

A RARE CASE OF COMPLETE POSTPARTUM CERVICO-UTERINE EVERSION THROUGH VAGINAL FISTULA IN A BUFFALO

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ABSTRACT

A rare case of complete eversion of cervix and uterus through vaginal fistula during postpartum period in a buffalo is reported.

Key Words: Cervix, Uterus, Eversion, Postpartum

INTRODUCTION

Genital prolapse is one of the most common mishaps during postpartum period which account for about 22 percent of the total reproductive disorders in buffaloes (Pandit, 1982). Commonly encountered genital prolapse in bovines during postpartum period is eversion of uterus through cervix (Sloss and Dufty, 1980), although eversion of uterus through vaginal fistula is reported in humans (Skalba and Jez, 1970; Hodges, 1999). The present report puts on record a rare case of complete cervico-uterine eversion during postpartum period through vaginal fistula in a Murrah buffalo.

CASE HISTORY AND OBSERVATION

A 7-year old Murrah buffalo was referred to the Veterinary Clinical Services Complex at the teaching hospital of Guru Angad Dev Veterinary and Animal Sciences University, Ludhiana with history of pre-partum vaginal prolapse, normal parturition and shedding of placenta three days back. Around 24h back, buffalo suffered from complete uterine prolapse which was reposed by a quack. Following reposition of prolapsed mass, there was profuse straining and vaginal bleeding. At the time of presentation of case in the clinics, about 8-10h had lapsed since the reoccurrence of prolapse. Since then, buffalo had received no treatment. The

buffalo was in third parity, none of the previous parturitions showed similar clinical signs.

Physical examination revealed good body condition, congested (including the conjunctiva) and normal capillary filling time. The routine clinical examination revealed rectal temperature, respiratory rate, heart rate and pulse rate. Examination of hanging uterus revealed complete cervico-uterine eversion with lacerations and edema of the exposed mass (Fig).

TREATMENT AND DISCUSSION

Following epidural anesthesia (10ml, 2% lignocaine HCl), hanging cervix and uterus was adequately washed with clean cold tap water followed by potassium permanganate solution. Per-vaginal examination revealed a big fistula in the lateral wall of vagina through which cervix and complete uterus were everted out. Urinary bladder was also found to be everted out and urine was carefully drained. Thereafter, attempts to repose cervix and uterus were made but success was not achieved. Another attempt was made to save the animal through complete amputation of the cervix and uterus. Profuse bleeding observed during the amputation of cervix and uterus and the inability to completely repair and repose the urinary bladder suggested guarded prognosis of the case. Therefore, with the consent of the owner, the animal was euthanized using saturated solution of magnesium sulfate intravenously.

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The vaginal fistula is suspected to have occurred due to improper handling of the uterine prolapse by a quack. Severe straining by animal might have lead to extensive increase in size of fistula followed by complete eversion of cervix and uterus through vaginal fistula. This case suggests that improper handling of uterine prolapse could be fatal.

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Fig : Complete cervico-uterine eversion through vaginal fistula in a buffalo

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