



ISSN (E): 2277- 7695

ISSN (P): 2349-8242

NAAS Rating: 5.03

TPI 2020; SP-9(4): 95-96

© 2020 TPI

www.thepharmajournal.com

Received: 03-02-2020

Accepted: 05-03-2020

Pramod Kumar

Assistant Professor, Department of Veterinary Gynecology and Obstetrics, College of Veterinary and Animal Science, RAJUVAS, Bikaner, Rajasthan, India

Sivendra Kumar Bhalothia

Department of Veterinary Gynecology and Obstetrics, College of Veterinary and Animal Science, RAJUVAS, Bikaner, Rajasthan, India

Tapendra Kumar

Department of Veterinary Gynecology and Obstetrics, College of Veterinary and Animal Science, RAJUVAS, Bikaner, Rajasthan, India

Satish

Department of Veterinary Gynecology and Obstetrics, College of Veterinary and Animal Science, RAJUVAS, Bikaner, Rajasthan, India

Bhanu Prakash

Department of Veterinary Gynecology and Obstetrics, College of Veterinary and Animal Science, RAJUVAS, Bikaner, Rajasthan, India

Rajendra Mehra

Department of Veterinary Gynecology and Obstetrics, College of Veterinary and Animal Science, RAJUVAS, Bikaner, Rajasthan, India

Sasi G

Department of Veterinary Gynecology and Obstetrics, College of Veterinary and Animal Science, RAJUVAS, Bikaner, Rajasthan, India

Tipu Sultan

Department of Veterinary Gynecology and Obstetrics, College of Veterinary and Animal Science, RAJUVAS, Bikaner, Rajasthan, India

Corresponding Author:

Pramod Kumar

Assistant Professor, Department of Veterinary Gynecology and Obstetrics, College of Veterinary and Animal Science, RAJUVAS, Bikaner, Rajasthan, India

Successful management of partially macerated immature schistosoma reflex fetus in a Murrah buffalo- A rare case report

Pramod Kumar, Sivendra Kumar Bhalothia, Tapendra Kumar, Satish, Bhanu Prakash, Rajendra Mehra, Sasi G and Tipu Sultan

Abstract

Schistosomus reflexus is a congenital embryological development defect includes exposed fetal viscera/intestine and spinal curvature of the fetus. Fetal monster usually causes dystocia.

An eight month pregnant Murrah buffalo with foul smell vaginal discharge was presented to the clinics of Gynaecology of College of Veterinary and Animal Science, Bikaner. This condition was managed by medicinal and obstetrical maneuvers. Later on it was proved as dystocia due to partially macerated immature schistosoma reflex monster fetus and vaginal delivery was attempted. After complete treatment the buffalo recovered successfully.

Keywords: Buffalo, Dystocia, Monstrosity, Schistosomus reflexus

Introduction

Schistosomus reflexus is a rare congenital defect commonly occurring in cattle and buffaloes (Srivastava *et al.*, 1998; Laughton *et al.*, 2005; Purohit *et al.*, 2012) ^[1, 2, 3]. It may be occurs either due to genetic aberrations and defects in the embryological development of the fetus resulting in failure of the abdominal wall to close and in the exposure of the abdominal contents may occur (Laughton *et al.*, 2005) ^[2] or may be due to teratogens causing abnormalities in the developing embryo or fetus (Azawi *et al.*, 2012) ^[4]. The monster usually causes dystocia in bovines and the incidence of schistosomus reflexus was recorded as 1.3% (Knight, 1996) ^[5]. Previous case reports of buffalo dystocia represented the cases of schistosoma reflexes in buffalo (Ahuja, *et al.*, 2017; Pandey *et al.*, 2017; Kumar *et al.*, 2019) ^[6, 7, 8]. Diagnosis is based on the presence of exposed fetal viscera/intestine and spinal curvature of the fetus. Dystocia due to maternal and fetal complications are observed during the periparturient period is not uncommon. A successful per-vaginal management of dystocia due to partially macerated immature schistosoma reflex monster through vaginal route in a Murrah buffalo is placed on record.

Case history and observations

Ten years' old, Murrah buffalo in her fourth parity was presented with history of continuous straining at clinics of department of Veterinary Gynaecology and Obstetrics, College of Veterinary and Animal Science, Bikaner, Rajasthan. The owner reported that animal was at around 8 months pregnant and foul smell discharge was voided from genital organs. The animal was having normal rectal temperature (101.8°F) and plus, respiration rate as well as normal body condition. The per-vaginal examinations of animal with well lubricated gloved hand revealed that cervix was dilated four fingers only and foul smelling, red-chocolate colored watery fluid came out from the uterus. Per-rectal examination revealed scanty fluid in uterus and all uterine content lodged in the pelvic cavity. The placentomes were not palpable and very feeble fremitus was present. On the basis of history and clinical examination, this case was diagnosed as abortion which was later confirmed immature schistosoma reflexes.

Handling of case and treatment

It was dystocia with incomplete cervical dilation (four fingers). Cervical dilatation therapy consisting of cloprostenol sodium (Repregna®- Vet Mankind, India) 500 ug IM (intramuscular), estradiol benzoate (Pregheat®- Virbac, India) 2 mg IM, calcium magnesium

borogluconate (Mifex®- Novartis, India) 450 ml slow IV (intravenous) along with the supportive fluid therapy therapy and antibiotics (Inj Mofoi 25ml I/M, Bovion), anti histaminics (Avilinvet® 10ml I/M,- MSD) were given to the animal.

The animal was examined at 12 hours of interval for cervical dilation and after about twenty four hours of the treatment and a fetus with an exposed visceral organs consisting fetal head. And other parts was found engaged in birth canal. With the help of irrigator liquid paraffin infused into uterus and manual efforts for birth canal dilation was also attempted. Lastly gentle traction was applied and a partially macerated immature schistsoma reflexes fetus along with the attached autolysed fetal membranes was delivered (Figure 1). The uterus was lavaged with 2 liters normal saline and 1% povidine iodine solution. Then, the rectal massage of uterus was done to remove excess fluid. Symptomatically, the animal was treated with antibiotic, antihistamine, anti-inflammatory drugs and was continued for three days. Oral herbal uterine cleanser (Utrivive®-Virbac) @ 100 ml PO (per orally) BD (twice a day) for 5 days. After about three hours of the removal of immature schistsoma reflexes monster, animal started eating grass and drinking water.



Fig 1: Immature schistsoma reflex fetus of buffalo

Discussion

The present report is a documentation of a case of partially macerated immature schistsoma reflexes in a Murrah buffalo that was associated with dystocia. Generally fetal monster causes dystocia in animals while Mehrotra *et al.*, 2016^[9] reported a unique case of eutocia with schistosomus reflexus monster fetus in cattle. In fully dilated birth canal if schistosomus reflexus monster fetal size is small than vaginal delivery may occurs through mutation in buffalo (Pandey *et al.*, 2017; Kumar *et al.*, 2019)^[7, 8]. In one report cervicotomy was also attempt in cattle to save from cesarean section complications (Manokaran *et al.*, 2014)^[10]. Few reports preferred partial fetotomy of fetus (Ahuja, *et al.*, 2017)^[6] while others suggested caesarean section (Correale and Consalvo, 2003; Pandey *et al.*, 2017)^[11, 7] in buffalo to relieve the dystocia from schistosomus reflexus monster. However, in the present case of partially macerated immature schistsoma reflexes in a Murrah buffalo was successfully relieved through birth canal by well performed mutation operation and application of gentle traction after medicinal and manual management of the dilation of birth canal.

Acknowledgement

Authors are thankful to the professor and Head, department of VGO, CVAS, Bikaner for extending necessary facility during management of the case.

References

1. Srivastava KK, Sharma AK, Ahlawat SPS, Maithy SK. Schistosomus reflexus with perosomus elumbis in Holstein Freisian cow. Indian J. Anim. Reprod. 1998; 19(1):75.
2. Loughton KW, Fisher KRS, Partlow HGD. Schistosomus reflexus syndrome: a heritable defect in ruminants. Anatomica histologica embryologica. 2005; 34:312-318.
3. Purohit GN, Kumar P, Solanki K, Shekher C, Yadav SP. Perspectives of fetal dystocia in cattle and buffalo. Vet Sci. Develop. 2012; 2(8):31-42.
4. Azawi OI, Ahmed OS, Abass SF. Schistosomus reflexus foetus in cross breed Iraqi cow: a case report. Iraqi J Vet. Sci. 2012; 26:103-104.
5. Knight RP. The occurrence of schistosomus reflexus in bovine dystocia. Australian Vet J. 1996; 73:105-107.
6. Ahuja AK, Singh H, Singh AK. Fetotomy of schistosoma reflexus and brachygnathist buffalo calf: a case report. Res. J Chem. Environ. Sci. 2017; 5(4):142-144.
7. Pandey AK, Kumar S, Gunwant P, Verma A, Phogat JB. Schistosomus reflexus monster in bovine and its successful management. Res. J Vet. Pract. 2017; 5(2):25-27.
8. Kumar A, Singh G, Arjun V, Hariom Jain VK, Chandolia RK. Dystocia Due to schistosoma reflexus in a Murrah buffalo. Int. J Agri. Sci. 2019; 11(20):9160-9161.
9. Mehrotra S, Khatti A, Jena D, Singh SK, Balamurugan B, Chaudhari RK. Schistosomus reflexus with eutocia in crossbred cow: a rare case report. Int. J Sci. Environ. Techno. 2016; 5(6):4473-4476.
10. Manokaran S, Selvaraju M, Prabakaran V, Senthil kumar K, Ezakial Napoleon R, Palanisamy M. Per vaginal delivery of schistosomus reflexus monster fetus by cervicotomy in a cow. Int. J livestock Res. 2014; 4(5):52-54.
11. Correale E, Consalvo F. About some congenital malformation in buffaloes bred in the Salerno province (Italy). Bubalus Bubalis. 2003; 9:22-29.