

MANAGEMENT OF DYSTOCIA DUE TO ABRACHIAL FETAL ASCITIC MONSTER IN RATHI COW AND ITS CORRECTION WITH EXPLORATORY PUNCTURE - A CASE REPORT

PRAMOD KUMAR*, SHIVENDRA KUMAR BHALOTHIA¹, TAPENDRA KUMAR¹, SANJEEV KUMAR¹ and TRILOK GOCHER¹

Department of Veterinary Gynecology and Obstetrics

College of Veterinary and Animal Science, Rajasthan University of Veterinary and Animal Sciences,
Bikaner-334001 (Rajasthan), India

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SUMMARY

A successful delivery of fetus with abrachial fetal ascitic monster and its correction through exploratory puncture is reported. Post-operative care comprised of administration of broad spectrum antibiotics, anti-inflammatory drugs, antihistaminics, ecobolics, along with supportive treatment.

Key words- Ascites, Cattle, Dystocia, Exploratory puncture

Fetal causes of dystocia include fetopelvic disproportion, fetal oversize and fetal malpresentations. Dystocia can also occur due to dropsical condition of fetus like hydrocephalus, ascites, hydrothorax and anasarca (Purohit *et al.*, 2006; Purohit *et al.*, 2012). Ascites is dropsy of the peritoneum probably either by over production or insufficient drainage of peritoneal fluid and blockage of lymphatics (Sloss and Duffy, 1980; Vidyasagar *et al.*, 2010) or due to diminished urinary excretion (Purohit *et al.*, 2012). Ascitic fetus in full term pregnancy may cause dystocia in cows (Rajasundaram *et al.*, 1998 and Krishnakumar *et al.*, 2012). Present case report describes rare abrachial ascitic fetal monster in a Rathi cow.

A six year old Rathi cow in second parity was presented in clinics of RAUVAS with the history of complete gestation period. Animal was straining from last night and progressed to second stage but after that no improvement has occurred. Cow was alert and active. Per vaginum examination revealed completely relaxed cervix with fetus in anterior longitudinal presentation and dorso sacral position with absence of forelimbs in birth canal. Thorough examination revealed fetus abdomen filled with fluid suggesting a case of fetal ascites.

An epidural anesthesia with 2 % lignocaine was given to prevent excessive straining. A guided fetotome knife was inserted per vaginum to incise the fetal abdomen. About 10-15 litres straw coloured fluid escaped from fetal abdomen (Fig. 1). As soon as fluid escaped from the abdomen, dead male calf was delivered applying gentle traction on the neck portion. Partial fetal repulsion and adjustment of correct parturition posture was done to take out the fetus. Placenta was also taken out by rolling it on the hand and separation of cotyledons. The fetus was comparatively smaller in size and arthrogryposis also present in hind limbs.

Cow was treated with fluid therapy once (5% DNS 1 Lt. I/V, Inj. Ringer lactate 2 Lt. I/V, Inj. Metrogyl 400 ml I/V and Inj. Calcium borogluconate 450 ml I/V slow), Inj. Opticel 1gm I/M (Boehringer), Inj. Flunixin meglumine 500mg. Inj. Avilin Vet (MSD), Inj. Vitamin B.Complex 10ml I/M, Liq. Utrasafe (Vetmankind) and Bol. Pesuria 4 Intrauterine (IIL) for 3 days.

Fetal ascites have been reported by various authors in cattle (Rajasundaram *et al.*, 1998; Honparkhe *et al.*, 2003; Kumaresan *et al.*, 2013 and Ravikumar *et al.*, 2013). Many authors have reported per-vaginal delivery of ascitic fetus where fetus has been presented in posterior presentation also (Selvaraju *et al.*, 2009; Kumaresan *et al.*, 2013 and Sathya *et al.*, 2018). Approaches similar to the present case for vaginal fetal delivery have been recorded in many previous studies (Honparkhe *et al.*, 2003; Selvaraju *et al.*, 2009; Ravikumar *et al.*, 2013, Prakash *et al.*, 2016 and Sathya *et al.*, 2018). It was concluded that ascitic fetus can be delivered following fetal abdominal puncture.

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REFERENCES

Honparkhe, M., Ajeet, K. and Gandotra, V.K. (2003).



Fig. 1 Abrahialascitic male monster fetus with arthrogryposis in both hind limbs

*Corresponding author : dhatervwal.pramod@gmail.com

- Dystocia due to accumulation of fluid in peritoneal cavity and intestines of fetus in a cross breed cow. *Indian J. Anim. Reprod.* **24**(1): 83-84.
- Krishnakumar.K., SenthilKumar, G., Jayakumar, K., Jagadeeswaran, A., Ravikumar, K. and Chandrahasan, C. (2012). Dystocia due to fetal ascites in a Jersey crossbred cow. *Indian Vet. J.* **89**(6):78-79.
- Kumaresan, A., Selvaraju, M., Sivaraman, S., Ravikumar, K., Napolian, R.E. and Prakash, S. (2013). Dystocia due to fetal ascites with breech presentation in a Holstein-Freisiancow. *Shanlax Int. J. Vet. Sci.* **1**: 52-53.
- Prakash, S., Selvaraju, M., Ravikumar, K., Palanisamy, M. and Manokaran, S. (2016). Dystocia due to fetal ascites in bovines—a report of three cases. *Indian Vet. J.* **93**(12): 58-59.
- Purohit, G.N., Gaur, M. and Sharma, A.(2006). Dystocia in Rathi cows due to congenital hydrocephalus. *Indian J. Anim.Reprod.* **27**(1): 98-99.
- Purohit, G.N., Kumar, P., Solanki, K., Shekhar, C. and Yadav, S.P. (2012).Perspectives of fetal dystocia in cattle and buffalo. *Vet. Sci. Dev.* **2**(8):31-42.
- Rajasundaram, R.C., Selvaraju, S. and Ayyappan, S. (1998). Dystocia due to foetal ascites in cow-a case report. *Indian Vet. J.* **75**:165-167.
- Ravikumar, K., Selvaraju, M., Kumaresan, A. and Sivaraman, S. (2013). Dystocia due to fetal ascites in Jersey cross bred cow - a case report. *Shanlax Int. J. Vet. Sci.* **1**: 32-33.
- Sathya, P., Srinivasan, C. and Prabhakaran, K.P. (2018). Management of dystocia due to fetal ascites in Holstein Friesian cross bred cow – case report. *Int. J. Sci. Environ. Techno.* **7**(1): 165–168.
- Selvaraju, M., Ravikumar, K., Palanisamy, M., Prabakaran, V., Ravi, R., EzakialNapolean, R. and Chandrahasan, C. (2009). Dystocia due to fetal ascites in a grade Murrah buffalo: A case report. *J. Vet. Anim. Sci.* **40**: 56-57.
- Sloss V andDufty, J.H.(1980). In Sloss, V. and J.H. Dufty (eds) Handbook of Bovine Obstetrics. Williams and Wilkins, Baltimore, U.S.A. Obstetrical pathology, pp. 105-111.
- Vidya Sagar, P., Veni, K., Sai Krishna, K.S. and Vadde, K.S. (2010). Dystocia due to fetal ascites with wry neck in a graded Murrah buffalo-a case report. *Buff Bull.* **29**: 73-74.