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Obstetrical management of dystocia due to emphysematous fetuses in a non - descriptive doe

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Abstract

A 5 years old non-descriptive doe in its third parity was reported with the history of dystocia and its successful management by Pervaginal delivery of emphysematous fetuses with a course of parental antibiotics, analgesic and fluid therapy. The doe recovered uneventfully.

Keywords:Emphysematous fetuses, dystocia, twin fetuses, non-descriptive doe

1. Introduction

Obstetrical problems in goats are similar to that of Sheep. However, the incidence of dystocia is considered higher in goats compared to sheep (Mehta *et. al*, 2002)^[2]. Dystocia due to oversized fetuses and fetal emphysema are usually subjected to caesarean section. The prognosis depends on the severity of the case, degree of damage and contamination, duration of its existence or how quick it is attempted with suitable treatment (Teja *et. al*,2016)^[4]. In this report, a rare case of dystocia due to two emphysematous fetuses and their successful Pervaginal delivery in a non-descript doe was discussed.

2. Case History and Clinical Observations

A full term pregnant third parity non-descriptive doe was presented to the Veterinary Clinical Complex, College of Veterinary science, Garividi with the history of dystocia, intermittent vaginal discharges, distended abdomen, anorexia of more than 24 hours and rectal temperature of 101.4 °F.

3. Treatment and Discussion

Per vaginal examination following epidural anesthesia with 2% Lignocaine hydrochloride revealed partially dilated cervix (three fingers) and subsequent massage with lukewarm liquid paraffin for 10 minutes resulted complete dilatation of cervix. After ample lubrication of birth canal, two dead fetuses were delivered per vaginally by gentle forced traction (Fig.1), which were in anterior longitudinal presentation. Both the fetuses were emphysematous and placenta was degenerated (Fig. 2). The doe was treated for five days daily with Inj. Streptopenicillin @ 10mg/kg body weight, Meloxicam @ 0.2 mg/kg bodyweight, DNS (250ml, i/v) and B-complex-2ml, I/m along with administration of intrauterine bolus on the first day. The case followed for another two weeks period and the doe was recovered uneventfully.

Dystocia or difficult birth, a condition in small ruminants results in huge economic losses to farmers either due to death of new born or dam or adversely affecting dam fertility. The birth canal of parturient sheep and goat is very fragile and undue force in pulling out a maldisposed fetus may result in uterine rupture with subsequent prolapse of abdominal organs and hence care must be taken in manual delivery (Sharma *et. al*,2014)^[3]. Jasmer *et al.*,2017 ^[1]reported that the partially dilated cervix might be responsive to the massage with lukewarm liquid paraffin or normal saline that make the pervaginal delivery possible especially in case of multiple fetuses as observed in the present case. It is concluded that manual assistance without any surgical intervention may be helpful to deliver emphysematous fetuses pervaginally when they are in normal presentation, position, posture.



Fig 1: Photograph showing the gentle forced traction of fetus.



Fig 2: Photograph showing the dead emphysematous fetuses.

4. Acknowledgements

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5. References

1. Jasmer Dalal, Gyan Singh. Dystocia due to emphysematous fetuses in a non-descript goat. *Haryana Vet.* 2017; 56(1):109-110.
2. Mehta V, Nagar D, Yadav RC, Garg N, Purohit GN. Obstetrics problems in goats. V National Seminar on Indian Society for Sheep and Goat Production and Utilization, Jaipur, 2002.
3. Sharma A, Kumar P, Singh M, Vasishta N. Retrospective analysis of dystocia in small ruminants. *Intas Polivet* 2014; 15(2):287-289.
4. Teja A, Praveen Raj M, Prabhakar Rao K. Obstetrical management of post-partum uterine prolapse in a Non-descript doe - A Case Report. *International Journal of Scientific Research in Science and Technology.* 2016; 2(5):283-284.