

Post-partum uterine prolapse in a doe

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ABSTRACT

A case of uterine prolapse and its management in a non-descript doe has been reported.

Key words : Uterine prolapse, doe, post-partum

Prolapse of the uterus is a common complication of the third stage labour in the cow and the ewe (Arthur *et al.*, 1996). However, in goats uterine prolapse following normal delivery or dystocia is rarely encountered (Dhaliwal *et al.*, 1986). Hence, a case of post-partum uterine prolapse in a non-descript doe is placed on record.

CASE HISTORY, OBSERVATIONS AND THERAPEUTIC MANAGEMENT

A non-descript doe approximately 3 years of age, in her second lactation was presented with the history of normal delivery of two kids, 12 hours back. Placenta was shed normally at 4 hours after kidding. But animal was straining and exhibiting eversion of uterus since last 6 hours. Animal was in standing posture and was dull and depressed. On examination, the prolapsed mass was soiled, inflamed and edematous (Fig. 1).

The caudal epidural anaesthesia was given using 2 ml of 2 per cent Lignocaine hydrochloride. The prolapsed mass was washed with 2 per cent potassium permanganate solution. The avverted mass was elevated to the level of vulva to relieve the prolapse. The uterus was massaged and rolled between hands and also repeated washings with salt solution were done to reduce the oedema. Then, the hind portion of the goat was elevated by folding both the hind limbs at the level of hock joints. Both the vulval lips were pulled apart



Fig.1. Post-partum uterine prolapse in a doe

and the mass was reduced with liberal lubrication using obstetrical gel. The proper replacement of the mass was ascertained by introducing the hand into the uterus through the cervix. No vulval retention suture was applied. Calcium borogluconate (150 ml) and 20 IU of Oxytocin were administered intravenously immediately after the reduction of the mass. Further, the animal was treated with 500 ml of 5 per cent Dextrose, 1.5 gm of Strepto-penicillin, 3 ml of Pheniramine maleate, 5 ml of Diclofenac sodium for 5 days. The animal recovered uneventfully.

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The relaxation of pelvic ligaments along with straining and lack of uterine tonicity might be the cause for occurrence of uterine prolapse in this case as described by Wani *et al.* (2000) in ewes. Arthur *et al.* (1996) stated that uterine prolapse are associated with the onset of uterine inertia during the third stage of labour when a portion of detached afterbirth occupies the birth canal and protrudes from the vulva. Further, uterine prolapse is an emergency case, which needs immediate treatment otherwise the interference in the blood supply to the prolapsed tissue may result in oedema and cyanosis, which may eventually

lead to gangrene of the uterus. Any delay in treatment of uterine prolapse may cause death of the animal due to shock.

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