

DELIVERY OF MUMMIFIED FETUS BY CAESAREAN OPERATION IN AN ONGOLE COW

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ABSTRACT

A case of fetal mummification resolved by Caesarean operation in a pluriparous Ongole cow was reported and discussed.

Key words: Mummification, Caesarean operation, Ongole cow

INTRODUCTION

Mummification is an undesirable sequel to fetal death without abortion, often after complete ossification of bones where by the resorption of fetus can not takes place. This condition is said to be more common in pigs and cats carrying large litters as a consequence of uterine overcrowding and placental insufficiency (Arthur, 1996). In cattle, mummification occurs following death of fetus between 3 and 8 months of gestation and the data revealed the incidence as 0.13 to 1.80% (Berth, 1986). The present report is a case of mummified fetus delivered by Caesarean operation.

CASE HISTORY AND OBSERVATION

A pleuriparous Ongole (*Bos indicus*) cow was presented with a history that it was overdue from her prospective calving. Rectal palpation revealed a firm mass of fetus inside the tightly contracted uterus in the abdominal cavity. Cervix was hard, incurated and tightly closed. The case was diagnosed as fetal mummification.

TREATMENT AND DISCUSSION

It was attempted to treat the case by administering 15mg luprostitol (Prosolvin, Intervet, Holland) i.m. and, betamethasone 40mg and valthamide

bromide 50mg i.m. daily for 3 days. Per vaginal examination was performed once in 24 h. Cervical relaxation could not be observed except one finger dilatation of first two cervical rings. After 72 h a second dose of 15mg Luprostitol was administered. The case was kept under observation for 15 days but symptoms of abortion were not noticed. Per vaginal examination revealed failure of dilatation of cervix, hence necessitated caesarean operation. The operation was performed by ventral paramedian approach under xylazine sedation and local analgesia as per Roberts (1971). The fetus was dry with chocolate coloured pasty material covering the body (Fig). A reddish-brown chocolate coloured sheet of placenta was found loosely adherent around the fetus and it did not emit any foul smell.

Expulsion of mummified fetus by administration of luteolysin and betamethasone has been reported as early as 12-14h (Saxena *et al.* 2001) to 8 days (Srinivas, 2007) after completion of treatment. However, in non-responding cases, the fetus may have to be delivered by Caesarean operation as reported by Phogat and Gupta (1992). Caesarean operation may be indicated in cases where the parturition is over due and the animal has passed off the symptoms of parturition quite early. The failure of cervix to dilate may be related to uterine inertia and evidence suggests that incomplete cervical dilatation may not always respond to spasmolytics or hormonal agents (Arthur, 1996) thereby requiring fetal delivery by Caesarean operation.

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Fig. Mummified fetus