

Protracted case of vaginal prolapse and its remedial measures in a buffalo

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ABSTRACT

Protracted cases of cervico-vaginal/vaginal prolapse can be cured using vaginopexy under good hygienic conditions. However, supportive therapy in the management of the vaginal prolapse is mandatory. Parental administration of calcium preparation has been found to be beneficial in minimizing the tenesmus. The present technique coupled with parental calcium therapy could be adequate and effective tool for the management of recurrent/protracted cases of cervico-vaginal/vaginal prolapse in cattle and buffaloes.

Key words: cervico-vaginal, vaginal prolapse, vaginopexy, calcium therapy.

There was a case of vaginal prolapse in Murrah buffalo which was successfully treated with modified Minchev's method (Roberts, 1986) for controlling prolapse of vagina by surgically fastening of cranial portion of vaginal wall through the lesser sciatic foramen to the dorso-lateral wall of the sacrosciatic ligament, muscles and skin of the croup.

Typically, prolapse of vagina is a condition of ruminants in late gestation. Occasionally, it is seen after parturition and rarely occurs unconnected with pregnancy or parturition. In few cases cystic ovarian degeneration may also be reported as one of the causative agent (Prasad and Agarwal, 2000). Its exact cause has not been ascertained but several factors are generally believed to play a part (Arthur *et al.*, 1996).

Buffalo aged about 10 years in its 2nd parity was maintained at Instructional Dairy Farm, Nagla of the University. The animal was having vaginal prolapse at frequent intervals during 10th month of gestation. The prolapsed mass was repositioned after cleaning under epidural anaesthesia. The animal showed prolapse of

vagina again and again, therefore, vulvar sutures with the help of silk tape and Buhner's needle were applied. Two days later, parturition was induced using dexamethasone, valelhamide bromide and cloprostenol. Calcium boro-gluconate was also given to aid in parturition. The vulvar sutures removed after 5 days. The fetus was alive, having lateral deviation of head and neck. After correction of extremities, a live male fetus weighing about 45 kg was delivered. The placenta was retained which was removed manually followed by treatment with bolus nitrofurazone and urea. Enrofloxacin along with supportive therapy of antipyretic and analgesics were also given for subsequent five days. The animal again showed prolapse of vagina and cervix. After reposition, vulvar sutures were applied again. Additionally, chlorphenamine maleate, meloxicam and dicyclomine HCl were given im. At the same time epidural anaesthesia along with calcium therapy and antibiotics (7 days) were also given. In spite of normal and odorless uterine discharge the animal was still straining frequently. Hence, vaginopexy under epidural anaesthesia was performed.

After proper restraining and taking aseptic measures, epidural anaesthesia was instituted. By drawing an imaginary line from the tuber sacrale to the

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Fig 1. Technique of vaginopexy in cow; placing suture material at left hind quarter.



Fig 2. Technique of vaginopexy in cow; placing suture material at both the hind quarters.



Fig 3. Technique of vaginopexy in cow; after completion of operation.

tuber ischii and then bisecting the line, the location for inserting the needle was determined. Landmarks for placing the stay sutures are necessary to avoid damage to sciatic nerve, blood vessels and rectum (Pierson, 1961). Gloved and lubricated right hand along with Buhner's needle was inserted into vagina. The left dorso-lateral wall of cranial vagina was explored with the hand for bone, blood vessels, nerves and rectum. The needle was guided by right hand in dorso-lateral direction and force was applied on the needle with left hand to pierce the cranio-dorsolateral wall of vagina and skin of the croup through lesser sciatic foramen. The needle was then threaded with silk tape (ribbon) and brought back into vagina and then outside the vulva (fig 1). The suture material was passed through a rubber connector (2 inch long and 5 mm diameter used as covering around the silk tape), the needle was threaded with the same end again, brought into vagina and pierced 1 inch apart from the previous site in the same manner. Both the ends above the skin were passed through sterilized gauge rolls and tied together tightly. The suturing of right lateral wall was done in similar manner (fig 3). Antiseptic dressing and parental antibiotic and anti-inflammatory drugs were administered daily for 7 days. Sutures were removed on 8th day after application.

This technique of vaginopexy was also applied in another two cases of recurrent prolapse in cross-bred cows at the University farm. In both the cases, as mentioned, rubber connector was applied to protect the vaginal mucosa from tearing. After removal of sutures in both cases, one side of rubber connector remained adhered in the wound tract created between vaginal mucosa and skin at hind quarter and was removed with difficulty. This might be because of narrow diameter (2 mm) of rubber connector. Hence, it is recommended that use of hard rubber connector with bigger diameter (4-5 mm) would be more helpful and would not pierce the vaginal wall. There was no prolapse of vagina subsequently however, both the animals developed mild vaginitis. Vaginal douching with 1% acriflavin lotion for next 5 days completely cured both the cases. Misra and Angelo (1981) treated 22 cases of vaginal prolapse and observed no unwanted sequelae in any of the cases treated with this technique.

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The XXIII Annual Convention of ISSAR will be held at the College of Veterinary Sciences & Animal Husbandry, Orissa University of Agriculture & Technology, Bhubneshwar, 751 003 from 7th to 9th Dec., 2007. Dr. D.N.Mohanty, Professor & Head, Deptt. of Gynaecology will be the Organizing Secretary. His contact phone Nos. are –

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NEWS FROM ISSAR CHAPTER

- ISSAR West Bengal Chapter conducted a round table conference on “Cattle and Buffalo Breeding Policy in West Bengal” on 14th July 2006 at West Bengal Veterinary Council, Belgachia Road, Kolkata 700 037.
- Shri Anusur Rahman, Honorable Minister, Incharge Animal Resources Development Department of West Bengal, inaugurated the conference.
- ISSAR Orissa chapter held the General Body Meeting on 10-09-2006 at the conference Hall of frozen Semen Bank, Cuttack and Dr. S.K.H. Ray, President Orissa chapter presided.