EVENTRATION OF GRAVID UTERUS THROUGH A TRAUMATIC TEAR IN PROLAPSED VAGINA AND ITS MANAGEMENT IN A GRADED MURRAH BUFFALO

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Abstract: A pluriparous graded Murrah buffalo was informed to suffer from eventration of gravid uterus through a traumatic tear in prolapsed vagina. As it was difficult to reposition the uterus back into abdomen, foetus and uterine fluids were removed by hysterotomy and then repositioned. Vaginal tear was sutured and prolapsed mass was repositioned. Recurrence was prevented by rope truss application. Animal could not survive even with good post operative care.

Keywords: Graded Murrah buffalo, vaginal prolapse, trauma, uterine eventration, hysterotomy.

INTRODUCTION

Vaginal prolapse was one of the common pre partum gestational complications encountered in buffaloes (Drost, 2007) and multifactorial in aetiology. The prolapsed mass could be vulnerable to injuries like trauma, insect bites, animal bites, *etc.* or frequent getting up and lying down, which further complicates the condition. Simple prolapse was manageable by manual repositioning followed by application of rope truss or by administering calcium/ phosphorus injections, etc. (Purohit, 2018). The injuries caused should be addressed by surgical management only by suturing or by removing the necrosed parts (Dhillon *et al.*, 2006). The complicated prolapse had poor prognosis because of the septicaemia set in infections caused by contamination. A case of such trauma causing protrusion of gravid uterus through a tear in prolapsed vagina and its treatment in a graded murrah buffalo has been reported here.

CASE HISTORY AND CLINICAL OBSERVATION

A pluriparous pregnant graded murrah buffalo in a nearby village was informed to be suffering from eventration of gravid uterus through a tear in prolapsed vagina. Since then it was straining severely, getting up and lying down. The local para vets made futile attempts to reposition the uterus and administered fluid, anti-inflammatory and antibiotic drugs. On *Received Jan 21, 2024 * Published Feb 2, 2024 * www.ijset.net*

attending, the animal was dull, dehydrated, recumbent, making attempts to get up and straining severely. The vagina was prolapsed completely and had 7" tear on floor of prolapsed vagina and partial tear on mid vaginal roof area. The gravid uterus (about 6 m) including ovaries was found to be eventrated from the tear on the floor of vagina (Fig. 1). The area was soiled with dirt. The cervical seal was intact.

TREATMENT AND DISCUSSION

Epidural anaesthesia was achieved by injecting 8 ml of Lignocaine hydrochloride and the animal was restrained in left lateral recumbency. The prolapsed organs were thoroughly cleaned with normal saline. As repositioning of gravid uterus was impossible, hysterotomy was done and removed dead foetus along with gestational fluids and was closed in double inversion manner with chromic catgut no. 1. Later the uterus was repositioned through the vaginal tear, which was later closed along with 2 more tears in simple continuous manner. Total prolapsed mass was once again washed thoroughly with normal saline and reduced in to pelvic cavity. A rope truss has been applied to prevent recurrence of prolapse. Post operatively it was administered with 5 lt RL, 5 lt DNS, 450 ml calcium borogluconate, inj. ceftriaxone plus tazobactum @ 10 mg/ kg BW, inj. meloxicam @ 0.2 mg/ kg BW I/V and inj. chlorpheniramine maleate 15 ml I/M and this regime was followed for the next seven days. However, the animal could not recover and succumbed after 15 days.

Several reports are on record pertaining to the prolapse of genitalia in buffaloes and cows and their management (Purohit, 2019). Prolapse of vagina was a frequent pre-partum gestational complications observed in buffaloes owing to the weak suspensory ligaments, mineral deficiency, high protein diet, stall feeding, obesity, pluriparity, hilly terrain, *etc.* (Drost, 2007; Kumar *et al.*, 2018). The vaginal prolapse in this case could be ascribed to the malnutrition, mineral deficiency and continuous feeding of dry roughage. The prolapsed mass got ruptured because of the unexpected rubbing or hit to the sharp edges of the concrete pillars of the shed. Meagre reports are available in Veterinary literature pertaining to traumatic injuries to prolapsed genitalia in cows or buffaloes. Tulleners (1984) reported a case of jejunal loop evisceration from vaginal tear that occurred due to trauma. The evisceration of the gravid uterus occurred due to the severe straining and eventual vaginal rupture. As the space was insufficient to reposition through the tear, the uterus was incised on the greater curvature to evacuate the contents, *viz.*, foetus, foetal fluids and placenta. Epidural anaesthesia facilitated satisfactory manoeuvre. Prolapse of vagina, cervix and or uterus complicated by tear, injury, delay in presentation, etc. always had poor or guarded prognosis (Kumar *et al.*, 2018; Purohit,

2019). This buffalo also succumbed after 15 days after treatment, owing to stress, haemorrhage and septicaemia developed.

References

[1] Drost, M. (2007). Complications during gestation in the cow. Theriogenology. 68: 487-491.

[2] Dhillon, K.S., Singh, B.B., Kumar, H., Bal, M.S. and Singh, J. (2006). Treatment of vaginal prolapse in cows and buffaloes. Vet. Rec. 158 (9): 312.

[3] Purohit, G.N. (2019). Genital prolapse in buffalo. In: Purohit, G. N., Abdulkareem, T. A. and Eidan, S.M. Editors. Bubaline Theriogenology. International Veterinary Information Service. <u>https://www.ivis.org/library/bubaline-theriogenology</u>

[4] Kumar, A., Saxena, A., Anand, M. and Upmanyu, G. (2018). Genital prolapse in bovine and its management. Int. J. Sci. Envi. Tech. 7 (4): 1435-1439.

[5] Tulleners, E. P. (1984). Avulsion of jejunum with vaginal evisceration in a cow. J. Am.Vet. Med. Assoc. 184: 195–196. [PubMed]



Fig. 1: Photograph showing prolapsed vagina and eventrated uterus. The hand signal shows the site of vaginal tear.