

Vaginal leiomyoma in a bitch

O.P. SHRIVASTAVA¹, V.P. CHANDRAPURIA¹ AND R.B. CHAUDHARY²

College of Veterinary Science & Animal Husbandry, Jabalpur (MP)

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ABSTRACT

An eleven-year-old Pomeranian bitch was operated for vaginal leiomyoma. An egg size lobulated ulcerated mass was extirpated from the base and mucous membrane was sutured. Bitch made an uneventful recovery.

Key words : Vaginal leiomyoma, bitch and surgical excision

Tumours of reproductive tract and organs are rare in bitches. The present article reports a case of vaginal leiomyoma in a Pomeranian bitch.

An eleven years old Pomeranian bitch was presented with persistent serosanguinous vaginal discharge with drops of blood and foul odour since a month. On clinical examination bitch was found dull with mild anorexia. A soft spherical egg size mass was palpated in the anterior vagina approaching cervix. The mass was tentatively diagnosed as vaginal tumour and advised for surgery. Ovario hysterectomy was not found suitable due to age and condition of the bitch.

Bitch was tranquillised with triflupromazine and spinal anaesthesia was given with 2% lignocaine hydrochloride. An egg size lobulated mass with ulceration at few places was explored on right upper floor of the vagina approaching towards cervix. Episiotomy was performed and adhesions of mass were cleared from surrounding tissues. After ligating the pedicle of tumour, it was extirpated from the base and mucous membrane was apposed with chromic catgut No.1/0 in simple continuous manner. The mass was solid, encapsulated with ulceration at two sites. It weighted 650 gms and measured 20 cms at its borders. It was pale to pinkish in colour. Vaginal wall was hyperplastic and thick. No metastatic lesions were observed (Fig. 1). Fluid and antibiotics were given for 5 days. Skin sutures were removed on 8th postoperative day. Bitch made an uneventful recovery and did not show any complication till six months postoperatively.

Histopathological examination of the tumour confirmed it to be leiomyoma. The leiomyomas varies considerably in size from a few mm to as much as 28 cms in



Fig. 1. Photograph showing bitch with the extirpated leiomyoma (post-operatively)

diameter. They are located in areas where smooth muscles are found (Russell *et al.*, 1976). In these tumours the basic cell type is a long spindle shaped cell containing an elliptical shaped nuclei are rather rich in chromatin and the nucleoli are not prominent. At times the muscles cells are interspersed with white fibrous connective tissue cells and it is difficult to determine whether the cells are fibroblast or myoloblasts (Russell *et al.*, 1976). Tumours of reproductive tract in bitch are rare and accounts only 2% of the total neoplasm (Shille, 1985). The most frequent tumours are non-malignant mesoblastic and leiomyoma which comprise 65% of the reproductive tract tumours. Darkshinkar *et al.* (1991) and Charan *et al.* (1994) reported ovarian and uterine dysgerminoma in Pomeranian bitches while in present case it was non-malignant leiomyoma. It simulates the description in literature that clinical signs in

¹Associate Professor of Obstetrics and Gynaecology

²Professor of Surgery

³PG Scholar, Pathology

¹Corresponding author

such tumour are often absent except serosanguinous discharge as also seen in present case. Blood was oozing out from the ulcerated parts. Signs of hyperestrinism were not observed might be due to sensitivity of the case. No other systematic signs were noticed, as the leiomyoma is benign in nature.

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