Dystocia due to fetal ascites with breech presentation in a Holstein-Freisian cow

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Abstract

Dystocia due to ascitic fetus with posterior presentation was relieved by obstetrical mutation, abdominocentosis and forced extraction in a Holstein Friesian cow

Key words: fetal ascitis, posterior presentation, Holstein Friesian, Dystocia

Dropsical conditions such as fetal ascitis, fetal anasarca and edema of the allantochorion and hydrops of the amnion or allantois or both are reported causes of dystocia (Roberts, 1971). Fetal ascitis is seen as occasional cause of dystocia in many species but occurs more frequently in cows and is associated with a dropsical condition of the uterus, mesotheliomas of the foetal abdomen and brucellosis. The present report describes a case of dystocia due to fetal ascitis with breech presentation in a Holstein Friesian cow

History and Observations

A pleuriparous full term pregnant Holstein- Friesian crossbred cow was brought to the Veterinary College hospital, Namakkal with the history of active labour since last six hours.

The animal was active, history revealed that the amniotic bag already ruptured without foetal parts projecting outside. Vaginal examination revealed fully dilated cervix. The foetal presentation, position and posture were breech (Posterior longitudinal), dorsosacral and flexed hind limbs respectively. On examination of foetus tail, anal opening, pelvic bone and hip joints were confirmed breech presentation. There was no anal reflex and pedal reflex. The flexed hind limbs were repelled, extended and on traction the foetus was unable to be taken out. Further examination of foetal abdomen revealed huge fluid filled sac with distension. The case was diagnosed as foetal ascitis.

Treatment and Discussion

Under epidural anesthesia using 2% lignocaine hydrochloride, snares were applied on both the extended hind limbs. Traction was applied on the hind limbs after lubricating the birth canal with obstetrical gel. The foetal abdominal distension was reduced by removing the ascetic fluid after tearing the abdomen with concealed knife/guarded knife/ Obstetrical hook. A huge quantity of clear-watery (Straw coloured fluid) around 30 litres was drained and siphoned out. The dead male foetus was delivered with traction (Fig.1).

Fig. 1. Delivered dead male fetus with ascetic fluid

Fig.2 Enlarged kidney of dead fetus

Enlargement of one kidney was seen in the dead fetus none other abnormality could be found (Fig 2).

Post obstetrically the dam was administered with intravenous 20% Dextrose-2 liters, Calcium borogluconate 450ml, Oxytocin 30IU and Enrofloxacin 15ml and Meloxicam 12ml intra-muscularly. The foetal membranes were removed immediately following the delivery of foetus and the dam recovered uneventfully.

Dystocia due to fetal ascites is an occasional dropsical condition in any species but most often in cows (Hoparkhe *et al.,* 2003) Fetal ascites with anterior presentation of fetus was reported in a buffalo (Palanisamy *et al.* 2007) Multiple congenital abnormalities which include foetal ascitis, wry neck and arthrogryposis were the cause for dystocia in a graded Murrah buffalo (Vidya sagar et al, 2010) A prolonged dystocia due to fetal ascites in a crossbred cow which was successfully managed with antibiotics, anti-inflammatory and supportive therapy following manual puncturing of fetal abdominal cavity with guarded knife to relieve dystocia (Roberts, 1971) But an application of a long obstetrical hook in the umbilicus was sufficient to release the ascetic fluid and deliver the fetus in the present case

In the present case, fetus was quite large, breech presentation and distended abdomen with ascetic fluid were observed. The cause for dystocia was due to distension of the uterus, fetal ascitis, secondary uterine inertia and lack of ferqussion's reflex relieved by carrying out obstetrical mutation, abdominocentosis and forced extraction.

Summary

Dystocia due to ascitic foetus with posterior presentation was relieved by obstetrical mutation, abdominocentosis and forced extraction is reported

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