MANAGEMENT OF UTERINE TORSION IN A SHE BUFFALO

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ABSTRACT

A pluriparous full-term pregnant Murrah buffalo was presented to Teaching Veterinary Clinical Service Complex, with history of restlessness and excessive straining for the previous 8 h. Per vaginal examination revealed right-sided uterine torsion more than 180 degrees. The detorsion was achieved by laying down the animal in right lateral recumbent position with rolling in the same direction as that of torsion. A live foetus was delivered on application of traction.

Keywords: pluriparous, buffalo, straining, torsion, foetus

INTRODUCTION

Uterine torsion is defined as the revolution or twisting of the uterus on its long axis (Roberts, 2004). It is the complication of late first stage or early second stage labour, and excessive foetal weight and movements at the time of parturition seem to be the predisposing factors for causing uterine torsion (Arthur et al., 2001). Srinivas et al. (2007) stated that uterine torsion was the most important cause of maternal dystocia in graded Murrah buffaloes with an incidence of 83.33%.

CASE HISTORY AND OBSERVATIONS

A pluriparous full term pregnant Murrah buffalo was presented to Teaching Veterinary Clinical Service Complex, College of Veterinary Science and Animal Husbandry Mhow with history of restlessness and excessive straining from last 8 h. The animal had temperature of 101°F and was off fed with lack of rumination, rapid pulse and respiration rate and continuous switching of tail was observed. The vaginal mucosa was dry and vulval lips were drawn in. Per vaginal examination revealed right sided uterine torsion more than 180 degrees.

OBSTETRICAL MANAGEMENT

The animal was laid down in right lateral recumbent position with fore and hind limbs tied separately (Figure 1) and rolled in the same direction as that of torsion (Figure 2). After rolling through 180° body of the buffalo was pushed slowly over the legs and sternum (Figure 3) so as to continue rolling in the same direction. The vaginal passage of the animal was examined after each roll to find out whether the rolling was effective. After giving two complete rolls, the foetal fluids gushed out of the uterus (Figure 4) and the foetal head was now easily palpable.

On application of gentle traction to the foetus live buffalo calf was delivered (Figure 5). Intra uterine antibiotics 4 Furea bolus (Nitrofurazone

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Figure 1. Buffalo laid down.

Figure 2. Rolling of buffalo.

Figure 3. Buffalo bought in sternal.

Figure 4. Appearance of foetal fluids recumbancy.

Figure 4. Delivery of live buffalo calf.
60 mg + urea 6 gm) were left in the uterus and parenteral antibiotic therapy using Strepto-Penicillin (5 gms) was given twice daily with other supportive treatments including anti-inflammatory and analgesics (Pheniramine maleate 15 ml I/M and Meloxicam 15 ml I/M) for the next 5 days. Inj. Calcium borogluconate (450 ml), 250 ml I/V and remaining 200 ml was given S/C to restore the normal body condition. The animal expelled placenta normally within 8 h of parturition.

RESULTS AND DISCUSSION

Rolling of the dam is the simplest method for relieving uterine torsion (Sane et al., 1994). The objective of rolling is to suddenly and rapidly rotate the dams body in the same direction while the uterus remains stationary during the procedure. Right-sided uterine torsion is more common than left-sided uterine torsion. (Srinivas et al., 2007). The incidence of 180° to 270° uterine torsion is more common as compared to torsion of more than 270°. (Mathara and Prabhakar, 2001). In the present case, successful management of right-sided uterine torsion of more than 180° with delivery of a live foetus on application of traction was achieved.

REFERENCES


