

Bird Carnage at an Indian Kite Festival, Ahmadabad

By Johanna Storm IZVG on behalf of Wildlife Vets International



WORK CARRIED OUT FOR THE JIVDAYA CHARITABLE TRUST DURING UTTRAYAN FESTIVAL JANUARY 13TH TO 21ST 2013



Johanna with 9.3kg of pelican

There's a pelican lying in the operating theatre on the table in front of me and it is absolutely huge! It weighs over 9 kg and is just one of the many thousands of birds that get injured every year during the Hindu festivals of Uttarayan and Makar Sankranti.

For centuries these festivals have gone hand in hand with the act of flying colourful kites in the Western State of Gujarat. Uttarayan itself is an important festival in the Hindu calendar - it falls around the 14th of January and marks the day that the sun starts travelling northwards again,

marking the decline of winter and heralding the arrival of spring. In importance we could compare it to our Christmas in the West - family travels in from wherever they got scattered to and celebrates together; special, delicious food is cooked and eaten, the best clothes are worn and, alas, kites are flown! This activity is so popular that the towns of Gujarat fill up with kite makers and vendors in the weeks beforehand.

The main difference to the way we fly kites in the West and the way that they are traditionally flown here in Gujarat, however, lies in the fact that here it is a highly competitive sport and that the entire string gets covered in a cutting surface. To achieve this, the thin cotton string gets manually covered in "manja", gelatinous, brightly coloured "goo" that contains finely ground glass powder. In recent years, stronger nylon with improved cutting properties has become available, imported from China - this one being more expensive but also more durable and sadly, for the birds, it is very strong and never tears.

The skill of the competitor lies in bringing his string to lie on top of the string of his opponent's kite and to give it a quick hard pull downwards, while the opponent will then try and give his string some slack at that very moment, to avoid his own kite being cut out of the sky. Sadly, no one seems to have briefed the bird population flying around Gujarat that their skies will be criss-crossed by thin cutting strings everywhere for weeks to come. The result is a yearly avian bloodbath of epic proportions (~2,000 known casualties) that lasts from a few weeks before Uttarayan - as competitors hone their skills and practice maneuvers - up to Mid-February, when the remnants of strings fallen from the sky still covers trees or lies entangled in branches and bushes, or hangs from wires and electric poles still causes injuries.

The bloodbath, however is not restricted exclusively to birds: when a kite gets cut out of the sky, then the string attached to it falls to the ground. If the kite had been hovering high in the sky, then the length of the string falling down can be quite considerable. In a highly populated area this string is often responsible for falling in front of bike or motorbike

drivers, who get their throats cut and get badly injured or even, tragically, die. Others die after falling from roofs while flying their kites.

I am a veterinary surgeon working for International Zoo Veterinary Group (IZVG) and am usually stationed in West Yorkshire, but for ten days I will be working in India on behalf of Wildlife Vets International (WVI) for the Jivdaya Charitable Trust (JCT), based in the city of Ahmedabad, India.



Removing fluorescent pink string from the wing of a Demoiselle crane

We have just painstakingly removed a long segment of fluorescent pink string from the pelican's left wing, where it had lain imbedded within a patch of bloodstained plumage. It has not only cut through the protective wing plumage, the propatagial extensor tendon and all other soft tissue in front of the bird's wing bones, but by the profuse bleeding that is obvious on the plumage, the string has also severed larger blood vessels and become ensnared in the distal wing bone. There we discovered it had

cleanly and perpendicularly cut a 1mm wide hole through three quarters of the radial bone and then presumably torn and allowed the "snared" pelican to finally escape.

Many birds are less lucky and, instead of escaping with repairable injuries, they have an entire wing chopped off by the kite string, which acts not much differently from a cheese cutter. Others break wings while descending and die, or they become amputees, some even double amputees. Thankfully, this pelican's radius is still stable and, as it is naturally reinforced by its "twin wing bone", the ulna. We will not need to do anything apart from suturing the soft tissue, reuniting severed tendons, muscles and skin once again. The wound appears to be fairly recent and if there are no complications such as secondary infection, this young pelican should recover uneventfully and be able to be returned to its natural environment in a couple of weeks.

While I gently rinse the wound area with warmed saline solution, handed to me by Papu our young OT Assistant, and remove clotted blood and imbedded dirt, my Indian colleague Dr Vipul Kavechiya connects an intra-venous catheter in the pelican's metatarsal vein and starts a drip of warmed Ringer's Lactate to rehydrate our patient.



Black kite under anaesthetic with a lacerated wing

Meanwhile, on the table next to us, Dr Shashikant Jadhav is operating on a Black kite's lacerated wing. Usha, a university employee who every year uses up her holiday time to volunteer in the operating theatre (OT) during Uttarayan, draws up injections of the drugs we specify and supplies us with fresh hot water bottles warmed up to 40 °C, which are placed on the stainless steel operating table. They are then covered in thick

toweling mats and the pelican carefully placed onto its warm bed in lateral recumbence.

Usha seems to have eyes in the back of her head, as, despite attending to our surgical whims, she still manages to spot any animal handler, helper or surgeon entering the OT who forgets to discard his shoes outside the room, or who steps into the OT avoiding the obligatory naked-foot-bath before stepping into operating flip-flops. As there are three surgical teams performing three parallel operations at once, the conversation levels can at times become a little animated. When the decibels cross the "Usha line", however, she releases admonishments like semiautomatic gunfire. It has a rejuvenating effect: I feel like 5 again! Papu just grins sweetly.

Were it not for Usha and her brilliant organisational skills, our time would not be so well employed, she directs us all and makes sure no surgeon's time gets wasted, thus making sure we get through our workload efficiently, working on the worst injured patients first - Usha is the conductor of this surgical philharmonic - and brilliant at it!

There are three operating tables in this OT, but still only two have an anaesthetic gas vaporiser circuit, animals operated on at the third table have to receive an injectable anaesthetic instead of isoflurane gas. As this entire operation is financed from hard-raised donations, there are no unnecessary luxuries such as extravagant equipment or fancy supplies of disposables and drugs. Every syringe and needle or swab are accounted for - inventory of supplies is kept in a very conscientious way. All larger items, such as the anaesthetic trolley or the vehicles inside the compound's yard bare the inscription of whose legacy made their acquisition possible.



A shrine to Ganesh oversees the autoclave

Everything I need to do the surgical job to save this pelican's wing is available and supplied with professionalism and care. A small adjacent room houses a hospital-sized autoclave in which our kits, drapes and instruments are all sterilised, after being carefully cleaned in between uses. The autoclave looks like a gleaming, enormous version of my mother's old pressure cooker and seems to be on the go non-stop. It takes me a few days of going in and out of the autoclave room choosing various orthopaedic equipment to spot a tiny miniature shrine to the elephant-headed God Ganesh which has been erected on the electrical socket box that the autoclave is plugged into, complete with flower offerings and red powder and it makes me smile...

The JCT was founded by members devout to Jainism, an Indian religion that prescribes a path of non-violence towards all living beings. It is their faith that made them put their own funds first towards this charity's aims of helping animals, later starting fund raising and slowly growing into what it is today. Opinions and attitudes towards religion and faith may be different in the West, but here, in this small compound in Ahmedabad, I am witness to a powerful combination of religion and conservation at work with one common aim, to save birds. I have to admit that it is quite a powerful combination! Every employee and most volunteers here are devout Hindus or Jains, but everyone's only aim at the moment is to help these birds while giving up their time and effort with love - it is difficult to argue with this, no matter your level of religious cynicism.



Debriding the wound on the leading edge of the pelican's wing

Usha hands us gloves, sterilized gauze and instruments, so Vipul and I begin the labourious task of carefully removing the surrounding feathers from the extensive wound without tearing any of the pelican's skin. It is when you try and remove the plentiful and thickly grouped, tiny feathers on the wing ridge overlying the main tendon that you suddenly realise how well designed birds really are. This is part of the

natural body margin, situated to the left and the right of the head, so, anatomically, it is the place most likely to hit or brush a branch or other obstacle when the bird is in mid-flight and likely to collide with anything; i.e. when a clumsy chick learns to fly and lands not-so-safely, or when an experienced adult lands amidst thorny bushes or against unpredictable gusts of wind. These feathers are so incredibly dense at the wing edge that it would be almost impossible for a foreign body or a string or anything natural to penetrate the plumage and its underlying tissue - were it not for the fact that Gujarati kite strings are coated in glass!

Vipul and I disinfect the skin of the operation site, then carefully disinfect our hands, change into sterile gloves and, with fresh sterile instrument kits and drapes, proceed to surgically debride the wound and repair first the large main propatagial tendon, then the severed muscles and at last, the skin wound. While an assistant extends and holds the wing up high for us, so that we can both work at the same time from different wing sides, I suture the ventral aspect while Vipul works on the dorsal wing side. We jokingly pretend this is a race between the sexes, but of course we put professionalism first. (Well, I would have to say that! But in case anyone wondered, we came first, Ladies!)

The pelican is intubated and kept anaesthetised with Isoflurane gas, being reliably ventilated with intermittent positive pressure ventilation supplied by a Vetronics ventilator (Thank you, Keith!!!!). We have attached the pulsoxymeter probe to a larger vessel in the pelicans pouch and our volunteers closely monitor and record the patient's vital

parameters during the procedure, others bringing freshly warmed hot water bottles as needed and at regular intervals while we work. As always we are directed and supported by Usha and Papu.

This specific pelican had been brought to us by truck from a large distance away, as Ahmedabad lies about a 4 hour trip by car inland from the Indian coastline. Its arrival had been announced by a veterinary surgeon who administered emergency treatment near the coast, traveling with the bird and bringing it himself to the main entrance of the compound and later watching us operating in the OT.

I think part of the secret of this charity's success lies in the openness they display towards the public that supports them. During my entire stay there were



individuals and families and official figures walking through the compound and being introduced to workers, and, when possible, shown enclosures and patients. A stunningly beautiful Indian lady in a striking red sari walks around with a young Hanuman langur holding on to her hair, which is firmly fastened in a tight bun on her head - she is in charge of fostering orphaned monkeys and, to the delight of the visiting children, the young monkey climbs down and occasionally will hold someone else's hand or climb down and tenderly play with a very young puppy, before quickly climbing up his foster mum's back and clinging to her bun and its safety once again. Being allowed to see the patients and seeing how well the animals are cared for, shows people what their donations are actually used for and how positive their investment is.



The OT is temporarily housed in part of a huge, old cattle-holding compound, in which abandoned cattle roaming the streets of Ahmedabad are kept in. It is rented by the Jivdaya Charitable Trust specifically to house the birds rescued during Uttarayan, but it also houses any animal brought in by the general public or rescued by the mobile veterinary vans in need of veterinary help, be it an injured fruitbat, an orphaned monkey, a puppy suspected of parvovirus, a young Nilgai or Indian antelope, wandering onto a busy road and unintentionally getting involved in a traffic collision.

The compound is only 50m away from a busy main road in the city centre, but you could be forgiven for thinking that you are in the middle of nowhere, it is so tranquil. If you walk out of our compound you see cattle happily chewing the cud in well-kept enclosures nearby. Large trees harbour cheeky striped squirrels. There's an old tall clock tower



nearby and all the roof area covering our one-story building, which is built around two large yards, is enclosed by old stone railings. A 20m by 10m aviary houses a pond and several medium-sized aviaries in which cranes, pelicans and highly Endangered white rumped vultures (*Gyps bengalensis*) are kept, amongst other avian species.

Ironically, a load of kids, waving and smiling happily at me, are flying their kites from our roof today and there's a definite party atmosphere. It's Monday, the main Uttarayan holiday, so all schools are shut. This morning I saw two families of small grey Hanuman langurs (a monkey) running along the roof railings and sitting sunbathing whilst chewing leaves they picked from an adjacent tree. A Black kite was perching amongst three old, colourful paper kites that are stuck in its branches.

In the evening, when it starts getting dark, the kite flyers don't pack up and go home - instead they attach a small paper balloon with a burning candle within to the string of their kites, placing it a short distance below the kite itself, so that they can see where their illuminated kite is in the dark. They look like tiny Chinese lanterns dancing amongst the black, starry sky, dancing parallel in the gentle gusts of wind - their movement reminds me of a school of cuttlefish. The half moon behind the lanterns makes them look quite magical, you could be forgiven for almost forgetting the avian toll that has to be paid for this strange beauty.

During the week of Uttarayan, around 150 volunteers and 40 staff employed by the Jivdaya Charitable Trust deal efficiently with all incoming casualties, which are mostly but not exclusively avian. The whole operation seems to me like a well-choreographed exercise that has been planned with military precision. Everyone knows exactly where to be and what to do, not a single person's skills or time are ever wasted. Every area has been highlighted and labelled with large signs in English and Gujarati: even an outdoor kitchen has been set up where volunteers cook for and feed over 150 people three times daily with freshly cooked, delicious, vegetarian Gujarati cuisine.



Bag of donated socks – putting a sock on their head immediately calms them down.

After short but necessary food and tea breaks all workers return to their chores. Birds are individually recorded at the registration desk, weighed, tagged and boxed. The casualties are mostly wild birds which are not used to any human contact at all. To avoid excessive handling stress they are immediately fitted with a sock on their heads, which calms them down. There are big sacks full of freshly-washed donated socks at hand for them (I will never again look at single socks emerging

from my washing machine with the same eyes!).

The new admissions are then immediately taken to the Triage Table, where a vet and his assistants examine the bird, assess the injuries and stabilises the patient. After being boxed up with his record sheet, the bird is taken to one of the operating theatres where it will await its turn, in a warm, quiet environment.



At the Triage Table, vets assess the injuries, stabilise the patients and put them in a colourful plastic box with their record sheet.

The boxes are colourful plastic shopping baskets that open from the top, with a double handle and a snapping lid. They are covered in 3cm “air-vents” all over their plastic walls, they are the type of basket designed for going shopping at the market and ideal to put your fruit and veg in, but with a lid, so no pickpockets can get at your purse. And they happen to also be the perfect design for a provisional bird transport cage! With their socks loosely around their heads, the various bird species seem to just quietly sit in these boxes. Larger birds, such as pelicans, vultures and cranes, are expertly carried to and fro by a handler, neatly tucked under one arm, the other arm securing the head to avoid eye injuries to the handler.

Vipul and I have just finished operating on our patient. The suture lines look great, and gentle stretching of the wing confirms it is as good as new. We have dressed the wound and given the pelican a “figure-of-8-bandage” to avoid any unwanted flapping during the recovery period that could lead to tearing apart of the newly reunited soft tissue margins. The pelican has received analgesia, fluids and antibiotic treatment, his drip has been



9.3kg of pelican bandaged up with vanilla smelling Wrapz donated by Millpledge.

disconnected, his endotracheal tube removed and his windpipe cleared of any phlegm. He is now peacefully breathing on his own and recovering on pure oxygen administered by a mask. When he is totally conscious, he will be moved to the ICU room, where he will be monitored in a safe, warm, semi-dark environment. Once he gets too lively and, if he is fully coordinated, he will be moved in with the other pelicans into their heated aviary.

Tomorrow he will receive fresh fish from the market and if he does not recognise it as food, because as a wild bird he is not used to eating dead fish, then we will restrain him and force-feed him - which in a pelican really only involves holding his beak open upwards, dropping fish into his pouch and watching it go down, occasionally gently manipulating his throat to encourage him to swallow the fish. Once he is eating independently he will be monitored, his bandage changed on alternate days and finally removed when deemed appropriate. Vipul and I think that he will make a full recovery and will successfully return to the wild. He is one of the lucky ones!



At admission birds are generally separated strictly into two groups which also end up being housed in two entirely separate areas of the compound. It is very common during Uttarayan for injured pigeons to be brought in extremely large numbers. Pigeons are separated from all other bird species because they naturally carry diseases that other birds don't. Pigeons can carry and potentially transmit these diseases to wild birds intended for re-release amongst a population of wild birds that is naturally free of this disease, so it wouldn't be good practice to allow contact between pigeons and other wild birds. The obvious disease to think of immediately would be Newcastle Disease, but there are numerous others - hence the strict "Pigeon Apartheid". There is a quarantine facility available for pigeons suspected of any infectious disease. After being operated upon, all patients are carried into their respective ICUs and monitored closely by volunteers. Again, there is an ICU for pigeons and one for "non-pigeons".

On Monday 14th, Uttarayan Day, we received the greatest influx of daily casualties and I personally finished operating on my last patient some time after midnight. By the time I finished re-examining patients I had previously operated on that were still in ICU and administered rehydration it was 2:30 a.m. But I know for a fact that the volunteers monitoring patients in ICU practically worked until the early hours of the morning and that Vipul and Shashikant went to bed far later than me. The work is relentless.

For me the most inspiring, moving and memorable part of my stay here were the people I met. Everyone involved was smiling and helpful, full of motivation and energy and I simply cannot shake off the thought that we would not in a million years find such an event taking place in this way in England. These people started early, really early, and they didn't finish until way after midnight. There was no question ever of employment legality, no one with a long face or skiving or sitting around smoking or saying "this is not in my job description". It was no problem letting a volunteer carry a large pelican or a crane about without having to consider the Health & Safety implications of their "lethal" beaks and the potential injury

they could inflict, as well as the legalities thereof. It was great to feel so free and again be ruled by simple common sense and by what was the right thing to do and by nothing else.

The work ethos here in India is contagious, I'm sure of it! Everyone who I encountered that was involved in this massive rescue operation, from the founding JCT Trustees, to the various vets, the many animal handlers, the young students studying the vultures, the kitchen staff preparing food for the animals, the men cleaning and re-sterilising veterinary equipment, to the drivers carrying out rescue operations and the young girls sitting in the sun outside the dispensary cutting squares out of gauze roll that they then skillfully folded into surgical swabs, ready to be packed into the autoclave and sterilised for us to use in the OT - all I ever encountered were beaming smiles and helpfulness. It was like temporarily living on a different planet and so nice to experience!



Adult black winged ibis undergoes surgery for a wing severed by cutting strings from kites flown during the International Kite Festival,

There simply was a gargantuan task to be accomplished and everyone did their little bit with immense goodwill and for as long as it took until it was finished. The minority of the workers are employed and salaried, but most of the volunteers just came to help the injured birds, unpaid and in their own free time, regardless of whether they had family to look after or other tasks in their lives that needed to be accomplished. I had many different individual helpers holding my anaesthetised birds while I repaired their wings: to mind come an eminent Indian scientist specialising in crane migration, a famous Indian wildlife photographer, a young girl running an eco-tour venture with her boyfriend, who himself helped building the "furniture" in the kite aviaries of Station 2 and looked after the recuperating Black kites in ICU, while she worked relentlessly in the Operating Theatre. A software specialist, a housewife, a student - there were far too many to enumerate, but it was a privilege to meet each one of them

and I thought they were all really special. Their unwavering commitment and selflessness shone through our conversations, without exception they had all come in their own holiday time and worked very hard to help out, simply out of the goodness of their heart and most of them not for the first time, having done so for several years in a row.

I did not carry out any work within "the pigeon wing" at all, there were sufficient colleagues dealing with our head-bobbing feathered friends, two of which had surprisingly flown in all the way from Nepal to help out! I did visit "Station 2", where recovering kites were transported to after post-surgical recuperation. They were housed in three larger quiet and visually screened-off aviaries in larger groups of about 30 birds, before being released into the wild within a safe conservation area. The aviaries were built by the Indian Forestry Commission with materials and on land owned by them. I met their "Big Boss" on the main holiday on Monday. He seemed a really nice man, very proud of the cooperation and thrilled at the good work done. It was striking, how many Indian NGOs worked together to achieve the goal of helping these casualties with not a hint of competitive zeal. Most of the

logistics of where animals could be brought in and who would transport them was organised by a group of NGOs far ahead by sitting together and working things out. The Jivdaya Trust started recruiting and training volunteers months before the festival.

Most of the surgical work carried out this week by me was on the species with the largest number of casualties, which seemed to be the ubiquitous Black kites. They were absolutely everywhere you looked and I know at least one ornithologist who would have gotten very excited at the view out of my bedroom window. You only needed to raise your gaze while walking across the compound's yards to see Black kites flying low all over or gliding on the thermoclines high up in the sky, or perching on the trees nearby at all times of day and even deep into the night, when the light pollution allowed them to carry on with their "urban hooligan ways".

Red-naped ibis seemed to perch in droves on the street lighting posts of the busy central Ahmedabad roads as if set up there by an exterior decorator. Several Endangered White-rumped vultures (every individual counts), Egyptian vulture, Stanley cranes, Demoiselle cranes, Indian ringneck parakeets, egrets, Peregrine falcon, shikras, Night heron, a few Barn owls, Bengal eagle owls, moorhen and peacocks all made their way through the OT.

All the birds' injuries were very similar to one another: they had all flown into the strings with the front edge of their wing, thus lacerating the soft tissue up to the bone or even through the bone. They only varied in exact site of injury, severity with which the string had cut them and level of blood loss. Some had injured legs while coming down after injuring their wings. Many injuries were entirely repairable, but some patients needed a wing amputation and one egret I remember became a double amputee. I initially found the policy of never considering euthanasia on religious grounds hard to live with. But humans are resilient and they adapt. Even me.

A small percentage of the birds I operated on died as a consequence of their severe injuries and despite our most professional and dedicated work in stopping them doing so.



Black kites in Intensive Care Unit (ICU), with carefully rolled clothes round them and under their chins. Meticulous notes follow each patient. Credit WVI

Some recovered to be taken to ICU and then didn't make it through that period, some died a short while after that. Kites were housed for six days post-operatively and closely monitored, then transferred to Station 2 before release. Crippled birds were found homes for in sanctuaries and Bird Gardens. The statistic figures for this year will not be ready for

some time, as birds still arrive well into mid-February each year with fresh injuries, but when I left around 2000 birds had been dealt with! Going by the statistics I was given the year before last, 67% of presented birds were returned into the wild. This figure is very respectable indeed, considering the odds and the injuries that I saw.

My visit on behalf of WVI was meant to give assistance, but its main reason was to look at the big picture, spot weaknesses in the operation and suggest improvements to the way things are handled, to hopefully increase the percentage of birds that are successfully returned to the wild. There are some suggestions I have made, especially regarding post-operative care that will hopefully help to achieve that purpose. I met some wonderful colleagues and taught them the odd trick, but I also learned from them, as learning always is a dynamic, two-way street.

My experience in India was full of wonder and totally unique to me. Perhaps there is something addictive about repairing injured birds, I can only say that I would absolutely



love to return next year, Ganesh permitting!

If you would like to donate to WVI to enable me to assist further donate online here <http://www.justgiving.com/wvi/donate> and state the funds are for Johanna, Text KITE01 £5 to 70070 or send us a cheque.

.....

Acknowledgements

I would like to take this opportunity to give my heartfelt thanks to the following individuals, companies and charities for making my trip possible by donating money, time, much appreciated equipment, as well as for donating prizes for the raffle, which helped me raise substantial funds. No Alphabet at hand, so there's no particular order and there are no favourites! (Well, I would have to say that!)

- To all the children in Year 6 at **Westbourne Primary School** and their teacher, Robin Cusdin, for raising the sum necessary to acquire and donate a copy of the BSAVA "Manual of Raptors, Pigeons and Passerines" to the veterinary surgeons working for JCT in Ahmedabad, India.
- To **Etihad Airways** for the generous donation of a return flight Manchester-Ahmedabad and for the generous donation of considerable excess baggage allowance to transport donated medical supplies with.
- To the Trustees of the **Jean Sainsbury Animal Welfare Fund** for awarding us a grant
- To wonderful Keith Simpson at **Vetronics Services Ltd**: I've said it before and I say it again: I don't know what I would do without my Vetronics ventilator! Thank you so very much for being a wonderful human being and for generously donating a SAV03 ventilator to my Indian colleagues. Had the Knights of the Round Table ever found the Holy Grail and handed it over to King Arthur, they would all have been far less happy and excited than the Trustees and vets at JCT were when I handed over your ventilator! It was much used while I was there and it will continue to save many lives for many years to come. Oh, and it proved brilliant on an anaesthetised pelican weighing 9.3 kg - the largest bird I've ever used it on! To my colleagues reading this: have you got one? NO?! Quick, go out and buy one!



- To **Millpledge**: Thank you for the generous donation of miles and miles and miles of your wonderful WRAPZ bandage material in different sizes and colours. My Indian colleagues were extremely excited at the jazzy designs and seemed to be particularly taken by the vanilla scent, always inhaling deeply at every newly opened roll and smiling happily before starting to unroll it to apply the next figure of 8 bandage... By the way, one of them asked if you could produce one with curry scent. I said that I didn't think so but that I would pass on the request...
- To Linda Capewell at **Veterinary Instrumentation**: Thank you for your boundless generosity and for donating SO MUCH surgical equipment! Veterinary Instrumentation far exceeded any

expectations I could ever have had in my wildest dreams and everything, every screw and every single arthrodesis wire and blob of ESF putty was so very humbly and

gratefully received in India. Everything you donated will be scrupulously accounted for and put to its best possible use to save animals. Thank you!

- To **Henry Schein Animal Health**: JCT and all the veterinary department thought it was Christmas when I started emptying boxes, thank you so much! You will be happy to hear that every suture material gets re-sterilised and re-used, down to the last centimetre of surgical thread, nothing goes to waste! Thank you for your generosity! The masks were so desperately needed and brilliant
- To all my **clients** at the **IZVG Avian and Exotic Pet Clinic**: thank you for your amazing, unwavering support throughout the past year in helping me raise enough money to make this trip happen! Every penny you gave was put to excellent use.
- To **Mrs Thompson**: thank you for your legacy!
- To **Karen Paige**: you're a great friend but an even better fundraiser!
- To **Diane O'Connor**: thank you so much for your relentless support!
- To all the partners and all the wonderful staff at **IZVG** and **WVI**: Thank you for letting me go and for holding down the fort while I was away! I worked a lot but it still felt like a proper holiday in a country where common sense still reigns! I never once had to consider an off-label drug consent form, or whether the student that I had just asked to carry a Stanley crane back into its aviary would swiftly have his eye poked out because I hadn't made a risk assessment while wearing a high visibility vest and being aware of the location of the next emergency exit. AND it was sunny and blue-skied while you were all walking around in the snow. What can I say? Nanananaaaaana!



**WILDLIFE VETS
INTERNATIONAL**

Station House

Parkwood St, Keighley

West Yorkshire, BD21 4NQ

For further information please contact:

Ms Olivia Walter

Development Manager

info@wildlifevetsinternational.org

01535 661298