A Practice Review of Surgical Sexing

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This article is to place on record some results and data from 2,000 surgical sexings of mixed species of cage and aviary birds, as there is little information on the overall incidence of complications, and the prevalence of death which may be expected.

Anaesthesia: No birds deliberately fasted. All induced with Isoflurane/O₂ by mask

Surgery: Stab incision left lateral abdomen to enter abdominal air sac. Wolf

endoscope - rigid. 2 mm external diameter. No skin suture.

Post-Surgery: Recovery in carry box at surgery.

Results: Deaths 9 in total (0.45%). No other post-surgery complications seen.

ANALYSIS OF DEATHS

1. Sun Conure

Died day following surgery. Pathology report massive disseminated haemorrhage? Viral?

2. Slatey Head

Died day following surgery. Autopsy visceral gout. (Not seen at time of surgery).

3. Alexandrine

Died 6 hours post surgery. Post mortem - gross haemorrhage in abdomen. Source not identified - presumed due to surgery.

4. Rock Parrot

Died during surgery - haemorrhage. Incorrect positioning of entry site.

5. **Jenday Conure**

Died 2 days post surgery. Post mortem - peritonitis - gizzard puncture at time of surgery.

Springvale Veterinary Clinic, 570 Springvale Road, Springvale South Vic. 3172

6. White Indian Ringneck

Died 24 hrs after surgery. Post mortem -multiple subcutaneous and intramuscular haemorrhage.

7. Green Indian Ringneck

Died 2 days post surgery. Post mortem - large liver abscess and haemorrhage.

8. Red Lory

Died day following surgery. No post mortem results- blood seen in cage by owner, so presumed hemorrhage surgery related.

9. **Grey Ringneck**

Excess bleeding at time of surgery. Post mortem internal haemorrhage. Surgery related.

DISCUSSION

Of the 9 deaths, none were due to anaesthesia, all occurred within 48 hours of the procedure, and almost all were associated with hemorrhage due to surgical damage and/or clotting problems.

The experience gained from surgical sexing is also an invaluable aid when laparoscopic examination if avian patients is indicated.

There seems to be a decreasing demand for surgical sexing, possibly due to the depressed market for birds, and the availability of DNA sexing. However, it will probably always have a place. I invite other readers to record their own experiences.