



ISSN: 0975-833X

Available online at <http://www.journalera.com>

International Journal of Current Research  
Vol. 13, Issue, 01, pp.15987-15988, January, 2021

DOI: <https://doi.org/10.24941/ijcr.40636.01.2021>

INTERNATIONAL JOURNAL  
OF CURRENT RESEARCH

## RESEARCH ARTICLE

### POST PARTUM UTERINE PROLAPSE IN TWO GOATS

\*Rahil Kittur, Syeda Mumtaz and Doddamani and Jahangirbasha

Veterinary College Gadag, Karnataka, India

#### ARTICLE INFO

##### Article History:

Received 21<sup>st</sup> October, 2020  
Received in revised form  
22<sup>nd</sup> November, 2020  
Accepted 28<sup>th</sup> December, 2020  
Published online 30<sup>th</sup> January, 2021

##### Key Words:

Cesarean section,  
C-section, Bovines,  
Young's approach

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Citation: Rahil Kittur, Syeda Mumtaz and Doddamani and Jahangirbasha. 2021. "Post partum uterine prolapse in two goats", *International Journal of Current Research*, 13, (01), 15987-15988.

#### ABSTRACT

Cesarean section ("C-section"), an incision through the abdominal wall and then into the uterus to deliver a calf potentially indicated in cases of dystocia when a calf cannot be delivered by fetal rotation and extraction or when vaginal delivery could endanger her life or the life of her calf. A prompt decision to perform a caesarean operation is important for optimum success. A successful prognosis depends on several factors, such as the skill and speed of the surgeon, duration of dystocia, physical condition of the dam, surgical environment, concurrent disease, and presence of a live calf. The following article discusses about the procedure of Cesarean section and the outcomes.

## INTRODUCTION

Prolapse of uterus is a common complication of the third stage of labour in goats. The disorder is more common in small ruminants than other species (Low and Sutheland, 1987). In the ruminant species the prolapse is generally a complete eversion of gravid cornua, (Noakes *et al.*, 2009). Severe prolapse with heavy straining is not well tolerated and fatalities from shock, exhaustion and infection are common. Excessive expulsive force of uterus can push uterus through birth canal immediately after fetal birth. In complicated cases of prolapse involving multiple organs, intra abdominal hemorrhage complicated with shock due to exposure of viscera of organs might be responsible for the death of animals. Rajashekar *et al.*, (1993) reported uterine prolapse in caprines where emergency was considered and immediate intervention were adopted to save of dam. Barnah and Bargohan (1996) reported a case of uterine prolapse in a goat due to retained foetal membranes from gravid horn and simultaneous uterine inertia.

## MATERIALS AND METHODS

Two four year old goats were presented with a history of dystocia which was relieved by manual intervention by the owners, later leading to prolapse of the uterus.

Clinical examination revealed prolapsed uterus with abdominal straining by the animal (Fig.1). The prolapsed mass was still healthy and partial placenta was attached (Fig.2). Rectal temperature was within the normal range. However there was an increased heart rate and respiratory rate. Caudal epidural anesthesia, using 2 ml of 2% lignocaine HCl was administered to desensitize the perineum and make manipulation easy. The hind quarters were raised and animal was made to stand on forelimbs with animal facing downwards to make the manipulation and replacement of the prolapsed mass easier.

The prolapsed mass was washed using mild antiseptic solution. Ice cubes were applied to soften the prolapsed mass and also to partially reduce the size of the prolapsed uterus. The prolapsed mass was carefully and gradually replaced. Gynecological gloves were inserted and ice cubes were kept into the vaginal passage and retained for five minutes. Inj. DNS @ 500 ml i/v was administered along with inj. B-complex (3ml), inj. Meloxicam @ 0.2 mg/kg i/m and inj. Enrofloxacin @ 5 mg/kg i/m. Inj. Tetanus toxoid @ 2 ml s/c TD was administered to prevent incidence of tetanus. Inj. Metronidazole @ 20ml + inj. enrofloxacin @ 5 ml was infused intra uterine. Bolus proctive @ (two boli bid for 5 days) were administered. Later, the owner was advised to feed mineral mixture @ 30gm per day;

\*Corresponding author: Rahil Kittur,  
Veterinary College Gadag, Karnataka, India.



**Fig. 1. Prolapsed uterus with abdominal straining**



**Fig. 2. Prolapsed mass with foetal membrane**

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## RESULTS AND DISCUSSION

Both the cases recovered uneventfully. Administration of epidural anesthesia and elevating the hind quarters made manipulation and repositioning of prolapsed mass easy (Noakes *et al.*, 2009). Prompt and systematic treatment aimed at treating prolapse and preventing complications associated with hemorrhage and shock due to exposure of visceral organs leading to death are essential to save the life of dam. Excessive expulsive force of uterus can push uterus through birth canal immediately after fetal birth (Markandeya, 2011). In the present cases the cause of prolapse was improper handling of the dystociaby the animal attender himself which is a very common practice in remote villages. However, timely intervention had saved the lives of both the animals. Hypocalcaemia is usually thought to predispose genital organ prolapsed (Markandeya, 2011). Hence, owners were advised to supplement mineral mixture after deworming the animals.

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