DYSTOCIA DUE TO RARE FOETAL MONSTER IN A BUFFALO

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ABSTRACT

The present paper reports a case of dystocia due to a foetal monster and its successful removal after judicious traction in buffalo.

Keywords: dystocia, foetal monster, buffalo

INTRODUCTION

Developmental abnormalities of ovum, embryo or fetus occur in all species of domestic animals. Monstrosity is a disturbance of the development that involves various organs and systems which can cause great distortion of the individual (Vegad, 2009).

The monstrosities are associated with either infectious disease or congenital defects (Arthur *et al*., 2001) which may or may not interfere with birth. Abnormal duplication or disruptions of the inner cell mass in an embryo give rise to congenital fetal abnormalities with partial duplication of body structures. Duplication of cranial portion of fetus is more common than that of caudal portion (Roberts, 2004). It is important to know various types of monsters in animals that usually cause dystocia, which cannot be easily delivered and require a caesarean section or a fetotomy most of the time (Patil *et al*., 2004 and Sharma, 2006). This communication reports a rare case of fetal monster in a buffalo.

CASE HISTORY AND OBSERVATIONS

A buffalo in its 3rd lactation was presented with a history of prolonged second stage of labour with forceful abdominal contractions. Obstetrical examination revealed the presence of an abnormal foetus in the anterior presentation and both the fore limbs were flexed at the knee and both the fore limbs were at the knee joint resulting in blockage of the birth canal.

TREATMENT AND DISCUSSION

After lubricating the birth canal with liquid paraffin, under epidural anaesthesia using 2% lignocaine hydrochloride, gentle repulsion of the foetus towards uterus was first carried out. The flexed limbs were extended carefully using the fingers. A live foetus was delivered by applying judicious traction, which died after 2 days. Foetal dystocia occurred mainly due to oversize, mal disposition and monsters (Arthur *et al*., 2001). Hussain and Zaid (2010) reported that correction and traction of the foetus were the primary safe techniques to relieve dystocia.

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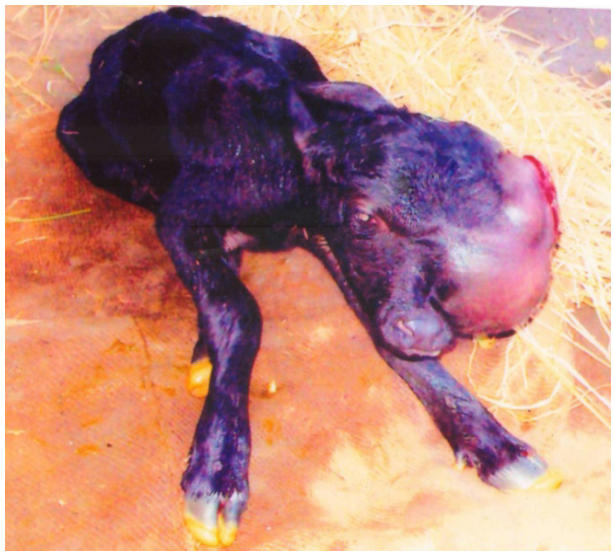

Figure 1. Photograph showing foetal head was well developed with absence of one eye.

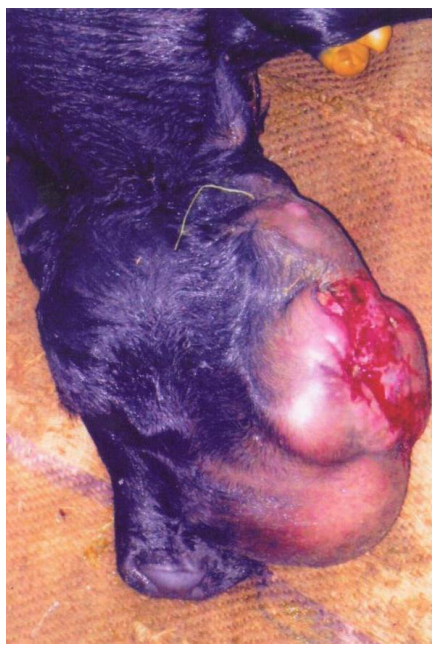

Figure 2. Photograph showing no distinct differentiation of the facial structures with absence of eyes, ears, nose, and mouth parts.

The recovery of the dam was uneventful after treatment with fluid therapy, antibiotics, anti inflammatory drugs and uterine lavage with antiseptics for 5 days. On examination of the foetus, it was observed that dicephalic foetus with well developed body parts. One foetal head was well developed with absence of one eye (Figure 1). Other head has no distinct differentiation of the facial structures with absence of eyes, ears, nose, and mouth parts (Figure 2). The foetus resembled dicephalic monster. The cause of anomalous development is multifactorial in nature (Rousseaux and Ribble, 1988). The important factors are prenatal viral infections, intra uterine exposure to poisons ingested by the dam, vitamin deficiency like Vitamin A and folic acid, hyperthermia and gene mutation (Ali, 2011). The present case seemed to be non-inherited teratogenic defect of development with early incomplete duplication of left cranial portion in head.

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