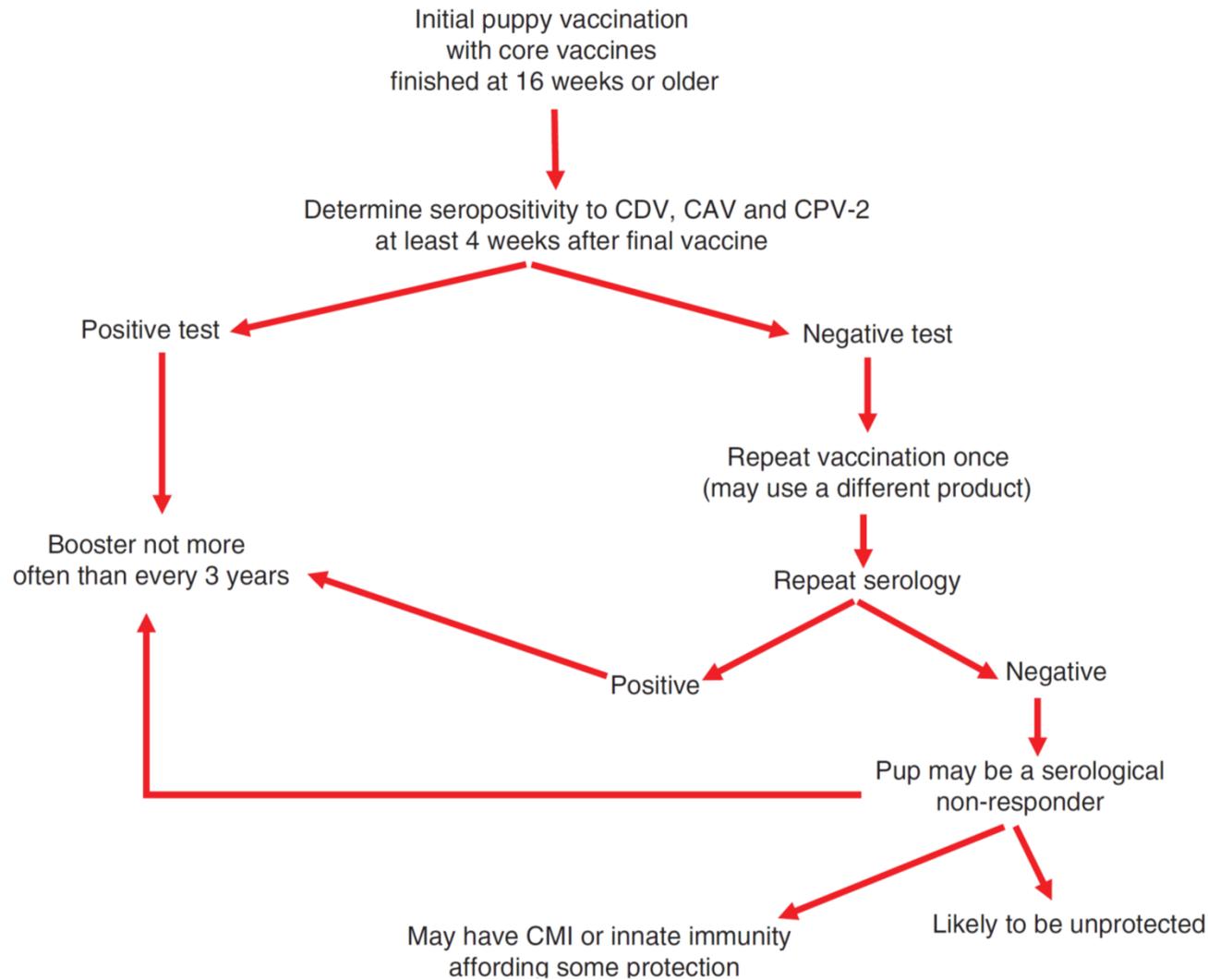


Fig 1. Flow chart for serological testing of puppies

Source: [WSAVA Vaccination Guidelines 2016](#)



Shelter Titer Testing



Table 7. Use of Serological Testing in a Shelter Infectious Disease Outbreak

Situation	Serological Status	Recommendation for Animals
Disease outbreak within a shelter: all animals within the shelter should be tested serologically (i.e. for CDV, CPV2 and FPV outbreaks)	Seropositive animals	These are protected and will not become infected or die. These should be separated from the non- or low-responder animals.
	Seronegative animals	These should be separated from the seropositive animals. These animals are susceptible and should not be adopted out of the shelter until after the incubation period for the infection (i.e. at least 2 weeks for CPV, at least 6 weeks for CDV). These animals should be vaccinated and retested to confirm seropositivity after the incubation periods above.
Animals outside of a shelter needing to be admitted in the face of a disease outbreak in the shelter	Seropositive animals	These may safely enter the shelter as they are protected from disease.
	Seronegative animals	These animals should be vaccinated and sent to foster homes until after they have seroconverted. They should not be allowed to enter the shelter until they are seropositive.

Source: [WSAVA Vaccination Guidelines 2016](#)



The 2016 WSAVA Vaccination Guidelines state that the presence of any detectable IgG antibodies, following vaccination, offers protection from ICH, CPV or CDV. Read the following:

- “When antibody is absent, (irrespective of the serological test used) the dog should be revaccinated unless there is a medical reason for not so doing, even though some will be protected by immunological memory.”
- “The presence of antibody (no matter what the titre) indicates protective immunity and immunological memory is present in that animal. Giving more frequent vaccines to animals in an attempt to increase antibody titre is a pointless exercise. It is impossible to create ‘greater immunity’ by attempting to increase an antibody titre.”



Critical Q & A for Serology Core Vaccine Testing

Q&A: 86. Can we test dogs as an alternative to annual vaccination? We are concerned about the advice to only boost every 3 years.

Yes, certainly. There are now well-validated in-practice serological test kits that permit determination of the presence of protective serum antibody specific for CDV, CAV, CPV-2 and FPV. In other countries, these kits are used to confirm protection at 3-yearly intervals (instead of automatic revaccination for core diseases). You could perform serology annually, but if you were to collect and analyze the data that you generated within your practice, you will quickly find that annual testing is unjustified.

Source: [WSAVA Vaccination Guidelines 2016](#)



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