A RARE CASE OF SPONTANEOUS RUPTURE OF THE CERVIX IN A NON-DESCRIPT BUFFALO

S. Manokaran

ABSTRACT

A rare case of spontaneous rupture of the cervix immediately after calving in a pluriparous non-descript buffalo and its successful treatment have been recorded.

Keywords: rupture of cervix, prolapse, non-descript buffalo, purse string suture, catgut

INTRODUCTION

Dystocia cases should be handled early and promptly on an emergency basis to save both the dam and the fetus. Prolonged dystocia, rough and improper use of obstetrical operations or improper manipulation of fetus leads to rupture of or damage to the reproductive organs (Roberts, 1971). This report records a rare case of spontaneous rupture of the cervix in a non-descript buffalo and its successful surgical management.

CASE HISTORY AND CLINICAL EXAMINATION

A pluriparous non-descript buffalo that had calved three times was brought to the PREPARE Veterinary Hospital* with the history of prolapse. The animal had normally delivered a live female calf 6 h previously without any assistance. Examination of the prolapsed mass showed a partially ruptured cervix.

TREATMENTS AND DISCUSSION

The animal was given epidural anesthesia with 5 ml of 2% xylocaine. The perineal region and the hanging mass were washed with running tap water and with 0.1% potassium permanganate solution. Examination of the prolapsed mass revealed a lengthy and pedunculated cervix with a rupture at the centre. The cervix was retracted and exteriorized through the vulva. The ruptured portion of the cervix was bluish and necrosed. The remaining portion of the cervix was apparently healthy and pale pink in color. The ruptured cervix was surgically incised between second and third annular ring and removed. The intact healthy portion of the cervix was sutured with purse string suture using catgut No. 2. Ice packs were applied to control the hemorrhage in the sutured area. The animal was administered inj. DNS (3 liters, i/v), inj. ampicillin-cloxacillin (4 gm, i/v), inj. chlorpheniramine maleate (200 mg, i/m), inj. meloxicam (200 mg, i/m), inj. oxytocin (50 IU, i/v) and inj. calcium borogluconate (250 ml, i/v). A shark liver oil and suphadimidine power paste

Department of Animal Reproduction, Gynaecology and Obstetrics, Veterinary College and Research Institute, Namakkal - 637 002, Tamil Nadu, India
was applied on the cervix. The fluid therapy, antibiotic, antihistamine and anti-inflammatory were continued for five days and the animal had uneventful recovery.

The rupture of the uterus, cervix and vagina usually occurs during prolonged dystocia with fetal emphysema, torsion of uterus, improper manipulation and traction of fetus, accident in fetotomy operations, protruding portion of bones after fetotomy or inexpert manipulation of the fetus by a layman (Roberts, 1971). In bovines, forced traction of the fetus in a normal presentation may result in rupture of cervix due to sharp bony prominence. In the present case, as the delivery had been unassisted, the rupture of cervix would have occurred due to the pressure exerted by extremities and bony prominences of the fetus on the cervix. The long and pedunculated cervix might be a predisposing factor for the rupture.

REFERENCES
