

DYSTOCIA DUE TO ANOMALOUS FETUS IN A NON DESCRIPT DOE

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ABSTRACT

A dead male fetus with arthrogryposis and brachygnathism in ventrotransvers presentation and its pervaginal delivery after partial fetotomy under epidural anaesthesia, in a pleuriparous non descript goat was reported.

Key words: Arthrogryposis, Brachygnathism, Ventrotransverse, Fetotomy.

INTRODUCTION

The abnormalities present at birth are called congenital abnormalities which may be caused by genetic factors or teratogens (Noakes et al., 2009). Arthrogryposis is described as non progressive malformation affecting one or more limbs. The anomalies of central nervous system often characterized externally by ankylosed joints (Roberts, 1971). The present case reports ventrotransverse presentation of dead male arthrogryposis fetus associated with brachygnathism in a non descript doe.

CASE HISTORY AND OBSERVATIONS

A three year old third parity goat presented to the Veterinary Clinical Complex, College of Veterinary Science, Proddatur, Andhra Pradesh with a complaint of dystocia. The animal was straining, off feed since yesterday and limbs of fetus protruded to the exterior. Upon observation two forelimbs and two hind limbs were identified that were ankylosed. The temperature recorded was 102.4°C and other vital parameters also within normal limits. Pervaginal examination revealed that all limbs belong to one fetus in ventrotransverse presentation.

TREATMENT AND DISCUSSION:

The perineal area of the doe was cleaned and epidural anaesthesia was induced. The birth canal was lubricated properly with carboxy methyl cellulose and the hind limbs protruding were repulsed into the uterus. The fetal head was grasped and brought to the vaginal passage by traction. As the ankylosed fore limbs were difficult to accommodate through vagina cephalotomy was performed. Then lubricating the birth canal, careful traction was applied to the fore limbs. A dead male with ankylosed limb joints combined with brachygnathism (Fig) was removed pervaginally. Upon gross examination of fetus all limbs were ankylosed, with muscle contractures in rear quarters and brachygnathism. The doe was administered with inj. Enrofloxacin @ 5 mg/Kg Bwt, DNS 5% (500 ml I/V) inj. Melonex @ 0.5 mg/Kg Bwt and advised to continue the treatment for four days.

The malformation of one organ or a part of the body is called as anomaly. If the deformity is extensive it is spoken as monster. If the similar defect appears

frequently, a genetic cause may need to be suspected but some of the defects may be due to environmental causes or teratogens. Arthrogryposis fetuses are expelled dead and are due to simple recessive genes (Roberts, 1971). The cause in the present case could not be ascertained. Arthrogryposis usually affects the fore and hind limbs and distal joints. This anomaly is reported more in calves, lambs piglets and foals and less frequently in goats (Doherty et al., 2000). In the present case arthrogryposis was associated with brachygnathism or shortening of mandible. The version is much easier in sheep and goats (Noakes et al., 2009) but in protracted dystocia caesarean section may provide an easier solution. In the present case version and partial fetotomy helped to remove the fetus pervaginally.

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Fig 1: Arthrogryposis fetus with ankylosed limbs and Brachygnathism in a non descript doe

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