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The Pharma Innovation



ISSN (E): 2277-7695 ISSN (P): 2349-8242 NAAS Rating: 5.23 TPI 2023; SP-12(7): 1877-1879 © 2023 TPI

www.thepharmajournal.com Received: 05-05-2023 Accepted: 07-06-2023

Poonam Gupta

Veterinary Officer, Department of Animal Husbandry, Govt. Of Rajasthan, Pratapgarh, Rajasthan, India

Deepak Kumar Pankaj

Ph.D. Scholar, Division of Pathology, ICAR-Indian Veterinary Research Institute (ICAR-IVRI), Izatnagar, Rajasthan, India

Shesh Asopa

Assistant Professor, Department of Veterinary Pathology, CVAS, Bikaner, RAJUVAS, Rajasthan, India

Hemant Dadhich

Professor, Department of Veterinary Pathology, CVAS, Bikaner, RAJUVAS, Rajasthan, India

Pooja Prajapat

Veterinary Officer, Department of Animal Husbandry, Govt. Of Rajasthan, Nokha, Bikaner, Rajasthan, India

Priyanka Kalani

Veterinary Officer, Department of Animal Husbandry, Govt. Of Rajasthan, Nokha, Bikaner, Rajasthan, India

Corresponding Author: Poonam Gupta Veterinary Officer, Department of Animal Husbandry, Govt. Of Rajasthan, Pratapgarh, Rajasthan, India

Pathological findings of circulatory disturbances of intestine of pig (Sus scrofa domesticus)

Poonam Gupta, Deepak Kumar Pankaj, Shesh Asopa, Hemant Dadhich, Pooja Prajapat and Priyanka Kalani

Abstract

This study is conducted in the districts of Bikaner, Jaipur, and Alwar in Rajasthan, both organised and unorganised farms provided a total of 380 tissue samples of pig intestine, regardless of age, breed, or sex. Out of them, 142 specimens with obvious macroscopic lesions were processed further for a further histological analysis. An overall incidence of circulatory disturbances of intestine of pig was observed as 35.21 per cent (50 out of 142). Different forms of circulatory alterations, including congestion, haemorrhage, and oedema, were observed to occur 23.94, 9.86, and 1.41 percent of the time, respectively.

Keywords: Pig, intestine, circulatory disturbances, histopathology, congestion, haemorrhage, oedema

Introduction

Native pigs have been raised for pig production for a very long time and have a big economic impact on small-scale farmers and underprivileged pig farmers (Singhal *et al.*, 2019)^[24]. According to the 2019 census, there were around 9.06 million pigs in India. Pigs made up 1.7% of the entire livestock. The overall number of pigs has fallen from the previous census by 12%. The 20th livestock census shows that Rajasthan has 154.81 thousand pigs. Rajasthan produces 9.17 thousand tonnes of pork, compared to India's 404.46 thousand tonnes (BAHS, 2019)^[3]. Pig has great potential for both the food production and fertility (Krishna, 2010)^[10]. The digestive system is a very fragile and vulnerable organ to toxins, pollution, and vascular damage. Studying pig intestinal disorders and circulation issues seemed necessary as a result. Haemorrhage, congestion and oedema are examples of circulatory abnormalities.

Material and Methods

For the proposed experiment, 380 intestinal tissue samples from carcasses of pigs of either sex, regardless of age groups and breeds, were evaluated during post-mortem examination from January 2020 to December 2020. Out of these, 142 intestinal samples exhibiting obvious macroscopic lesions underwent further processing for histological analysis. For histopathological analysis, all representative tissue samples were correctly stored in 10% buffered formalin. Using an acetone and benzene method, the tissues were mechanically prepared for paraffin embedding (Lillie, 1965) ^[15]. As part of standard procedures, intestinal tissue sections with a thickness of 4-5 microns were cut and stained using the haematoxylin and eosin method (Luna, 1968)^[17].

Results and Discussion

In the current study, there were 50 out of 142 cases of pig's intestines experiencing circulation abnormalities, or 35.21 percent of cases. There were found to be, 1.41, 9.86, and 23.94 percent of various forms of alterations, such as oedema, haemorrhage, and congestion.

Circulatory Disturbances

1. Congestion

A total of 34 (23.94%) cases of congestion were reported. Singh (2013) ^[23] found a nearly identical prevalence of 22.93% in dogs, but Kumar (2014) ^[12] reported a higher incidence of 27.18% in camels.

Grossly, the affected tissue of the intestine had distended veins and engorged blood vessels on the serosal surface (Fig.1).

Blood was present in the tortuous, blood-filled blood vessels on the in testinal serosal surface. It was discovered that the mucus membrane was red in colour. The afflicted portion of the intestine had some blood squeezed from the incision surface. Albassam *et al.* (1985) ^[1], Thomlinson and Buxton (1963) ^[26], Faubert and Drolet (1992) ^[9], Lan *et al.* (2011) ^[14], and Burrough (2017) ^[4] all found very similar findings.

Microscopically, the submucosa displayed congestion and significant localised infiltrating inflammatory cells (Fig. 2). In some instances, the intestine exhibits lymphocyte infiltration in the mucosa and submucosa in combination with submucosal congestion (Fig. 3). In a few other instances, the intestines showed signs of cellular infiltration, degeneration, and sloughing of the surface epithelium. Chawla (2002) ^[6], Callinan and Russell (1975) ^[5], Singh (2013) ^[23], and Kumari *et al.* (2019) ^[13] all reported findings that were close in comparison.

Because of intussusception, volvulus, rotation, or incarcination, the venous outflow from the intestine is compressed quickly, causing congestion. Other factors such as *Escherichia coli*, *Clostridium perfringens*, and Porcine Sapelo Virus may also contribute to intestinal congestion (Tzipori *et al.*, 1992; Thomlinson and Buxton, 1963; Songer and Uzal, 2005)^[25, 26, 27].

2. Haemorrhage

The presence of this ailment was noted in 14 (9.86%) instances. Poonia (2018) ^[20] observed a substantially higher prevalence of 11.76% in buffalo.

Petechial haemorrhages were visible grossly on the mucosal surface (Fig. 4). The intestine's mucosa had haemorrhagic lines on the crests of folds. These had colours ranging from deep crimson to deep brown. Even through the serosal surface of the gut, the hemorrhagic lesions could be seen. These results closely matched those of other studies by Meena (2010)^[18], Poonia (2018)^[20] and Kumar (2014)^[12].

Desquamation of the villous epithelium was visible under a microscope, along with cellular infiltration and haemorrhages in the mucosa (Fig. 5). Niilo (1988) ^[19], Das *et al.* (2014) ^[7], Datta *et al.* (2004) ^[8], and Posthaus *et al.* (2020) ^[21] all reported findings that were almost identical.

The bleeding in the gut may be caused by helminth infections like Fasciola buski (Datta *et al.*, 2004) ^[8] or bacterial infections like *Clostridium perfringens* (Niilo, 1988) ^[19], Salmonella (Wilcock, 1979) ^[28] and or *Erysipelothrix rhusiopathiae* (Das *et al.*, 2014) ^[7].

3. Oedema

There were 2 (1.41%) cases of this condition reported. Kumar *et al.* (2015) ^[11] showed an almost identical incidence of 1.94 percent in camels.

Grossly swollen and thickened due to the presence of clear to slightly yellow-colored fluid in the affected region of the small intestine. The observations made by Alsop (2005) ^[2], Borrugh (2017) Kumar (2014) ^[12], and Rathi (2020) ^[22] were very similar to the results of this study.

Oedema, submucosal congestion, and a light lymphocytic infiltrate were seen under the microscope (Fig. 6). The submucosa of the gastrointestinal system underwent noticeable edematous alterations that thickened and enlarged it. Albassam *et al.* (1985) ^[1], Singh (2013) ^[23], Burrough (2017) ^[4], Love and Love (1979) ^[16] and Poonia (2018) ^[20] all noted nearly identical results.

Acknowledgments

For providing the facilities required to carry out the research, the author is grateful to the Dean of the College of Veterinary and Animal Science in Bikaner.



Fig 1: Photograph showing engorged blood vessels and distended venous network in serosal surface.



Fig 2: Microphotograph of intestine showing congestion along with severe focal infiltration of inflammatory cells in submucosa.H&E.100X



Fig 3: Microphotograph of intestine showing infiltration of lymphocytes in mucosa and submucosa along with congestion in submucosa. H&E.100X



Fig 4: Photograph of intestine showing petechial haemorrhages on mucosal surface.



Fig.5: Microphotograph of intestine showing desquamation of villous epithelium with haemorrhages and cellular infiltration. H&E.100X



Fig 6: Microphotograph of intestine showing oedema, congestion in submucosa with mild lymphocytic infiltration.H&E.100X

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