

INTERNAL FIXATION OF FRACTURED WING OF A JUNGLE CROW (*CORVUS MACRORHYNCHOS CULMINATES*)

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Internal fixation is a common procedure in the treatment of fractures in a variety of animals including birds in veterinary practice. Since records on fracture treatment of birds are lacking in Sri Lanka, the objective of this communication is to report a case of an internal fixation of multiple fractures of the left wing in an adult jungle crow.

A crow, which had been found flightless and depressed from a home garden in Peradeniya, was presented to the Veterinary Teaching Hospital for treatment on 21.01.2003. The crow weighed 365 g and had an open wound on the dorsal surface of the lower part of the left wing, possibly due to a predator attack. Loss of dorsal wing coverts of the affected area and some ruffled median coverts were observed. A fragment of a bone was found to be jutting out, immediately distal to the elbow joint. A plain radiograph confirmed a transverse fracture of the mid shaft of the radius and two complete transverse fractures of ulna, which made the middle fragment unstable. An intra-medullary pinning under general anesthesia, followed by complete immobilization of the wing was indicated for correction.

Anesthesia was induced using 30 mg ketamine hydrochloride, administered intramuscularly to the thigh muscle. Signs of complete anesthesia were observed three minutes later. After routine preparation of the site, 1.3 x 75 mm, 18 G sterile stainless steel pin (stilette of a spinal needle) was placed in retrograde manner in the medullary cavity, aligning the fragments of the ulna. The fracture of the radius was left unattended due to its inherent smaller diameter which unwarranted internal fixation, thus a lightweight splint was used dorsally for external coaptation. The wound was dressed with an antibiotic and the soft tissues and skin were sutured with simple interrupted pattern using 3/0 catgut and 3/0 silk, respectively. Enrofloxacin 25 mg/kg (0.2 ml of 5 %) was administered subcutaneously and continued with Norfloxacin orally (150 mg/L) for a week

The crow was restricted to a cage and adequately fed for ten days until the removal of the intra-medullary pin and the sutures. It is recommended to remove implants from birds earlier than in mammals (between 7-10 days) to prevent disruption of endosteal callus of pneumatic bones. The fracture showed signs of complete healing when presented 11 days later. Another week in captivity before releasing to the wild helped the crow to regain the use of left wing, which might otherwise have caused complications due to joint stiffness following controlled mobility of the wing.

Photographic and computer assistance by Mr. R.M.G. Ratnayake and Mr. Janaka Herath are acknowledged.