

# RAPTOR REPORT



## Compassionate Euthanasia

*Kit Lacy, Cascades Raptor Center*

*Photos courtesy of Cascades Raptor Center*

Historically in the United States, many facilities rely on the acquisition of non-releasable, native bird species to join their collections as ambassadors or exhibit birds. This reliance on disabled birds - with little or no oversight on the suitability of the individuals' physical or psychological ability to have life-long, high quality welfare - has led to an abundance of "legacy birds" in human care.

I define "legacy birds" as individual birds who are part of a facility's collection who would not currently meet criteria for addition to the collection due to either their physical disability, their inability to participate in positive reinforcement training, or both. Trainers and caretakers currently providing care for these raptors may not have had a hand in choosing these birds to be ambassadors or exhibit birds. However, there may be colleagues within the organization who did add these raptors to the collection, or there may be staff or volunteers who feel a great attachment to these birds. This can make honest, caring conversations on the welfare of these legacy birds difficult, controversial, and fraught with emotion.

At the IAATE Annual Conference in Atlanta, GA in 2017, I presented a paper on the selection process of non-releasable raptors. Using over thirty years of data from individuals who had suffered injuries resulting in non-releasable status; we found that many of the injuries that result in raptors being deemed non-releasable and placed as ambassadors also lead to life-long conditions that must be assumed to cause chronic pain and distress primarily due to joint disease. In studies of humans diagnosed with arthritis, their ailments and the associated pain has been demonstrated to significantly decrease their quality of life, cause psychological distress, and is the leading cause of disability claims in the U.S. This data is what has led many to assume that arthritis is just as painful and distressful in other animals.

The information that I found radically changed the collection and selection plans of our organization and has generated much needed discussion within the bird training community. Some of that discussion has included the decision-making process for organizations regarding the determination of the timing for compassionate euthanasia for a legacy bird. While never an easy discussion or decision for anyone, it is the most important outcome any caretaker can make for an animal in their care. And while emotions may run strong, it is important for the

welfare of the bird that all involved can have honest and open communication about the best choice for the individual bird in question. This takes practice and a real commitment to acknowledging when one's personal attachment to an individual bird may cloud one's compassionate judgement.

Due to the longevity of birds (particularly raptors) in human care, Cascades still has and recently had several individuals who we considered legacy raptors in our collection. And in the last several years, we have had to make the decision to compassionately euthanize several legacy raptors on our team. Those individuals were monitored closely in the years after our data collection on non-releasable raptors. This monitoring included yearly radiographs, detailed feather condition charts, joint range of motion exams under anesthesia, and notes on mobility (which could include information on falls from perches or videos on how an individual is moving). We were looking for measurable changes during this monitoring which has assisted us in making a compassionate decision for legacy birds.

While examining radiographs, we are looking for joint disease near the site of the original injury, but we are also closely examining the joints of the legs. While the arthritis in the joints of the wings (where the original injury that caused non-releasable status originated) is usually present early and quite severely, we have found that with most wing injuries there will be over time arthritis in the knees, hips, or hock joints. These additional compensatory joint diseases may arise because individuals without the ability to open their wings fully will often torque their bodies to navigate their habitats, producing extra stress on the joints of the legs. While the severity (and presumed discomfort) in the wing arthritis might be enough evidence to make our decision for us, the addition of loss of mobility in the legs gives us additional data to help us make the compassionate choice.

A male, 15-year-old Northern Harrier (*Circus hudsonius*) on our team, named Deva, developed knee arthritis very dramatically. His original injury was a partial wing-tip amputation of the right wing. Over his years of service as an ambassador, he gradually lost most mobility in the right wing because he had fewer primary feathers to pull the joints and the wing could not open. Because he could not extend that wing fully the result was loss of function in the wing joints. Deva was trained to voluntarily scale daily for us. During one such session, an astute trainer noticed and then recorded video of Deva as he made his way to the scale. He was walking very stilted, and radiographs showed that he had developed significant arthritis in not one but both knees. After an attempt to treat the joint pain and follow-up video evidence



Northern Harrier, Deva



Deva right wing tip amputation and joint disease in knees

demonstrated no change in his stilted and presumed painful walking, the decision was made to compassionately euthanize. The disability that Deva had is one that in the future would disqualify a bird from joining our team due to the progressive loss of function seen in partial wing amputations.

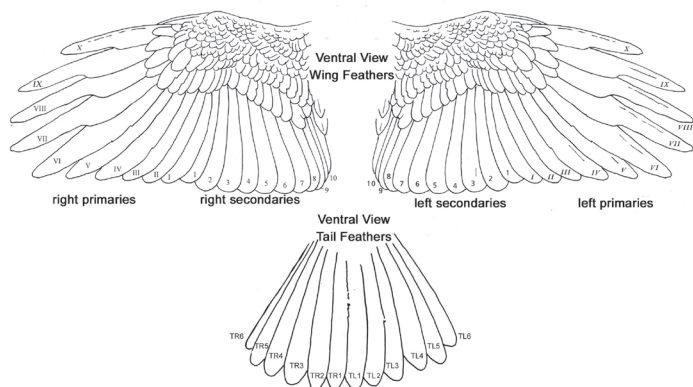
Feather monitoring is also an important tool for us. While we know that some feather damage may be inevitable even to flighted birds in human care, our goal is to see feather perfect individuals in our collection. We will make corrections to perching, what we are asking the raptor to do during training sessions, and any other changes to the environment that will help preserve the feathers and prevent breakage. However, if the feather damage is due to the raptor's disability, we take that as a warning sign of possible pain and distress for the individual. What we have seen in some legacy birds is broken primary and secondary feathers on the injured wing, damage to the structure of the feath-

ers (such as the vane or the barbules) because the individual cannot reach to preen the feathers, and/or broken blood feathers.

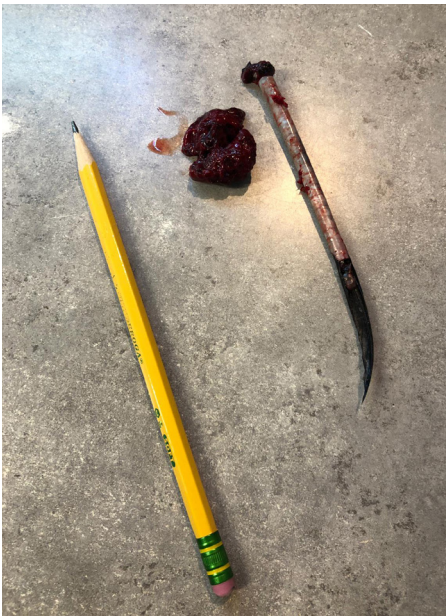
A feather chart (see picture below) where a staff member can note any damage to feathers such as breakage, fraying, or any other damage from improper preening during a thorough physical exam can act as a tool to track changes. Photos are taken to document and assist in our data collection. During routine husbandry, staff and volunteers are also asked to bring in any broken or unusual feathers they find to senior staff so these feathers can be noted in the medical chart of all ambassadors in our care. By passively collecting feathers, we are still gathering data throughout the year without restraining birds on a regular basis for information.

Feather damage and breakage was one of the main reasons one legacy raptor was compassionately euthanized this year. Amazon was a 27-year-old female Golden Eagle (*Aquila chrysaetos*) who came into care as a nestling eagle with two broken wings. The right wing healed rather well but was still not 100% functional and her left wing was severely compromised due to a necrotic section having to be removed to facilitate healing. Amazon always had difficulty maintaining perfect feather condition on her left wing, however, over the last few years her joint disease progressed rapidly to the point that she was not able to extend the left wing (the wing had lost almost all range of motion) and the wing had become an immobile burden to her overall movement. Her ability to preen that wing was severely compromised.

This case upon my own review seems like an easy decision to make





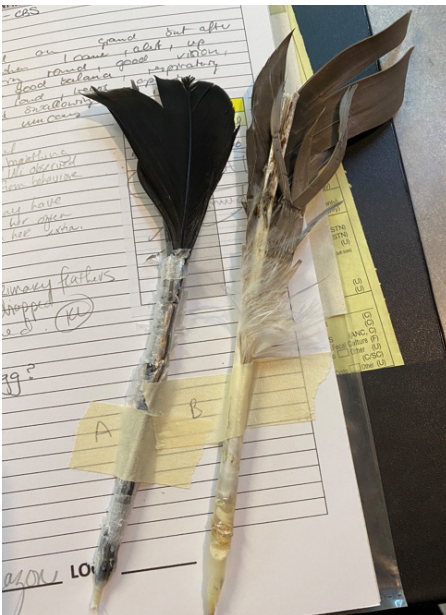


*Above: Golden Eagle, Amazon, on her nest.*

*Left top: Amazon broken blood feather and clot.*

*Left middle: Amazon broken feathers collected.*

*Left bottom: Amazon feather damage unable to preen*



for compassionate euthanasia, however I put off making the final call for what I believe in retrospect was too long because of my emotional attachment to this raptor. I could argue that she was “perfectly healthy” and living a “good life.” She played with toys, she built the silliest two stick nests in which to lay her eggs (which she kicked off the platform after two days), she ran over to participate in scale behavior, and actively patrolled her territory for invaders – always letting staff know if a wild raptor was in the neighborhood. She was big, beautiful, and a guest favorite.

This year after a dreadful fall from a perch and another broken blood feather, I reached out for an outside option. A trusted colleague, when presented with the case history and knowing my background on legacy raptor research asked me point blank what I would recommend to another facility with a similar case. I would - most likely with this information - recommend compassionate euthanasia. My connection with Amazon did not allow me to clearly see what was in front of me. Fortunately, our staff had already been having open and honest conversations on what was best for Amazon, about our concerns for her welfare, and when we thought it would be time to let her go. Those earlier

conversations and the trust our team had in one another allowed us to move forward on our difficult decision.

I use the word “difficult” with some nuance here. It is not a difficult decision when an animal is suffering, and you have the power to end that suffering. The decision to let go of a friend and a valued member of your team is difficult! As caretakers, we need to value the bird’s well-being over our own desires to keep them with us. And this re-framing of the word difficult needs to be acknowledged and recognized when we are making these decisions.

Another decision our team had to make was for a young (8-year-old) Peregrine Falcon (*Falco peregrinus*) named Pip. This raptor had a left, mid-shaft humerus fracture which healed but, after assessment from a falconer, he was deemed non-releasable. During a training session in late 2020, I noticed something under his left wing and, since he was trained for touch, Pip let me pull that wing open. It appeared that his humerus was poking into his skin! Radiographs showed that what we thought was a healed fracture was a non-union and the humerus had broken again. This was quite a shock to staff since





*Amazon left wing 2019*



*Amazon left wing 2022 showing almost no joint function*

we had been doing yearly radiographs (he last was in 2019), he was still enthusiastically participating in training sessions, eating well, and independently active (he was often observed on a perch rowing his wings). After a desperate surgical attempt at repair, Pip was compassionately euthanized in 2021.

This story is particularly painful for our team. Pip joined our team just as we were developing our new selection criteria and just fell within our new criteria at the time. He was young. He was an enthusiastic participant in training sessions. He seemed very "happy." In his short time with us, he taught us a lot. Cooperative behavior, feather condition, and ability to navigate one's habitat do not always give you indication

on what potentially painful condition a bird is dealing with day-in and day-out. Only radiographs and a more thorough examination showed us what Pip was suffering from and that compassionate euthanasia was the kindest decision for this valuable member of our team.

Caring for legacy birds can be the most challenging task for any caretaker. The inability to know how much pain a bird is suffering, or if the treatment plans in place are helping the individual and the continuous monitoring can be exhausting. Additionally, human emotions add another layer of complexity to the situation. Starting open dialogues with colleagues about your welfare concerns, collecting data, and reaching out to mentors for advice can help make a very difficult process easier.

*Peregrine Falcon, Pip*



*Pip 2021 before surgery left wing rebreak*

