

Dystocia due to fetal anasarca in a buffalo

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ABSTRACT

Fetal anasarca occurs due to autosomal recessive gene and can cause severe dystocia especially when dead fetus becomes emphysematous. Dystocia due to fetal anasarca in a buffalo and its relief by forced traction is described.

Key words: Dystocia, Buffalo, Fetal anasarca

Fetal anasarca is a condition characterized by excessive accumulation of fluid in the tissue and body that causes subcutaneous oedema of the fetus. It is more frequently observed in cattle but may affect sheep and buffalo as well. The anasarca results due to disturbance of liquid exchange and may be of placental origin (Sloss and Dufty, 1980). The condition is associated with autosomal recessive gene (Roberts, 1986) and electrolyte imbalance (Faber and Anderson, 1990). The incidence of dystocia due to such a fetal monster is uncommon. However, these fetal monsters pose problem for the obstetrician because it is often impossible to palpate the whole structure per vaginum. The calf is usually aborted one to two months prior to term or at term, as such monsters usually cause dystocia (Sane *et al.*, 1994). When fetus is dead, it may become emphysematous thus aggravating the condition and resulting severe dystocia (Phogat *et al.*, 1993).

A 7 year-old nondescript pluriparous buffalo with 8 month gestation was presented to the university's teaching veterinary clinical complex with the history of difficulty in parturition from last 6 hours. Per vaginal examination revealed fully dilated cervix with fetal head, neck and fore limbs into the birth canal. On further examination fluid filled sac like structure was palpated into anterior portion of uterus. To deliver the fetus, birth canal was lubricated with liquid paraffin. Forced extraction by applying traction points to head and forelimbs under epidural anesthesia resulted in delivery of dead fetus. Fetus was under developed with short hind legs and stumpy tail. The abdomen and subcutaneous tissues were distended with fluid (Fig1). Monster was confirmed as a case of fetal anasarca.

In mild cases of anasarca, fetus can be delivered by traction but if fetus is too large then multiple incisions are to be made to drain liquid. Since the fetus was small and underdeveloped in this case, and the cervix was properly dilated, the condition of anasarca did not pose any hindrance in removing the fetus manually without using the technique viz puncturing the abdomen of the fetus, fetotomy or caesarean.

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Fig. 1 : Fetal anasarca in a pluriparous buffalo

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