ISSN: 0975-4873

Case Report

Egg Binding (Dystocia) in Budgerigar- A Case Report

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Received: 5th Sep, 19; Revised 10th June, 20, Accepted: 12th Oct, 20; Available Online: 25th Dec, 2020

ABSTRACT

One year old budgerigar with the complained of anorexia, tail wagging and difficulties in perching following laid down of five eggs was diagnosed suffering with egg binding based on clinical and radiographic examinations. The bound egg was successfully removed manually after lubricating the vent with liquid paraffin.

Keywords: Egg binding; dystocia; budgerigar

INTRODUCTION

The failure of an egg to pass through the oviduct results in egg binding (dystocia). The budgerigars (*Melopsittacus undulatus*) is one of the commonest birds to be affected with this condition, apart from cockatiels (*Nymphicus hollandicus*) and backyard poultry (*Gallus gallus domesticus*)¹. The primary etiologies for this ailment may be undernourishment and minerals and vitamin deficiencies as well as lack of exercise, stress, etc.,².



A-Swelling on lower abdomen



B-Oval radio-opaque mass at lower abdomen

History and clinical examination

The one-year-old budgerigar was brought with a history of anorexia, difficulties in perching, wagging of the tail and penguin stance and laid five eggs, yesterday. Grossly swelling was visible on the lower abdominal region (Fig. A) that was firm in palpation and oval radiopaque mass on radiographic examination (Fig. B).



C-Removed retined egg



D-Post-operative radiograph-absence of radio-opaque mass

Diagnosis

The case was diagnosed as an egg binding condition with support of the history, clinical and radiographic examination.

Treatment and Discussion

In the present case, physical restraint was used to control the bird because the bird was depressed. Liquid paraffin was infused using a tuberculin syringe in the cloaca, and the egg was manually pushed with the help of the index finger and thumb from the upper abdominal region towards the cloaca as opined by Doneley ³. The manual removal of the retained egg was successful after cloacal lubrication (Fig. C). It was advised to keep the bird warm. Meloxicam administered orally @ 0.5 mg/kg BW and calcium supplemented to prevent reoccurrence. The feeding was normal subsequently. Hypocalcaemia results in softshelled eggs and weakness in muscle function leading to difficulties to pass eggs through the reproductive tract. The probable reason for the egg binding may be hypocalcemia and soft shell egg⁴. Saranya et al.⁵ treated the egg binding manually using liquid paraffin in cockatiel. Nath et al.6 managed the egg binding surgically in an Alexandrine parakeet. In conclusion, manual removal of an egg can be adopted with sufficiently lubricated cloaca in freshly diagnosed cases.

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