

DYSTOCIA DUE TO PEROSOMUS ELUMBIS FOETAL MONSTER IN A BUFFALO (*BUBALUS BUBALIS*)

JASMER* and AJEET KUMAR

Department of Veterinary Gynaecology and Obstetrics, College of Veterinary Sciences
Guru Angad Dev Veterinary and Animal Sciences University, Ludhiana-141 004, India

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SUMMARY

In this communication, a rare case of dystocia due to perosomus elumbis monster in a buffalo, its management and successful per vaginum delivery following partial evisceration is reported. Vaginal examination revealed day birth canal and uterus. The fetus was in posterior presentation with right hip and bilateral shoulder flexor. The left hind limb was present in the birth passage with enlarged and ankylosed hock joint.

Key words: Buffalo, dystocia, partial evisceration, perosomus elumbis

Fetal monstrosities and anomalies involve malformation of fetus and are common causes of dystocia in cattle and buffalo (Shukla *et al.*, 2007). Monstrosities are more common in buffalo (Phogat *et al.*, 1992; Singla and Sharma, 1992) than cattle (Craig, 1930). Fetal anomalies such as schistosoma reflexus, perosomus elumbis, conjoined monsters and cyclopia have been recorded in domestic animals (Roberts, 1971), however, perosomus elumbis has been reported in ruminants and swine (Arthur *et al.*, 2009). This paper puts on record a rare case of perosomus elumbis monster in a buffalo and its successful removal through per vaginum after partial evisceration.

A pleuriperous buffalo in 3rd parity with full term gestation after 2nd stage of labor but with dystocia was presented to the Teaching Veterinary Clinical Complex, GADVASU, Ludhiana. History revealed that previous calvings of the animal were normal. The animal was straining for the last 11h, water bags ruptured but failed to deliver the fetus. Vaginal examination revealed a dry birth canal and uterus and the fetus was in posterior presentation with right hip and bilateral shoulder flexion. The left hind limb was present in the birth passage with enlarged and ankylosed hock joint. On the basis of clinical examination, it was observed that the buffalo had a monster. Hence, it was decided to deliver the fetus per vaginum.

Before the start of actual obstetrical procedure, the animal received DNS (4 liter; I/V), NSS (3 liter; I/V), Analgin (20 ml; I/M), Dexona (10 ml; I/M), ceftriaxone+sulbactam (4.5 g; I/M), vit. B-complex (10 ml; I/M), Epidosin (Valethamate, 45 mg per kg b wt; 5.5ml)

*Corresponding author: jasmer.sl.dalal@gmail.com

and Mifex (450 ml; slow I/V). After proper lubrication of birth canal with 2% carboxymethyl cellulose sodium (SD Fine), epidural anesthesia was given with 2 % lignocaine hydrochloride (5ml). Fetus was repelled and obstetrical chain was applied to right fetlock joint of hind limb. Right hind limb was pushed in left lateral and anterior direction by placing the palm on hoof. Simultaneously, gentle traction was applied on right hind limb and it came in the birth passage. Gentle traction was applied to both hind limbs after lubrication by placing another obstetrical chain on left hind limb and simultaneous forelimb was repelled. At this moment, abdominal viscera obstructed the progress of fetal delivery; hence, partial evisceration was performed by making a vent (Fig. 1a) on right hind quarter of fetus with guarded knife. Gentle traction was again applied with simultaneous repulsion of fore limbs and eventually fetus was delivered. Ethamsylate (500 mg, IM) was given to check diffuse bleeding. Placenta was removed manually. Animal was treated for five days with above mentioned antibiotic, antihistaminic, oral herbal uterine echbolics (Utrifit liquid, KM Vet Pharma) and fluid therapy. Animal recovered uneventfully. Fetus revealed extensive musculoskeletal deformities like ankylosed and kinked joints of body including hock, knee, fetlock and cervical joints. Lumbar vertebrae were rudimentary. Vertebral column was rigid. There was atrophy of hind quarter muscles. Shoulders and pelvis were poorly developed. There was variable degree of flexion of joints. Spinal cord was hypoplastic beyond thoracic part. These characters were indicative of perosomus elumbis (Fig. 1b).

Perosomus elumbis is seen mostly in cattle and pigs (Roberts, 1971; Arthur *et al.*, 2009). It has typical

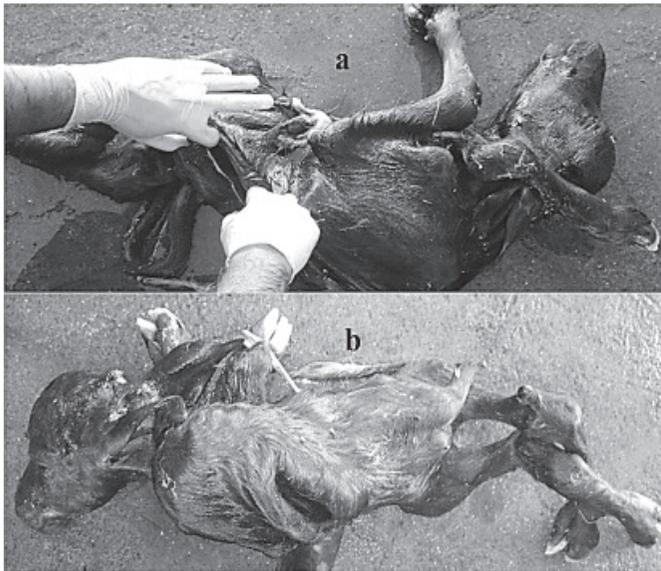


Fig 1: a) Vent made through which partial evisceration was done. b) perosomus elumbis fetal monster having hypoplastic spinal cord and vertebrae at lumbar region, ankylosed joints, poorly develop shoulder and pelvis, generalized atrophy of various muscles.

congenital abnormalities of musculoskeletal system that primarily includes arthrogyposis of hind limbs, characterized by ankylosis of joints, malformed musculature (Jones, 1999). The defect may be functional or structural involving a single anatomic structure or a part of several systems (Jana and Jana, 2010). In most cases the lumbar vertebrae were rudimentary and atrophy

of rear quarter muscles resulting in lack of movement by developing fetus (Arthur *et al.*, 2009). Per vaginum delivery of perosomus elumbis is much difficult. Fetotomy or caesarean section is recommended in such type of cases, though, the prognosis is guarded. This case was handled successfully with per vaginum removal of monster after lubrication and partial evisceration.

REFERENCES

- Arthur, G.H., Noakes, D.E., Pearson, H. and Parkinson, T.J. (2009). *Veterinary Reproduction and Obstetrics*. (9th edn.), W.B. Saunders Co. Ltd., London.
- Craig, J.F. (1930). *Fleming's Veterinary Obstetrics*. (4th edn.), Bailliere. London: Tindall and Cox.
- Jana, D. and Jana, M. (2010). Dystocia due to perosomus elumbis foetal monster with breech presentation in a buffalo. *Indian J. Field Vet.* **6**:73-75.
- Jones, C.J. (1999). Perosomus elumbis (vertebral agenesis and arthrogyposis) in a stillborn Holstein calf. *Vet. Pathol.* **36**: 64-70.
- Phogat, J.B., Bugalia, N.S. and Gupta, S.L. (1992). Incidence and treatment of various forms of dystocia in buffaloes. *Indian J. Anim. Reprod.* **13**: 69-70.
- Roberts, S.J. (1971). *Veterinary Obstetrics and Genital Diseases*. (2nd edn.), CBS Publishers, New Delhi, India.
- Singla, V.K. and Sharma, R.D. (1992). Analysis of 188 cases of dystocia in buffaloes. *Indian Vet. J.* **69**:563-564.
- Shukla, S.P., Garg, U.K., Pandey, A., Dwivedi, D.P. and Nema, S.P. (2007). Conjoined twin monster in a buffalo. *Indian Vet. J.* **84**: 630-631.