

## Uterine inertia in a cat (Queen)

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### ABSTRACT

A rare case of maternal dystocia due to secondary uterine inertia in a cat has been reported in the present paper.

**Key words :** Uterine inertia, dystocia, cat

Kittening is generally normal as the size of the foetuses are smaller as compared to birth channel and kitters have short heads, small and flexible limbs (Sane *et al.*, 1982). A rare case of maternal dystocia due to secondary uterine inertia was recorded in a non-descript cat.

**Case History :** A pluriparus queen, due for kittening, was presented to the College Clinics with a history of normal and full completion of gestation period of 61 days. The animal showed normal signs of preparation for kittening for a period of 12 hours. On initiation of regular and forceful uterine contractions the first kitten was delivered normally followed by delivery of second kitten within 30 min. However, even after a lapse of 3 hours after delivery of second kitten the animal remained uneasy without any contractions. The queen cat was presented after a lapse of total six hours of second foetal expulsion.

**Treatment :** The animal was given oxytocin injection which failed to initiate the uterine contractions and hence clinical examination by per-vaginal palpation was carried out. The foetus was in posterior presentation with dorso-sacral position and the vaginal passage was found contracted and narrow. An attempt was made to remove the foetus by forceps assisted delivery. Use of whelping forces blindly through vaginal passage helped to secure

the hind limbs of foetus. Although the entire foetus was dragged into the birth channel with forceps traction, severance of limbs was noticed. The body of the foetus was taken out smoothly. The placental mass delivered out immediately. The animal was treated with antibiotics and fluid therapy for a period of 3 days and uneventful recovery was recorded.

Morrow (1986) reported that the instrument assisted delivery is not recommended in felines, as there is chance of injury to foetus and birth channel. However, in present case the uterine inertia which failed to respond to oxytocin injection and also the time lapse of (7 hours) in the normal process of kittening completed to use forceps for removal of foetus. A case of foetal dystocia in a cat has been recorded by Markandeya *et al.* (1992) but on scanning the available literature maternal dystocia in a cat was not traceable. The present case is rare recorded of secondary uterine inertia in a cat.

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## Uterine torsion in a goat

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### ABSTRACT

A rare case of uterine torsion has been reported in a goat. The torsion was corrected by the rolling of goat and live kid was born by traction.

**Key words :** Uterine torsion, goat

Uterine torsion, predominantly a complication of first stage of labor is most common in cows and occasional in does (Roberts, 1971). The present paper is a case report of uterine torsion in a doe.

**Case history, diagnosis and treatment :** A pregnant doe aged three years having completed its second gestation was presented with history of abdominal straining since last 12 hours. During the course of straining vaginal discharge was noticed. Water intake was normal, while feed intake was reduced since last few hours before straining. Apparently the animal appeared alert. The teats appeared to be engorged with milk. Pervaginal examination under epidural analgesia with 2.5 ml of 2% Lignocaine hydrochloride revealed a right side twist in the cranial vagina and one finger could cross the twist and touch the fetus. The case was diagnosed as right side post-cervical uterine torsion of approximately 120°.

To relieve the torsion it was decided to roll the animal, the decision was based on the freshness of the case as indicated by engorgement of teats with milk (Vashista, 1993). Before treatment single injection of dexamethasone (16 mg; i.m) was administered.

The animal was casted on the right lateral recumbancy and both the fore and hind limbs were separately tied with ropes. One complete roll was accomplished towards the right side in a coordinated manner so that both the fore and hind limbs were brought to the right side simultaneously. While rolling, the uterus containing the fetus, as felt by abdominal ballotement was fixed by applying pressure on the flank region with both the hands. After rolling the animal was brought in sternal recumbency and pervaginal examination indicated complete detorsion. The palpable fetus had right shoulder flexion which was corrected and a live female kid was born by traction. Post operative treatment comprised of streptopenicillin (0.5 g; i.m. for 5 days), along with single dose of Revici, a systemic haemostat (5 ml; i.m) and oxytocin (30 I.U; i.v). The animal consumed little water after delivery and was subsequently discharged. Post cervical uterine torsion can be effectively managed by rolling and fixing the uterus at the time of rolling

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