Dystocia due to fetal anasarca in a cross-bred cow

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Received: November 11, 2003 Accepted: July 2, 2005

ABSTRACT

The excessive accumulation of fluid subcutaneously or in other parts of fetus resulting into excessive generalized oedema of the fetus is usually termed as fetal anasarca. This usually causes dystocia at parturition because of its abnormal size. The emphysema of such fetus further complicates the condition. It occurs due to autosomal recessive gene. A similar case is placed on record in a crossbred cow.

Key words: Dystocia, cow, fetal anasarca

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Fetal anasarca is the excessive oedema of fetus and is mostly seen in cattle but may affect other species like buffalo and sheep. It is said to be due to autosomal recessive gene (Roberts, 1971). The affected calf is edematous with accumulation of fluid under the skin in the muscles, umbilical and body cavities. The manifestation of this condition varies and the weight of calves may be twice the normal. It may be 40-100 kg and the calf is usually aborted one to two months prior to term or may be delivered at term with dystocia (Sane et al., 1994). When fetus is dead it may become emphysematous also aggrevating the condition and resulting into dystocia (Phogat et al., 1993).

A crossbred cow in its fifth gestation with full term was presented to Veterinary teaching hospital with the history of dystocia. The attempt had also been made by local veterinarian to relieve dystocia but proved futile. The clinical examination of the animal revealed fully dilated cervix, anterior longitudinal presentation of the fetus and the fore linbs of fetus in the birth canal. The shape and size of fetus was felt abnormal and the fetus appeared to be dead. Fetal manipulations proved futile to deliver the calf. The space in the birth canal seemed insufficient for fetotomy. Evaluating

the gravity of case it was decided to perform laparohysterotomy. The laparohysterotomy was performed under local infiltration with lignocaine hydrochloride (Xylocaine 2%) through 14 inch long left flank incision and a dead oversized oedematous and malformed fetus was delivered.

The fetus was characterized by general odema, large size and excessive subcutaneous fluid accumulation hence it was diagnosed as fetal anaserca causing dystocia. The routine post operative care was given to dam for five days post operative. The skin sutures were removed on tenth day post operative. The animal was discharged with necessary advice.

ACKNOWLEDGEMENT

The authors are thankful to Dean College of Veterinary and Animal Sciences for providing necessary facilities.

RESERVOES

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