

Conditions for Rejection of Poultry at Post Mortem

Infectious Joint Lesions

Post Mortem Disposition



Figure 1 (Left): A swollen joint that has been excised to show purulent exudates.

Figure 2 (right): Detail of the leg on incision. Note the yellowish flakes of pus.



Figure 3 (left): Joint lesion in a duck. Note how it only affects one joint which will suggest it to be a localised lesion.

FSS Responsibilities

Post mortem disposition

Partial rejection: affected parts can be trimmed at the next healthy joint and the rest of the carcass passed as fit.

Total rejection: if there are signs of systemic infection.

Average rejection levels in GB

Poultry: 0.028%

Recording of the condition

The condition must be recorded on the "Joint Lesions" entry in the Post Mortem Inspection section of OWS. It must be indicated clearly whether there has been total condemnation of the carcass or partial condemnation where only some parts were rejected.

Further Information

Definition

Arthritis: inflammation of a joint or joints.

Tenosynovitis: inflammation of a tendon, usually the tendon complex of the hock joint.

Remarks

Arthritis usually affects one of the joints only. On rare occasions it can affect a number of birds in the same batch where it is important the OV carries out a post mortem to arrive at a diagnosis. It can sometimes be associated with cellulitis (tracking subcutaneous infection) of the abdomen. In these cases it is likely there is a systemic infection. The condition has a significantly higher prevalence in ducks. Incision of affected areas exposes inflamed tissues with fibrinous exudate or pus. Most commonly affected are the tendons and sheaths associated with the hock joints.

Causes

- Bacterial infection (most common)
- Reoviruses
- *Mycoplasma synoviae*

Comments from Inspection Teams

Operators of high throughput slaughterhouses may choose to reject the entire carcasses rather than trim affected parts because of inability of machinery to eviscerate one legged birds or due to high labour costs associated with manual trimming and evisceration. However the FBO should be allowed to develop a system that is to the satisfaction of the OV to trim the affected areas.

In a high throughput slaughterhouse it should be possible in cases of uncomplicated joint lesions to eviscerate the carcass as normal and remove the joint on the marked carcass at a later stage, further down the line.

What is the data on rejects used for?

The data may be used as an indicator of leg health but in general this is much easier to detect on farm where the incidence and level of the problem can be measured more accurately.

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