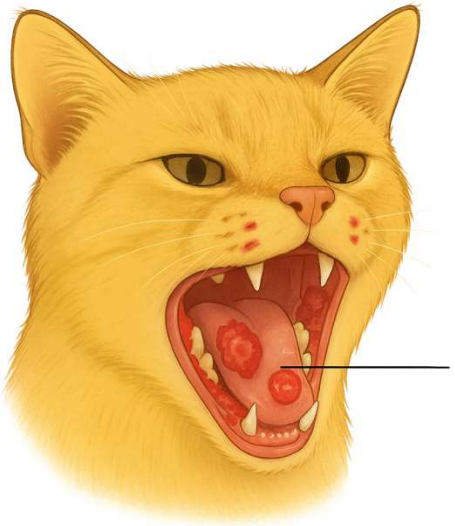
Clinical Use of FIPGL23 for FCGS,FCV



In cats with Calicivirus infection, gingivostomatitis may develop, characterized by ulcerative lesions involving the gingiva, tongue, and palate.

Efficacy of Molnupiravir in FCGS/FCV: Theoretical Framework and Clinical Application

In recent years, molnupiravir has been observed to provide clinical improvement in cases of FCV-associated stomatitis occurring concurrently with FIP. Particularly in refractory gingivostomatitis cases, a rapid onset of therapeutic response, reduction in oral pain, and marked improvement in quality of life have been reported. Molnupiravir is an orally bioavailable ribonucleoside analogue that is intracellularly converted to its active metabolite, EIDD-1931; it is incorporated into viral RNA by the RNA-dependent RNA polymerase (RdRp), thereby suppressing viral replication through a mechanism of lethal mutagenesis. This mechanism has been demonstrated across a broad spectrum of RNA viruses.

Feline Calicivirus (FCV) is a positive-sense single-stranded RNA calicivirus associated with a range of clinical manifestations, including upper respiratory tract disease as well as chronic gingivostomatitis (FCGS). As observed in the Coronaviridae family, structural similarities within the Caliciviridae family render molnupiravir a strong therapeutic target for FCV as well. In 2024, studies using three-dimensional human intestinal enteroid (3D HIE) models demonstrated that molnupiravir/NHC potently inhibited replication of human norovirus, providing translational support for its potential efficacy against FCV.

In the clinical setting, a prospective pilot study presented at the 2025 ACVIM Forum reported that five of eight cats with FCGS and PCR-confirmed FCV infection were treated with molnupiravir at a dose of 10 mg/kg administered twice daily for four weeks. Significant improvement in lesion scores was observed in four cats, and a reduction in FCV shedding, as assessed by PCR, was documented in two cats; these effects were not reported in the control group. These initial clinical findings, in concordance with field observations, indicate that molnupiravir represents a successful therapeutic option for the treatment of FCV-associated stomatitis (2025acvimforum.eventscribe.net).

In the treatment of FIP in cats, multicenter case series and pharmacokinetic studies have demonstrated that molnupiravir is effective and well tolerated at a dose range of 10–20 mg/kg administered twice daily (BID), with only mild and transient elevations in alanine aminotransferase (ALT) levels being reported.

Accordingly, **FIPGL23 is administered twice daily (BID) for a duration of 8 weeks**, with dosing adjusted according to body weight. In cases of relapse, an additional treatment period of 4–6 weeks is recommended.

Supportive Therapy

Secondary Bacterial Infection	*Amoxicillin–clavulanic acid*: 12.5–20 mg/kg PO, BID *Clindamycin*: 5.5–11 mg/kg PO, BID
Oral Care and Topical Agents	*Chlorhexidine gluconate*: 0.12–0.2% solution
Pain Management	*Meloxicam*: 0.05 mg/kg PO, SID
Nutritional Support	Soft, easily swallowable diets are recommended; in cases of anorexia, assisted feeding with liquid nutrition administered via syringe is advised.

References

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