**Clinical article**

**POST-PARTUM TOTAL UTERINE EVERSION IN A NON-DESCRIPT SOW**

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**ABSTRACT**

A rare case of postpartum total uterine eversion in a non- descript sow and its successful repositioning and management is reported.

**Keywords:** Eversion, Prolapse, Sow, Uterus

Protrusion or coming out of uterus and vagina through the vaginal opening is known as uterine prolapse (Bhattacharyya *et al.,* 2012). It is commonly occurred few minutes to few hours after the fetal expulsion (Velladurai *et al.,* 2016) and very rarely during 48 to 72 hours after the fetal deliver (Selvaraju *et al.,* 2004 and Selvaraju *et al.,* 2007) in farm animals. Prolapse of the uterus is occasionally seen in sows during or up to several days after parturition (Supakoran *et al.,* 2017) and this report documents the successful management of total uterine prolapse in a non-descript sow.

**Case history and Observation**

A 3 years old pluriparous sow was brought to the VCC, VCRI Namakkal with the history of animal furrowed six piglets three days back normally. After three days, the animal showed continuous straining and the uterine horns prolapsed out. Clinical examination revealed that the sow was in lateral recumbency; dull and depressed with subnormal temperature. The prolapse of the uterine horns, cervix and vagina was noticed. The prolapsed mass was completely dry with lacerations on the base of the uterine horns (Fig. 1).

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**Treatment and discussion**

The sow was restrained with caudal epidural anesthesia using 2 ml of 2% lignocaine hcl. It was placed in the hindquarter elevator as in the figure 1. Prolapsed mass was washed with 2% potassium permanganate solution and lubricated with cetrimide cream (Fig. 2). Then, the vulval lips were held everted and the uterine horns were reduced through the cervix (Fig. 3) and repositioning was confirmed by passing the hand through the cervix. Postoperatively, the animal was treated with Inj. Ringers lactate 500 ml (i/v), Inj. Dextrose 20% 250ml (i/v), Inj. Calcium borogluconate 150 ml (i/v), Inj. Oxytocin 20 (IU), Inj. Ceftriaxone 1g (i/v), Inj. Flunixin meglumine 100 mg (i/m) and Inj. Chlorpheniramine maleate 30 mg (i/m) for 5 days and the animal recovered successfully.

Total uterine prolapse in sow was reported by Supakoran *et al.,* (2017), Idia *et al.,* (2019) and Nath *et al.,* (2019). Occurrence of vaginal and rectal prolapse were more common in swine than the uterine prolapse (Supakoran *et al.,* 2017) and partial or single horn eversion of uterus was common in bitch and sow (Parkinson and Noakes, 2019). Uterine prolapse is emergency obstetrical case and it needed early prompt attempt to save the animal (Selvaraju *et al.,* 2007 and Velladurai *et al.,* 2016). The prolapse of the uterine horns in the present case might be due to uterine inertia which might have caused the improper uterine involution and favoured the prolapse of the uterine horns. Thus, in the present case the total uterine prolapse in a sow was treated at the earliest and saved the life.

**Summary**

Successful reduction and repositioning of true uterine eversion in a sow was reported.

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| **Fig. 1** Prolapse of the entire uterus with multiple lacerations in the uterine horn |
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| **Fig. 2.** Repositioning of the prolapsed uterus |
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| **Fig. 3.** Animal after the repositioning of uterus |