

Surgical Management of Foetal Hydrocephalus in a Ongole Cow

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Abstract

The communication records dystocia in a ongole cow due to hydrocephalic foetus. The fetus was delivered per vaginally by puncturing with blunt scalpel, followed by its traction.

Keywords: Cow; dystocia; fetal; hydrocephalus; ongole

History and Management

A progressive farmer approached with complaint that his Ongole cow in third parity was straining since morning. The water bag had ruptured two hours back but fetus could not be delivered. External examination showed protrusion of moist forelimb through vulval lips. Vaginal examination revealed, anterior longitudinal presentation with fluid filled excessive swelling over the head which was obstructing the birth canal and was diagnosed as hydrocephalus (Fig. 1).



Fig. 1: Foetal hydrocephalus

To evacuate fluid, bulged part of foetal head was punctured with blunt scalpel after administering epidural anesthesia with 2% Lignocaine Hydrochloride (Fig. 2). Cotton rope truss was applied to both forelimbs. Blunt hook was applied to the

inner eye canthus and dead female foetus (Fig. 3) was tracted out. Post- operatively, the cow was administered Calcium borogluconate, Intamox^a (Amoxycillin and Cloxacillin) and Flunimeg^b (Flunixin Meglumine) along with fluid therapy for five days. The animal recovered uneventfully.



Fig. 2: Foetus surgically removed



Fig. 3: Dead foetus removed

The bulging appeared as a flaccid liquid filled sac covered with skin and contains clear serous fluid as in our cow. Exploration of head revealed accumulation of fluid in subdural space (Sastry, 1971) confirming hydrocephalus.

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Discussion

Hydrocephalus is assumed to arise from disturbances in normal circulation of cerebrospinal fluid resulting from its altered production or absorption (Fride, 1975). Severe form of hydrocephalus results in dystocia and that cannot be relieved by mutation and forced traction. A simple autosomal recessive gene (Roberts, 1986) has been reported to be linked with hydrocephalus in cattle. In more severe cases, there is marked thinning of cranial bones (Arthur, 1975). Congenital hydrocephalus has been described in various animal species including cattle (Sharada and Ingole, 2002).

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Beijing based Veterinarian - The first Human Infection with Monkey B Virus



The Chinese Center for Disease Control and Prevention confirmed that a Beijing-based Veterinarian was the first human infection case with Monkey B virus (BV). He was working for an institution researching on non-human primates. The 53 years old Veterinarian showed early-onset symptoms of nausea and vomiting, a month after he dissected two dead monkeys in early March, 2021.

The Vet had sought treatment in several hospitals, but eventually died on 27th May, 2021. In April, his cerebrospinal fluid was found positive for BV.

Monkey B Virus (BV) was initially isolated in 1932 and is alpha herpes virus enzootic in macaques of the genus *Macaca*. It can be transmitted *via* direct contact and exchange of bodily secretions and has a fatality rate of 70-80 percent. Monkey B virus poses a zoonotic threat to primate Veterinarians, animal care personnel and laboratory researchers.