



DYSTOCIA DUE TO FOETAL ASCITES IN A GRADED MURRAH BUFFALO- A CASE REPORT

Foetal ascites is seen as an occasional cause of dystocia in many species but occurs most often in the cow (Roberts, 1971). Ascites may be caused either by the overproduction or insufficient drainage of peritoneal fluid. Obstruction of the lymphatics, for various reasons may prevent the disposal of peritoneal fluid (Sloss and Duffy, 1980). Ascitic foetus in full term pregnancy may cause dystocia in cows (Arthur *et al.*, 1986; Rajasundaram *et al.*, 1998). The incidence of this condition in buffaloes is rarely reported. A case of dystocia due to foetal ascites in a graded Murrah buffalo is reported in this paper.

A graded Murrah buffalo aged about seven years was presented to the Veterinary College and Research Institute Hospital, Namakkal with a history that the animal was full term pregnant and showing straining for the last five hours after the rupture of water bag (amnion) without any progress in the parturition. Per vaginal examination revealed the cervix to be fully dilated and the foetus in longitudinal posterior presentation, dorso-sacral positions with both the hind limb extended into the vaginal passage. Traction on both the hind limbs did not help to deliver the foetus. Thorough examination of the foetus revealed that the foetal abdomen was filled with fluid. The case was diagnosed as foetal ascites.

Epidural anaesthesia was administered using two per cent lignocaine hydrochloride and embryotome knife was taken inside the uterus and foetal abdomen was incised at the flank region (Fig.). About 15 to 20 litres of yellowish watery fluid escaped from

the foetal abdomen through the incision. Thereafter the dead foetus was delivered per vaginam by simple traction. The foetus was comparatively small with distended abdomen. The foetal abdomen was incised and internal organs were examined. Both the kidneys were cystic which could be the reason for the occurrence of ascites in the foetus. The liver and lungs were normal. The rumen was distended with syrupy clear fluid. Roberts (1971) stated that foetal ascites is associated with the dropsical condition of the uterus, mesothelias of the foetal abdomen and brucellosis. Arthur *et al.* (1986) stated that ascites may be due to hepatic lesions, general



Fig. Foetal ascites.

venous congestion or urinary obstruction with or without rupture of bladder. Placental dysfunction consequent to incompatibility of dam and fetus may predispose to fetal dropsy. The dam recovered uneventfully following intravenous fluid and antibiotic therapy.

Summary

A case of dystocia due to foetal ascites in a buffalo and its management is reported.

References

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- M. Selvaraju¹, K. Ravikumar², M. Palanisamy³, V. Prabakaran⁴, R. Ravi⁵, R. Ezakial Napoleon⁶ and C. Chandrahasan⁷**
 Department of Animal Reproduction, Gynaecology and Obstetrics
 Veterinary College and Research Institute
 Namakkal – 637 002



1. Associate Professor and Head
 2. Assistant Professor, Dept. of Clinics
 3 & 4. Assistant Professors
 5. Junior VAS, AHD, Tamil Nadu
 6. Associate Professor and Head, Dept. of Clinics
 7. Dean