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Successful management of dystocia due to ankylosed foetal monster through fetotomy in a buffalo

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Dystocia is the most common sequelae of foetal monstrosities in bovines. Fetal anomalies and monstrosities of various kind causing dystocia in cattle (Arthur *et al*., 1989; Patel *et al., 2015*) and buffaloes (Kumaresan *et al*., 2003 and Shukla *et al*., 2006) have been documented. The present paper describes about management of dystocia due to ankylosed foetal monster through fetotomy in a Murrah buffalo.

Case History and Clinical Observations

A Murrah buffalo aged about four and a half years was presented to Teaching Veterinary Clinical Complex, DUVASU, Mathura in recumbent condition with history of full term pregnancy and continuous straining since last 3 days, while water bag was ruptured 48 hr before. Obstetrical manipulations were tried by the local vet to relieve the dystocia, but the exercise was proved futile.

Gynaeco-clinical examination revealed the completely dilated birth canal and an over sized fetal head present in the vaginal cavity. On further exploration, one fore limb and both the hind limbs were found at the pelvic inlet beneath the fetus while other fore limb was over the dorsum of fetus. Further thorough examination of the fetus revealed ankylosis of atalanto-occipital joint and all limbs, however, the size of the fetus was small. Examination revealed suspicion of a fetal monster and strategy was planned to remove the head by doing fetotomy in order to further assess the fetus.

Treatment and Discussion

After sufficient lubrication of birth canal and caudal epidural anesthesia (2% lignocaine hydrochloride) head was amputated with double barrel Thygeson's fetotome. After amputation of the head and assessing the fetus, it was decided to bring the fetus by applying traction on the hind limbs. This resulted in delivery of the fetus. The fetus was confirmed as monster due to ankylosis. The buffalo was stabilized with fluid therapy comprises of inj. dextrose normal saline and normal saline four liters each, calcium borogluconate 450 ml and antibiotic, anti-histaminic and anti-inflammatory drugs. There were signs of improvement and returning to normalcy of animal from next day. Animal was discharged with advice for the antibiotic and anti-inflammatory drugs along with fluid therapy for next three days.

The delivered fetus was a dead male calf. The lower mandible of the fetus was under developed

having ankylosis of all limbs & atalanto-occipital joint showing joint contracture (Figure). Congenital anomalies causing obstetrical problems have been well documented in cattle (Sloss and Dyfty, 1980; Shukla and Chauhan, 2004) and in buffaloes (Mahajan *et al*., 2006 and Shukla *et al*., 2006). Ankylosis is one of the musculoskeletal deformities frequently encountered as congenital disease (Leipold *et al*., 1996) in farm animals and pets. In this condition, there are permanent joint contractures.

Attempt to deliver such type of monsters per-vaginally through fetotomy may be one of the best method as it avoids cesarean operation, requires little assistance, reduces chances of trauma or injury to the dam through use of excessive traction and also economic to the farmer.

Conflict of Interest: All authors declare no conflict of interest.

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