AN OMPHALOCELE IN A BUFFALO CALF: A CASE REPORT

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ABSTRACT

An omphalocele in a buffalo calf immediately after birth with ruptured amnion and its prognosis was reported.

Keywords: buffalo calf, umbilicus, omphalocele

INTRODUCTION

An omphalocele is a congenital defect in the body wall in which eviscerated abdominal organs are covered by amnion rather than skin (Baird, 1993). It should be differentiated from umbilical hernias, in which skin covers over the herniated organs.

CASE REPORT AND CLINICAL HISTORY

A new born graded Murrah buffalo calf presented to the veterinary polyclinic within few hours of birth with a history of prolapsed bowels. On gross examination, it was noticed the herniated mass included the abomasum, small intestines and part of the colon through the abdominal defect at the umbilical region (Figure 1). The amnion covering the herniated mass was ruptured and congestion of the everted organs set in. An absence of abdomen musculature and skin to the extent of 10 cm caudal to the sternum was noticed. No other congenital abnormalities were found. It was diagnosed as an omphalocele, and it was decided to correct it by hernioraphy.

TREATMENT AND DISCUSSION

Prior to the surgery, the soiled herniated mass thoroughly washed with normal saline and the calf was sedated with triflupromazine hydrochloride 0.01 mg/kg bwt.

During laparotomy, it was found difficult to maintain the proper approximation of the edges because of the absence of the abdomen musculature and skin to a larger extent and with severe gross contamination of the abdominal cavity, it was decided to euthanize the calf.

An omphalocele is a hernia that occurs in the embryo in which the abdominal contents protrude through the umbilicus and remain in the umbilical stalk, therefore covered by the amnion (Noden and Lahunta, 1985). This probably results from the failure of normal withdrawal of developing intestinal loop. During early stages of fetal development the intestines rest partly within the extra embryonic celome of the umbilical card. Later, the body wall encloses this area and the intestines are internalized. Failure of the intestines to return or failure of the four body folds to migrate
normally results in an omphalocele (Noden and Lahunta, 1985). It is also called as congenital umbilical hernia, abdominal fissure, umbilical eventration and examphalocele.

The cause of isolated omphalocele is not known, and while it is a developmental defect, it is not necessarily a heritable anomaly (Baird, 1993) although it has been suggested that it may be a recessive genetic trait (Ko et al., 1990).

The prognosis with omphalocele is often poor if severe abdominal contamination and ischemic necrosis of the everted organs occurs and there is extensive loss of abdominal musculature and skin, as observed in the present case. Compared with the umbilical hernia, risk of mortality was high. However, successful surgical recovery was achieved in some cases in which the amnion covering of the herniated organs was present (Baird, 1993).

REFERENCES

