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Non-Surgical Management of Egg (Pee Wee Egg) Bound in a Silky Bird

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Abstract

A 2 years old, female, black Silky bird colour was presented to the Exotic pet bird unit of Madras Veterinary College with history of anorexia, not active for the past two days, voiding watery brownish diarrhoea and bird laying in progress and laid eight eggs. On physical examination, the bird was depressed, abdominal straining and distention, persistent tail wagging, a wide stance, failure to perch and matting of feaces on the vent. Abdominal palpation and cloacal examination revealed the presence of an egg like structure in the pelvic cavity. On plain radiography revealed the presence of single sized egg in the pelvic cavity. The condition was confirmed as an egg bound.

Key words: Egg bound, Silky bird – management.

The failure of an egg to pass within a normal period of time is termed as egg binding (dystocia). Factors affecting egg laying can be variable and numerous, most birds will form and lay an egg 24-26 hours following ovulation. Generally, eggs are laid within 48 hours (Whittow, 1999). Initially, all hens starts to lay Pee Wee or Small eggs and gradually increase to a mature egg grade size of Medium, Large or bigger. Most hens are laying large, extra large or jumbo eggs by 40 weeks of age. The travel length of follicle in the reproductive tract will be vary and spending variable amounts of time in different parts of the oviduct. However, the most of time is spent in the uterus, where the shell is secreted (about 18-19 hours). The egg size varies as hens age and the feeding and management have a measurable impact on egg size. Chronic egg laying with dysfunction of oviductal muscle, vitamin deficiency, malformed eggs, oviduct damage, systemic disease, species predilection, or calcium metabolic syndrome that relates to calcium exhaustion or lack of absorption or availability are the causes of egg binding. First time egg laying hens may be predisposed to egg binding or dystocia (Harrison and Lightfoot, 2006). If the bird is untreated can result in long term egg retention and granuloma formation, uterine impaction, extra uterine eggs leading to egg peritonititis and death.

Case History and Observations

A 2 years old, female, black Silky bird was presented to the Exotic pet bird unit of Madras Veterinary College with history of anorexia, not active for two days, voiding watery brownish diarrhoea and bird laying in progress and laid eight eggs. On physical examination, the bird was depressed, abdominal straining and disten-



Fig 1. Radiography revealed the presence of small sized egg (pee wee egg) in the pelvic cavity.

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tion, persistent tail wagging, a wide stance, failure to perch. There was faeces stuck to her vent (matting or soiling of vent). Abdominal palpation and cloacal examination revealed the presence of an egg like structure in the pelvic cavity. The bird was sent for plain radiography revealed the presence of single sized egg in the pelvic cavity (Fig. 1).

Treatment and Discussion

Diagnosis was made by history, clinical signs, physical examination and confirmation was done by diagnostic plain radiography and the condition was an egg bound (dystocia). Non-surgical removal of obstructed egg was done by lubricating the cloaca with liquid paraffin. The egg was manipulated into the cloaca and expressed. The size of the eggs depends on the body weight of the bird concerned and species of the birds. A single small sized egg (pee wee egg) was removed manually. Caution must be taken not to push the egg up against the kidneys and spine. Eggs are usually laid 23-26 hours apart and the patient may not be ready to lay. The bird should be placed in a heated cage with adequate humidity and administered calcium gluconate by intramuscular injections every 3–6 hours. Tube feeding highly digestible, high-sugar supplements may be given to provide a rapid source of energy (Doneley, 2010).

Summary

In egg laying poultry birds, egg bound condition (dystocia) could be clinically managed by lubricating the cloaca with liquid paraffin along with administration of calcium gluconate.

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