Short Communication

SURGICAL MANAGEMENT OF DYSTOCIA IN A BARKING DEER (MUNTiacUS MUNTJAC): A CASE REPORT

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ABSTRACT
A three years old female Barking deer (Muntiacus muntjac) was presented with the complaint of dystocia. Immediate stabilization and caesarean section was carried out to save the life of patient. Further, the rupture of gravid uterus was revealed when the surgery was performed and accordingly treated.

KEY WORDS: Surgical, management, dystocia, Barking deer.

INTRODUCTION
Dystocia is the inability to expel fetus from the uterus even after completion of full term that may require manual assistance (Lombard et al., 2007). It occurs due to maternal and fetal causes. The maternal causes of dystocia are considered to be arising either because of the constriction or obstruction of the birth canal or due to a deficiency of the maternal expulsive force (Purohit, 2006 and Srinivas et al., 2007). The fetal causes include foetal over size, abnormalities of position, posture and presentation that may lead to dystocia. Among various maternal causes, dystocia due to narrow pelvis accounts for 9.2% (Sharma et al., 1992). Cervical priming is the first stage of labor in large ruminants and is a gradual process of dilatation and softening of cervix (Jackson, 2004). Failure of cervix to dilate completely is a common cause of dystocia in large ruminants (Das and Choudhary, 2014). Incomplete cervical dilatation in multiparous cows may be associated with uterine inertia caused by hypocalcaemia (Noakes et al., 2002). Caesarean section is indicated if it does not respond to medical treatment with pituitrin and calcium borogluconate (Roberts, 1971). Amongst all domestic animals, cattle and buffalo are considered the species in which the incidence of dystocia appears to be highest (Purohit et al., 2012). Moreover, the common causes of dystocia in rabbits include obesity, oversized kids, narrow pelvic canal, or uterine inertia (Bishop, 2002).

Case History and Observations
A three years old female Barking deer (Muntiacus muntjac) was presented with the complaint of dystocia. Per vaginal examination revealed calf in anterior presentation, head with flexion condition and limbs were not straight and struck in birth canal causing dystocia. Clinically the dam was active, with strong labour pains, and all other physiological parameters were within normal range. As the manual methods failed and further traction may harm the animal, emergency caesarean operation was conducted.

Treatment
The animal was infused 300 ml. Ringers’ Lactate, 3 ml melonex and restrained in right lateral recumbancy. The left para median site was prepared for the surgery. The local anaesthesia was achieved by 2% lignocaine hydrochloride (Krishnakumar et al., 2008) as the animal was well adopted to social environment. After cutting the skin, abdominal muscles and peritoneum, the gravid uterus was approached to retrieve the calf. Uterus was cleaned with normal saline (Kumar et al., 2013) and metronidazole solution and subsequently sutured in Cushing’ method with chromic catgut no.1. Abdomen was closed with chromic catgut no.1 in simple continuous pattern. Sub cutis and skin closed routinely (Fig. 1). Post operatively 400 ml. DNS, 500 mg Ceftriaxone for 5 days and 3 ml. melonex was administered for 3 days. This treatment was done along with regular wound dressing with povidone iodine once daily for 10 days. The suture was removed after 10 days and the animal recovered well (Fig. 2).
Summary
The surgical removal of the dead calf was done successfully in a Barking deer through caesarean section. Further, timely recognition of early signs of obstetrical-related complications, use of proper obstetrical techniques and proper post-operative care of the animal can help in ensuring a successful recovery. Most of the wild animals die due to capture myopathy during surgical procedures. But in this case as the barking deer was well acquainted with human beings, the surgery was performed under local anaesthesia.

REFERENCES


