Clinical Article

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POSTPARTUM UTERINE PROLAPSE IN SOW- A REPORT OF TWO CASES

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SUMMARY

Two sows were presented with complete uterine prolapse 1-2 hours post farrowing. The everted uterine *prolapsed mass was replaced by pushing to* its normal anatomical position after taking all the aseptic measures and eight knot sutures using nylon thread were applied for retention and prevention of reoccurrence. Both the animals recovered without any complication after removal of sutures.

Key words : Postpartum, Prolapse, Sow, Uterus

Uterine prolapse is a common complication of the third stage of labour in ruminant but occur less frequently in sow and rarely in the mare and bitch. In ruminant species the prolapse is generally a complete eversion of the gravid cornua, while in sow and bitch eversion is generally partial and comprises one horn only (Noakes *et al*., 2009). Rectal and vaginal prolapses are more common in sows compared to uterine prolapse (Supakorn *et al*., 2017). Prolapse of uterus is associated withmany predisposing factors including phytoestrogens, hypocalcaemia, relaxed, atonic and flaccid uterus, excessive relaxation of pelvic and perineal region and excessive traction to relieve dystocia (Roberts, 1971). The aim of this study was management of clinical cases of uterine prolapse in sows by replacement of everted uterus following proper precautionary measures to prevent subsequent consequences.

Two sows aged 2 years and 3 years, respectively were presented for treatment of prolapsed uterus (Fig. 1 and 2). History revealed that farrowing was normal and the hanging of prolapsed uterus was noticed 1-2 hours after farrowing. On clinical examination, both the everted uterine horns were found protruded from vulva in both the cases. The prolapsed uterine masses were congested and oedematous. The values of body temperature, pulse and respiration rate of 2 years and 3 years aged sow were 102^0F and 101.5^0F, 85/minute and 94/minute, 15/minute and17/minute, respectively.

Animals were deeply sedated with intramuscular injection of Triflupromazine@ 2 mg/kg and Xylazine @ 1 mg/kg body weight. The prolapsed masses were cleaned with cold potassium permanganate (1:1000) solution. Ice packs were applied to reduce oedema. The rear part of the animals was elevated by placing gunny bag filled with straw. After that the everted organ was replacedby gently pushing to its original position. Eight knot sutures with nylon thread were applied to prevent the reoccurrence. Animals were treated with Inj. Ceftriaxone+ Tazobactum @ 10mg/ kg body weight for 5 days, IM and Inj. Meloxicam@0.2 mg/ kg body weight, IM for 3 days. Sutures were removed after 8 days and the animals recovered without any complication.

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Prolapse of the uterus is occasionally seen in sows during or up to several days after parturition. Excessive straining because of fetal malpositioning, fetal/maternal disproportion, or trauma with swelling and inflammationin the birth canal is thought to cause uterine prolapsed in sow (Zimmerman *et al*., 2012). Sow should be treated immediately as extensive prolapsed usually results in internal haemorrhage and shock (Noakes *et al*., 2009). If the uterus is cleaned and undamaged, it can be inserted by pushing it gently back into the genital opening and birth canal. Reposition of prolapsed part is most important to prevent trauma (Gowda *et. al.,* 2014) and each horn should be inverted starting with the tip and gradually reduced until the uterine body has been reached (Zimmerman *et al*., 2012). Sow's survivability and return to normal reproductive performance depend on stress and uterine damage (Blaes *et al*., 2001). Prevention of reoccurrence depends on complete and correct replacement of the uterus and restoration of uterine tone.

In multiparous animal, replacement of uterus by pushing is difficult but occasionally may be possible if rear part of the animal is well elevated (Arthur *et al*., 2001) as applied in presented cases. A successful retention of prolapsed mass by pushing was also reported by Dewry *et al*. (2017). Success of treatment depends on the type and

Fig. 1: Prolapsed uterus (Animal No.1).

Fig. 2: Oedematous prolapsed mass (Animal No. 2)

duration of the case, the degree of damage and contamination (Wachida and Kisani, 2011). In the present cases, early and proper management recovered both the animal uneventfully with restoration of reproductive status.

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