Crop Burn in an Umbrella Cockatoo

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History
An 18-week-old umbrella cockatoo presented for continuous vocalization and one episode of regurgitation. The bird had been purchased 3 weeks before presentation and was the first large pet bird owned by this family. The cockatoo was fed a commercial baby bird formula that the owners were heating in the microwave before feeding. The owner had been instructed on formula feeding by the pet store personnel when the bird was purchased.

Physical Examination
On presentation, the cockatoo was strong, bright, and alert. The crop was empty, but palpation revealed thickened, firm tissue in the ventrocaudal right cervical area. Closer examination with the feathers parted uncovered a small, round scab surrounded by an irregular halo of erythematous skin that was wet on the surface (FIGURE 1). Deeper palpation revealed a 2 × 3-cm, abnormally thickened area of skin that extended into the crop tissue. Because the bird was being fed a warmed baby bird formula, the lesion was likely a result of overheated food that resulted in a thermal burn to the crop tissue and overlying surface epithelium.

Treatment and Outcome
The initial course of action was to treat the bird medically and allow maturation and demarcation of the viable and nonviable tissue in the affected area. The scab overlying the affected area was attached to the skin and underlying crop wall, providing a barrier against the leakage of crop contents. A 10-day course of broad-spectrum antimicrobial therapy (nystatin and trimethoprim-sulfamethoxazole) was prescribed, and the owners were advised to offer smaller, more frequent feedings and to properly heat and mix the formula.

When the cockatoo was reexamined 7 days after the initial presentation, the scab over the crop was beginning to lift, revealing a fistulated crop (FIGURE 2). The inflammation in the surrounding tissues was resolving, and the overall lesion was significantly smaller. The demarcation between viable and nonviable tissue was more evident. The crop fistula was surgically repaired by debriding the edges of the fistula, separating the crop from the skin, and closing the crop and overlying skin in two separate layers using a monofilament absorbable suture material (polydioxanone). The bird’s recovery from the surgical procedure was uneventful.