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SWINE CASTRATION: A PRACTICAL GUIDE FOR VETERINARIANS AND FARMERS

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INTRODUCTION

Castration in swine is a common surgical procedure practiced globally for both welfare and economic reasons. It involves the removal of the testes to prevent undesirable traits and improve management. This short communication provides a clear overview of the indications, ideal age, preparation, anesthesia, surgical steps, postoperative care, and common complications of swine castration, with simplified guidelines for both veterinary students and farmers.

INDICATIONS OF SWINE CASTRATION

The primary reasons for castrating pigs are:

- 1. **Boar taint prevention:** An unpleasant odor and taste in pork from intact males due to compounds like androstenone and skatole.
- 2. Improved meat quality: Castrated pigs tend to have better fat deposition and less aggressive behavior, improving meat tenderness and marbling.
- 3. Behavioral management: Castration reduces aggressive and sexual behaviors, making handling safer for farmers and pigs alike.
- Prevent unwanted breeding: Especially important when mixed-gender rearing systems are in place.
- 5. **Better feed conversion efficiency**: Although intact males may grow slightly faster, castrated males often convert feed more efficiently into quality meat due to calmer demeanor and reduced stress.

IDEAL AGE FOR CASTRATION

- Piglets between 3 to 14 days of age are most ideal.
- At this age:
 - o Testes are palpable and easily accessible.
 - The risk of bleeding and complications is minimal.

- The stress and pain response is lower compared to older pigs.
- Late castration (above 21 days) increases stress, bleeding, surgical time, and risk of complications.

PREOPERATIVE PREPARATION For Piglets:

- Ensure the piglet is healthy, active, and afebrile.
- Avoid castration during extreme weather or when pigs are under stress or illness.
- Fasting is not mandatory for young piglets due to their high metabolic rate.

Hygiene:

- Restrain piglet properly using a castration cradle or by holding hind legs with head down.
- Clean the scrotal area using antiseptic solution (e.g., povidone-iodine).
- Sterilize instruments such as scalpel blades, emasculator (if used), and forceps.

ANESTHESIA AND ANALGESIA

Castration is painful, and pain management is both an ethical and legal requirement in many regions.

Local Anesthesia (commonly used on farms):

• **Lidocaine 2%** injected into each testis and along the spermatic cord, 5–10 minutes before surgery.

Sedation (optional):

• **Azaperone (Stresnil)** IM (2–4 mg/kg) for sedation in older or more difficult pigs.

Analgesia:

• Meloxicam or Ketoprofen is recommended post-operatively for pain relief.

General Anesthesia:

- Not commonly used in piglets due to cost, logistics, and risk.
- For large pigs, protocols with **xylazine** + **ketamine** IM may be used under veterinary supervision.

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SURGICAL PROCEDURE

1. Restraint:

- Piglet is held with the ventral abdomen facing upward, head down, legs firmly held.
- Avoid excessive pressure on thorax to prevent respiratory compromise.

2. Incision:

- Palpate and stabilize the testis.
- Make a vertical incision over the scrotum, large enough to expose the testicle.
- Incise through the skin and tunica vaginalis.

3. Extraction:

- Gently pull the testis until the spermatic cord is exposed.
- In young piglets (<21 days), cord can be twisted and pulled to rupture called traction and twist technique.
- In older pigs, ligation with absorbable suture (chromic catgut 2-0) or emasculation is recommended to control bleeding.

4. Repeat on Opposite Side:

 Always use a separate blade or sterilize between incisions to prevent crosscontamination.

5. Leave the Incision Open:

- Allow second intention healing (natural drainage).
- Do not suture in routine cases to reduce infection risk.

POSTOPERATIVE CARE

- **Monitor daily** for 3–5 days for signs of:
 - 1. Swelling
 - 2. Bleeding
 - 3. Foul-smelling discharge
 - 4. Reluctance to move or suckle
- Topical antiseptics (povidone-iodine spray) can be applied daily.
- Antibiotic and analgesics should be given
- Ensure piglet is returned to a clean, dry, warm pen.
- Avoid exposure to dust, mud, or overcrowding post-surgery.
- Instruct farmers to report any complications early.

COMMON COMPLICATIONS

| Complication | Cause | Prevention/Management |
|-------------------|--|--|
| Hemorrhage | Inadequate cord traction or no ligation | Ligation in older pigs, ensure proper |
| | | traction |
| Infection/Abscess | Poor hygiene or dirty environment | Clean instruments, antiseptic use, clean |
| | | pen |
| Evisceration | Improper cord handling or large incision | Ligate cord in older pigs, avoid deep cuts |
| Swelling/Edema | Normal post-op response or secondary | Monitor daily, give NSAIDs if needed |
| | infection | VIII . |
| Fly strike | Open wound in fly-infested areas | Apply insect repellents, cover wound if |
| (myiasis) | IROMIL | needed |
| Tetanus (rare) | Soil contamination | Vaccination and good hygiene |

FARMER-FRIENDLY TIPS

- 1. Castration should always be done under clean conditions.
- 2. Best done in cooler parts of the day (morning or evening).
- 3. Do not castrate sick or weak piglets.
- 4. If bleeding continues for >5 minutes, call a veterinarian.
- 5. Use antiseptic spray for at least 3–5 days post-castration.
- 6. Teach farmers not to close wounds or apply soil/herbs.

CONCLUSION

Swine castration is a simple but significant surgical procedure that improves pork quality, animal behavior, and farm management. When performed correctly and humanely, especially during the early days of life, it minimizes suffering and enhances productivity. BVSc &AH students must understand not just the technique but also the importance of analgesia and postoperative care. Farmers must be educated on hygiene, timing, and when to seek veterinary help.

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