

## SUCCESSFUL PER-VAGINUM DELIVERY OF A LIVE ASCETIC BUFFALO CALF

G.R. Bhat<sup>1,\*</sup>, Rooh Ul Amin<sup>1</sup> and G.S. Dhaliwal<sup>2</sup>**ABSTRACT**

Dystocia is often associated with accumulation of abdominal fluids in animals. This occurs less frequently in case of bovines (Noakes, 2009). Successful delivery of ascitic fetus in posterior presentation is reported.

**Keywords:** Murrah buffaloes, *Bubalus bubalis*, dystocia, ascitic fetu, live ascitic calf, per-vaginum

**CASE HISTORY AND OBSERVATION**

A seven years Murrah buffalo in fourth parity with the history of straining from last 12 h and water bag rupture was presented to the Teaching Veterinary Clinical Complex GADVASU. Per-vaginum examination revealed the posterior presentation with distended abdomen of fetus. Cervix was fully dilated and animal was straining on examination. Anal reflex was present in the fetus.

**TREATMENT AND DISCUSSION**

Without any delay, it was decided to give

a nick to the abdomen of fetus with the help of fetotomy knife after administration of Epidural anesthesia to the dam (2% Lignocaine). On incising the abdomen about ten liters of transparent serous exudates escaped out. As soon as fluid was drained out, the fetal abdominal volume was reduced and fetus was brought in dorso-sacral position. The hind limbs were secured and mild traction was applied to deliver the live male fetus. The fetus showed mild reflexes on clearing the mucus from nostrils. However the calf survived for 15 minutes and died even after injection of Dexamethasone (3 ml, i/m). Following delivery the dam was treated with normal antibiotic, analgesic and anti-inflammatory drugs and was discharged from the clinic with necessary advice. On examination the fetal external and internal anatomy was normal (Figure 1). Accumulation of peritoneal fluid resulted distension of abdomen which caused the obstruction. Posterior presentation in the present case might have prevented death due to aspiration during removal of fluid. Ascites of the fetus may occur due to an anomaly in development leading to obstruction on the lymphatics and thus prevents the disposal of peritoneal fluid that may be linked with diminished urinary excretion of water (Jubb and Kennedy, 1970). Evacuation of accumulated fluid under such conditions have already been

<sup>1</sup>Department of Veterinary Gynaecology and Obstetrics, Guru Angad Dev Veterinary and Animal Sciences University, Ludhiana, India, \*E-mail: shakesroshan@gmail.com

<sup>2</sup>Teaching Veterinary Clinical Complex, Guru Angad Dev Veterinary and Animal Sciences University, Ludhiana, India

reported (Honparkhe *et al.*, 2003). In the present case, following a correct diagnosis, dystocia due to fetal ascites was relieved. This procedure may avoid economic loss to the farmers and stress and postoperative complications of cesarean operation to the dam.

## REFERENCES

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Figure 1. Live ascitic calf.