Cesarean section in canine: Case report

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Abstract
A case of dystocia was presented to people for animal (PFA) the owner has reported that the dog has whelped two pups and is still under pain so when the animal was examined fetal bony structures can be felt by palpation so a cesarean section was performed to relieve the animal from pain and remove the fetus.

Keywords: C-section, dystocia, whelping.

Introduction
The frequency of conducting cesarean section to relieve dystocia in canine is far higher than in large ruminants. It is possible that the small size of the animal, multiparous nature, a long duration of delivery and the demands by the owner to deliver as many live puppies as possible due to commercial considerations may force the obstetrician to increasingly employ cesarean section in bitches. Narasimha murthy et al., 2014 [10]. Cesarean section is performed on an emergency basis 58% of the time. Dehydration, hypovolemia, hypotension, exhaustion, hypothermia, toxemia, hypoxia, hemorrhage, and shock may be present if dystocia has been in progress for some time. There is an increased mortality risk for dams and decreased puppy survival when cesarean section is performed on an emergency basis Moon et al. 1988. Puppy mortality associated with emergency cesareans was 12.7% compared with 3.6% for elective cesarean delivery Moon-massat 2005 Small brachycephalic breeds (e.g., fetopelvic disproportion), large breeds (e.g., uterine inertia), and primagravid dogs are more predisposed to dystocia and are, therefore, more likely to undergo emergency cesarean section Gaud et al 1985 [6]. A variety of anesthetic protocols have been described for cesarean section in dogs. The basis for many of these protocols is extrapolated from experimental animal studies and the human literature. There are few controlled veterinary studies comparing various anesthetic protocols (Funkquist et al. 1997; Thurmon et al. 1996; Brock N 2000, 1996; Paddleford Benson Gj1984; Evers 1996; Luna et al. 2004) [5, 12, 2, 3, 11, 1, 7]

Results and discussion
Cases of dystocia that could not be relieved through vaginal manipulative procedures was immediately subjected for caesarean section, since It was also the only line of treatment carried out in protracted cases of dystocia characterized by fetal death. In the present study, dystocia could be relived only by cesarean section and fetus was found be dead (Fig1, Fig2). The surgical approach was carried out by anaesthezing the animal using xylazene and ketamine @ 1mg/kg body weight and 10mg/kgwt respectively. Uterine suture were continuous suture pattern was employed for closing both the uterine and abdominal incison, followed by interrupted suturing pattern for skin. Postoperative care was carried out by using a prolonged antibiotic therapy with intacef, melonex, tribivet, followed by regular dressing on every alternate day. The animal was under supervision till days 10 after surgery. A good recovery with no complications was observed (Fig4).

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Conclusion
Our study aided in strengthening the performance of c-section at critical time points wherein whelping fails to relieve the animal from suffering.

References