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Bulldog monster fetus with anasarca in a doe – A case report

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Abstract

A very rare case of bulldog monster or achondroplasia associated with fetal anasarca in a goat was reported.

Keywords: Dystocia, anasarca, Bulldog monster

Introduction

Congenital anomalies that are of importance in veterinary obstetrics have a genetic cause such as achondroplasia in Dexters [4]. The genetic makeup of cells may be altered at the time of meiosis in the form of non disjunction, translocation or deletion of chromosomes, if such alterations are moderate to severe the zygote usually succumbs early in gestation, but some survive longer as fetal monsters [6]. Fetal monsters can have relative oversize and result in dystocia, less common causes of fetal oversize include fetal anasarca and fetal hydrops [5]. Dystocia in goats due to fetal oversize was (3.2%) and monsters was (1.4%), [1]. Feetal anasarca and achondroplasia were reported in large ruminants, but very rare in sheep and goat. The present paper would discuss about the successful management of dystocia due to fetal achondroplasia with anasarca in a doe.

Case History and Observations

A multiparous doe was brought to Teaching Veterinary Clinical Complex, Rajendra nagar with a history of dystocia and a mass hanging from vagina (fig.1) past 6 hours. On clinical examination the temperature was normal, but continuous straining was observed. Careful visual examination of the heavy mass revealed that it was a fetus with a large, swollen bulldog like head. As the fetal head had passed the birth canal and the fetus was in anterior longitudinal position it was decided to deliver the fetus per vaginal by traction.

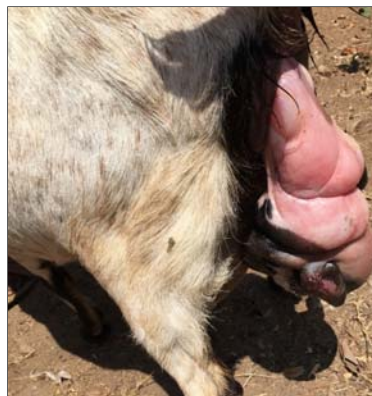


Fig 1: Hanging fetal mass from vagina

Treatment and Discussion

The birth canal was properly lubricated and gentle traction was applied but could not deliver the fetus. The abdomen of the fetus was pierced to reduce the size of the fetal mass carefully without causing damage to uterine wall using a sharp hook.

The fetus was then delivered by gentle traction and after births were removed along with fetus to the extent possible. The doe was then administered with DNS 500 ml iv, Enrofloxacin 5 mg per kg b wt im, meloxicam 0.5 mg per kg b wt and exapar 20 ml per oral for 5 subsequent days.

Examination of fetus revealed that it was a female kid with generalised edema, bulldog like head, swollen neck and abdomen, very short limbs, and weighing about 8 kg indicating a teratogenic achondroplasia associated with anasarca (fig.2). Similar findings were reported by [3]. The bull dog calf is a very severe form of achondroplasia, possibly associated with a single autosomal recessive gene [2]. The author also mentioned manual delivery by the obstetrician is usually possible aided by generous lubrication.



Fig 2: Fetus with bulldog head, short limbs and generalised edema

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