Intas Polivet (2014) Vol. 15 (II): 426-427 *Short Communication*

Postpartum Uterine Prolapse and its Therapeutic Management in a Buffalo

Danveer Singh Yadav[1], Rashmi Choudhary[2], Jyotsana Shakkarpude[3] and Mohit Gautam[4]
College of Veterinary Science and Animal Husbandry
Nanaji Deshmukh Veterinary Science University (NDVASU)
Mhow - 453446 (Madhya Pradesh)

Abstract

A eight year old buffalo was presented with history of a normal parturition.The uterine horn had prolapsed along with fetal membrane 6-8 hrs after parturition. The fetal membranes were detached manually with finger tips from maternal coruncles avoiding bleeding. The uterine mass was again washed with saline and finally with 1:1000 Potassium permanganate solution. Then it was replaced to its normal anatomical position. To prevent further complications, antibiotic treatment was started. After detaching fetal membranes, the prolapsed mass became lighter and less voluminous, so was easy to reposite.

Keywords: Buffalo; prolapse; uterus

Introduction

Prolapse literally means 'to fall out of place'. In medicine, prolapse is a condition where organs, such as uterus, fall down or slip out of place. It is used for organs protruding through vagina. Uterine prolapse is a non-hereditary complication occurring immediately after parturition and occasionally upto several hours afterwards (Roberts, 1971). Uterine prolapse in cattle, particularly dairy cattle, generally occurs in first 12 hours post-calving. Frequent causes are hypocalcemia combined with irritation of birth canal, causing straining. Replacement of protrusion, which can range from size of a soft ball to hanging of entire uterus down below the hocks, is performed with cow in sternal recumbency, an epidural injection and hindlimbs 'frogged' rearwards to allow the pelvis to tip forward, easing replacement. Careful washing and cleaning prior to replacement is important ensuring that horns are completely everted once inside the cow. Often a Buhner suture is placed in vulva to prevent subsequent re-prolapse. The present communication places on record post partum prolapsed of uterus and its therapeutic management in buffalo.

1. Assistant Professor and Dairy Superintendent
2. Veterinary Assistant Surgeon
3. Assistant Professor and Corresponding author. E-mail: jyots.vets@gmail.com
4. Post Graduate Scholar

a - Brand of Natural Remedies, Bengaluru
b - Brand of Intas Animal Health, Ahmedabad

History and Clinical findings

A 8 year old buffalo was presented with history of a normal parturition. A normal female calf was born before six hours. The uterine horn prolapsed along with fetal membrane 6-8 hrs after parturition. The buffalo was healthy and in standing position. The prolapsed mass was hanging from vulva. The rectal temperature was recorded to be 101°F. Eye mucous membrane was congested. The placental cotyledons were attached to maternal coruncles. Severe bleeding was noticed. The newborn was apparently healthy and trying to suckle her mother.

Treatment

Considering severity and owner's agreement, prolapsed mass was washed carefully with warm saline. The fetal membranes were detached manually with finger tips from maternal coruncles avoiding bleeding. Then uterine mass was again washed with saline and finally with 1:1000 Potassium permanganate solution. Pop[a] in spray was applied in sufficient quantity over prolapsed mass. Then it was replaced to its normal anatomical position. To prevent further complications, antibiotic treatment was started with inj Xyrofur[b] (Ceftiofur) @ 1 mg/kg I/m, inj. Maxxtol-xp[b] (Tolfenamic acid) @ 4mg /kg I/m, inj. Anistamin[b] (Chlorpheniramine maleate) @ 5-10 ml I/m, inj. Nexbolic (Methyl ergometrine Maleate) @2-5 mg I/m, inj Mifex 450 ml I/V, inj. Tribivet[b] @5-10 ml I/m. Epidural anaesthesia with Xylocaine @ 6 ml was given. Then purse string suture with Intravenous set around vulvar lips were applied. Truss was

Fig.1: Uterine prolapsed mass with cotyledons

Fig. 2: purse string suture with I/V set

Fig. 3: Retension of prolapsed mass after suture

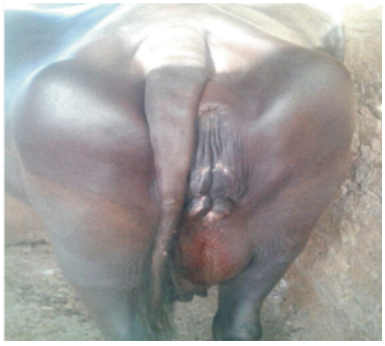

Fig. 4: Suture removal

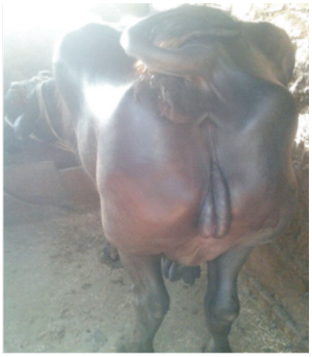

Fig. 5: Recovered animal

applied to prevent recurrence due to tenasmus. The same treatment was followed for three days and vaginal suture was removed after one week. The animal became healthy with resumption of milk production and normal fertility.

Discussion

Prolapse of uterus is a common complication of third stage of labour in cow (Joseph *et al*., 2001).The usual sequel of uterine prolapse is haemorrhage, shock, septic metritis, peritonitis, infertility or death. Sometimes in delayed cases, partial contraction of cervix interferes with proper repositioning, resulting in recurrence of prolapse. But in this case after detaching the fetal membranes the prolapsed mass became lighter and less voluminous, so was easy to reposite. Successful outcome of present case is justified by Bhoi and Parekar (2009). Moreover we had applied a truss, so even in presence of a tenasmus recurrence had not been noticed. Uterine prolapse is predisposed to a violent tenasmus and retension of fetal membrane in this case as reported by Roberts (1971).

References

Bhoi, D.B. and Parekar, S.S. **(2009)**. Post-partum uterine prolapse in a non-descript buffalo *Vet. World* **2**:149.

Joseph, C., Kulasekar, K., Balasubramanian, S., Kathiresan, D., Veerapandian, C. and Pattabiraman, S. R. **(2001)**. An unusual complication of post-partum uterine prolapse in a she buffalo-a case report. *Indian Vet. J.* **78**:57-58.

Roberts, S.J. **(1971)**. Veterinary Obstetrics and Genital Diseases, 2nd edn. C.B.S. Publisher and Distributors, Delhi. pp. 308-13.