POSTER 111
REPORT OF A SERRATIA MARCESCENS RECURRENT INFECTION IN THE ENDANGERED VINACEOUS-BREASTED PARROT (AMAZONA VINACEA) WITH POOR RESPONSE TO SURGERY AND ANTIBIOTIC THERAPY
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An Amazona vinacea was presented with a history of recurrent cutaneous head abscess and no signs of respiratory infection at the Wildlife Rehabilitation Center in Florianópolis, Santa Catarina, Brazil. After hospitalization, the animal was submitted to surgical drainage of the abscess. A caseous mass of 2 cm diameter was removed and antibiotic therapy with enrofloxacin 15mg/kg BID was administered, as well as daily wound care, draining any fluid or caseous left. Swabs of the abscess were collected for microbiologic exams yielding pure cultures of a pigmented strain of Serratia marcescens. This strain was susceptible to cloranfenicol, florfenicol, gentamicin, amicacin, tobramicin, ceftriaxona, cefotaxim, ciprofloxacin and enrofloxacin and resistant to cephalotin, tetraciclin, ampicilin, amoxicillin-clavulanic acid, sulfita-trimethoprim and cefoxitin. Enrofloxacin treatment did not show any effect controlling the infection and a new surgery was performed to drain the recurrent abscess three weeks after the first surgical procedure. Enrofloxacin was substituted by cloranfenicol and gentamicin and once more no control of the infection was obtained. The bird started showing respiratory signs after 2 months of treatment and presented severe dispneia. Considering the very poor quality of life of the bird and the risk of infection to other birds, euthanasia was performed. Necropsy findings demonstrated diffuse hyperemia of both right and left lungs, severe inflammation and presence of infectious caseous and whitish dots in abdominal and thoracic airsacs. The source of the infection could not be ascertained, but a possible contamination due to human handling could be involved because infection seemed to originate at the household were this endangered animal was being kept illegally as a pet.