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## Management of dystocia due to lateral deviation of fetal head and neck in a goat: A case report

**Pranay Kumar K, N Ramesh and K Prashanth Kumar**

#### Abstract

The present case study reports dystocia in a non-descript Goat. The defective fetus with lateral deviation of the fetal head was removed after repulsion and correction of posture and another three kids were successfully delivered with gynaecological intervention.

**Keywords:** Dystocia, goat, postural defects, ventral deviation

#### Introduction

The normal parturition process is well described in small ruminants such as sheep and goat. The first stage of parturition usually starts when the animal isolates itself from the rest of the herd, shows signs of restlessness, and loss of appetite. Abdominal contractions become stronger and more frequent toward the end of this stage. The second stage of parturition marks the expulsion of the fetus which usually occurs within 15-30 minutes. The third stage of parturition follows and ends by the expulsion of the fetal membranes which usually takes place within 4-6 hours. Dystocia is one of these problems which cause death in both kids and sometimes the dams<sup>[1]</sup>. Obstetrical problems in goats are similar to that of sheep<sup>[2]</sup>, however, the incidence of dystocia is considered higher in does compared to ewes<sup>[3]</sup>. Incidence of dystocia in goat has been reported to be about 7%<sup>[4]</sup> and the fetal causes of dystocia are 44.44%<sup>[5]</sup>. The ability of the veterinary personnel to distinguish lambing and kidding difficulties is considered as an important step in treating dystocia. In this communication, a case of dystocia due to fetal head and neck deviation is reported.

#### Case History and Observation

A non-descriptive Doe of about 4 years of age with full term of pregnancy in its second parity was presented to the Teaching Veterinary Clinical Complex, PVNR TVU, Rajendranagar with the history of dystocia, intermittent vaginal discharge, acute distended abdomen, anorexic from past 24 hours and rectal temperature of 102.5 F. Per vaginal examination following epidural anesthesia with 2% lignocaine hydrochloride revealed that cervix was fully dilated and the fetus was presented in anterior longitudinal presentation, dorso-sacral position with slight lateral deviation of head and neck.

#### Treatment

After proper lubrication of birth canal with liquid paraffin correction of the the posture of fetus was performed using the repulsion and traction method where the fetus was pushed back into the uterine cavity to correct the head and neck deviation and the defective fetus was then pulled out manually by applying gentle traction on forelimbs (Fig. 1). Further pervalginal examination revealed presence of three more live foetuses which were assisted in delivery (Fig. 2). Placenta got expelled 20 minutes later. The doe did not exhibit secondary complications like uterine straining or prolapse after relieving dystocia. The goat was treated with intra muscular injection of Melonex-P- 3 ml, Chlorpheneramine maleate @ 0.5 mg/kg body weight and Ciprofloxacin @ 5 mg/kg body weight and intrauterine dispensing of Furea (Pfizer India Ltd.) bolus 1 gm was given to hasten the involution of uterus and control the infection. The animal was treated for further five days with antibiotic, NSAID, fluid (DNS), and vitamin (B complex) along with administration of intrauterine bolus for three days. The animal was found to respond well to the treatments and was followed for further 2 weeks telephonically after treatment, and the animal recovered successfully

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**Fig 1:** Dead Fetus**Fig 2:** Doe with three live kids

## Discussion

Dystocia or difficult birth, a condition in small ruminants (sheep and goat), results in huge economic losses to farmers either due to death of new born or dam or adversely affecting dam fertility [6]. There are several factors effect the reproductive performance of the goat lead to decrease their numbers which result from the death of the fetus and the dams. One of the most important factors which lead to great economic losses was the dystocia [7]. The causes of dystocia have been reported either due to maternal or fetal in origin [8]. Successful treatment of dystocia depends upon correct diagnosis of the causes of dystocia and when it started [1], these techniques of treatment including manual treatment and traction, fetotomy, hormonal and caesarian section [10]. In conclusion, by determining the factors rapidly, the occurrence of dystocia can be prevented or treated quickly to save the lives of the dam and the fetus as well as to prevent economic losses. In this case, the prognosis of the ewe was good. It is therefore recommended that more elaborate epidemiological studies can be done to ascertain the immediate and remote causes of dystocia with a view to elucidate the risk factors involved.

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