



Case Report

DYSTOCIA DUE TO LATERAL DEVIATION OF HEAD IN A MURRAH BUFFALO

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Abstract: Five years old pluriparous Murrah buffalo at full term with the history of straining since last 12 hours was presented to Veterinary Clinical Complex. The case was diagnosed as dystocia due to severe left lateral deviation of head and neck with history of complete gestation, straining and rupture of water bags without any further progress in the labor. The dead fetus was in anterior longitudinal presentation and dorso-sacral position. The postural defect of the foetus was corrected successfully using mutational procedures. The animal made an uneventful recovery.

Keywords: Buffalo, Dystocia, Lateral Deviation of Head and Neck

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Introduction

Dystocia due to lateral deviation of head and neck constitutes one of the commonest types of postural abnormality in anterior presentation causing dystocia in all species and it may arise during late gestation rather than during birth [1, 2]. The deviation may be in any direction. Lateral deviation of the head is observed most commonly in uniparous animals and the prognosis is grave when the fetus is dead or in deviations arising from muscle contractures [3]. Fetal causes responsible for dystocia in Murrah buffalo is around 40.84 percent, among which head deviations were 42.22 percent [4]. The present communication describes a case of dystocia due to lateral deviation of head and neck in Murrah buffalo.

Case History and Clinical Observations

A pluriparous full term pregnant Murrah buffalo was presented to Veterinary Clinical Complex, College of Veterinary Science and Animal Husbandry LUVAS, Hisar with a history of dystocia. The animal was straining continuously for 12 hours. Per-vaginal examination revealed fully dilated birth canal and severe left lateral deviation of head and neck of the fetus.

Treatment and Discussion

Before starting the manipulations, epidural anaesthesia (5ml, Lignocaine hydrochloride, 2%) and lubrication of birth passage was done with lukewarm liquid paraffin. Thereafter lateral deviation of head was corrected by applying traction through fixing eye hook into the mandible of the fetus. Through eye hook postural defect of fetus was corrected by applying traction in backward direction. Then two eye hooks were applied in the eye socket for fixing head of the fetus. Subsequently, fetal forelimbs were brought into birth canal. Then both the forelimbs were extended towards the vulva. With traction on the fetal head and the limbs simultaneously in a ventral direction, a dead male fetus [Fig-1] was delivered. Subsequently afterbirths were pulled out and four boliof furea (Furazolidone and urea) were placed intrauterine. There was absence of any apparent injury to the genital tract. Postoperative treatment included Inj. Calcium borogluconate-450ml, I/V; Inj. Dextrose Normal Saline (5%) - 3 liters, I/V;

Inj. Meloxicam-10ml, I/M; Inj. Avil 10ml (Chlorpheniramine maleate) I/M and Inj. Sonacef-3 (Ceftriaxone) I/M for 5 days. The buffalo [Fig-2] showed an uneventful recovery without any postpartum complications.

The fetal maldisposition results into dystocia. Inadequate timely intervention in such cases leads to fetal death and emphysema. But this case was brought to clinics within 12 hours of rupture of water bag though fetus was dead; emphysema was not evident as reported by different author in history of fetal death [5, 6]. Incidence of dystocia is greater in primiparous (17%) than multiparous (4%) animals [7]. Among the total dystocia conditions in cattle, fetopelvic disproportion constitute 45% and fetal mal-presentation constitute 26% [8]. At the beginning of treatment assessment of degree of cervical dilatation along with adequate lubrication of birth canal is essential for easy delivery of fetus [9]. If space is optimum for obstetrical mutation, traction can be applied on the fetus after plenty of lubrication [10]. But, in cases where birth canal is narrow, caesarean section is advised. In the present case the fetus was delivered by mutation and traction which prevented the post-operative complications due to caesarean section and soft tissue damage due to fetotomy.



Fig-1 Dead fetus delivered after correction of dystocia



Fig-2 Buffalo after removal of the foetus

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Application of research: This case report will help field veterinarians in handling of fetal dystocia arising due to fetal maldispositions

Research Category: Veterinary Gynaecology & Obstetrics

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Study area / Sample Collection: Teaching Veterinary Clinical Complex, LUVAS, Hisar

Breed name: Murrah Buffalo

Conflict of Interest: None declared

Ethical approval: Ethical approval taken from College of Veterinary Sciences, Lala Lajpat Rai University of Veterinary and Animal Sciences, Hisar, 125004, Haryana, India. The case was referred case for treatment.
Ethical Committee Approval Number: Nil

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