Dystocia due to fetal lipomatous in a murrah buffalo

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Abstract

A pluriparous Murrah buffalo at full term suffering from dystocia since 8 hours with head and fore limb out of the birth canal was presented to clinics. Sub-cutaneous masses were palpable under the right eye. Fetotomy was performed and whitish mass in the abdominal cavity was removed. Further examination revealed enlarged right fetal limb. Limbs were extended and traction was applied and dead male fetus was delivered. Histopathological examination conformed Lipoma.

Key words: dystocia; calf; Lipoma; Buffalo.
Introduction

Fetal anomalies and monstrosities are the most common cause of dystocia in bovines (Shukla et al., 2007). Neoplasms of adipose tissue rarely occur in buffaloes and usually occur single and localized in the abdominal cavity (Ozmen, 2005). Genetics, environmental factors, carcinogenic drugs or miscellaneous toxic substances are among the probable causes of this neoplasm (Yeruham et al., 1999). This report describes the clinical and histopathological characteristics of a unique case of congenital lipoma.

Case history and observations

A pluriparous Murrah buffalo at full term suffering from dystocia since 8 hours was referred to Department of Gynaecology, NTR College of Veterinary science, Gannavaram. Buffalo was presented with a dead fetus hanging out from the birth canal up to the thorax region indicating anterior longitudinal presentation. Sub-cutaneous movable masses were observed under the right eye (Fig.1). Animal was dull, depressed, and exhausted due to severe straining and suffering with pyrexia. Detailed obstetrical examination revealed that the fetus was in dorso-sacral position with distended abdomen.

Fig. 1 Fetus with movable subcutaneous mass under right eye.

Treatment and Discussion

Epidural anaesthesia was administered with 5ml of 2% lignocaine hydrochloride and birth canal was lubricated with three litres of carboxy methyl cellulose. Fetal abdomen was punctured with a sharp scalpel and traction was applied but failed to deliver the fetus. Large quantities of fluid were drained from the abdomen. Length of the incision was extended and whitish masses in the abdominal cavity were removed manually. Traction was again applied but the fetus failed to be delivered. Later abdomen was completely cut down and large whitish mass was removed and traction was applied but fetus cannot be tracted out. On further examination enlarged right limb at thigh region was noticed. A snare was applied to the left fetlock and fetus was delivered by forceful traction after thorough lubrication. The dam was treated with Inj. Strepto-pencillin 5gm for 5 days and Megludine 15 ml for 3 days along with intravenous administration of 2liter DNS and 1liter Ringers Lactate and oral administration of Expar 500 ml for 3 days. Uneventful recovery was noticed.

Macroscopically, masses are freely movable over the underlying deeper tissues and have a distinctive greasy feel. A piece of whitish mass was collected in 10% formaline for histopathological examination. The formaline fixed tissue was processed and paraffin sections of 5-6 μ were prepared. Haematoxylin and Eosin stained sections revealed the presence of compactly arranged adiposities with eccentric nucleus. Lipomatosis are occasionally observed in the abdominal cavity of adult cattle, and they are very seldom in calves (Goldsmith and Hendrick, 2002). Relieving the dystocia in lipomatosis calves in anterior presentation is difficult when compared to posterior presentation due to accumulation of fat in abdominal cavity. Sometimes the long pedunculated lipomas that may be found in the abdomen may twine around the intestines causing strangulation (Sastry, 2006). Similar case of sub cutaneous masses under the eye was observed in brown swiss calf (Ozmen, 2005). These generally occur due to a simple, autosomal recessive defects with some modifiers (Roberts, 1971).

References

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