Short Communication

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Ectopic Pregnancy in a Non-Descript Goat

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ABSTRACT

Ectopic pregnancy denotes a pregnancy occurring outside the uterine cavity. This report presents a rare case of ectopic pregnancy in a nondescript goat, in which the foetus protruded through the abdominal wall due to the rupture of the uterine musculature peritoneum and muscle. Prompt surgical intervention successfully resolved the condition. The case underscores the importance of early diagnosis and surgical management to ensure favourable outcomes.
***Keywords*:** Ectopic pregnancy, Goat, Uterine rupture, Surgical management.

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INTRODUCTION

Ectopic or extra-uterine pregnancy is defined as the implantation of a fertilized ovum outside the normal uterine cavity. Ectopic pregnancy mainly refers to tubal pregnancy and abdominal pregnancy. Tubal pregnancy occurs when an oocyte is fertilized and implanted embryo that develops in the fallopian tubes, and is relatively common in humans. Abdominal pregnancy occurs when the gestation advances in the peritoneal cavity. Although commonly reported in humans, ectopic pregnancies are rare in domestic animals, except for the mare (Roberts, 1971; Niwas and Gaurav, 2018).

In this condition, fully developed foetus in uterus, and then it escapes either in abdominal cavity through rupture of uterus (Smith *et al.,* 1989 and Prabaharan *et al*., 2020) or in vagina through cervix (vaginal pregnancies). While this condition is well known in humans, it is rarely diagnosed in animals (Corpa, 2006). Ectopic pregnancy may also arise due to hydrallantois-induced pressure, as documented in bovines (Krishnakumar *et al.,* 2008).

The foetus that is concerned in ectopic pregnancy is usually sterile in nature, without any infectious organism that do not induce secondary peritonitis (Kumar, 2018[a] and Kumar, 2018[b]).

Ectopic pregnancies may result from uterine rupture or oviductal failure, with etiologies including uterine weakness, trauma, uterine torsion, or chronic inflammation (Roberts, 1971). The condition may also arise due to hydroallantois-induced pressure, as documented in bovines (Krishnakumar *et al.*, 2008). While ectopic pregnancies in animals are rarely diagnosed ante-mortem, they often involve sterile foetuses that do not induce secondary peritonitis (Kumar, 2018[a]; Kumar, 2018[b]). This report details a secondary abdominal pregnancy in a non-descript goat and its successful surgical management.

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CASE HISTORY AND OBSERVATIONS

A 3-year-old non-descriptive female goat was presented to the State Veterinary Dispensary Grade I, Virsi, Tah. Sakoli, dist. Bhandara under the Taluka Veterinary Mini Polyclinic, Sakoli with the history of completion of 5 1/2 months of pregnant and having swelling in the udder region for past 20 days. Animal was apparently healthy and no abnormal genital discharge was seen. Clinical examination revealed that the goat was dull, depressed, reduced appetite, and weakness. On palpation of the udder region, a hard mass suspected to be fetal tissue was detected protruding through the anterior abdominal wall, suggesting herniation. Upon incising the area, a fully developed fetal head was exposed, confirming the diagnosis of an extra uterine pregnancy. With the owner's consent, surgical correction was initiated.

Fig 1. Fully developed foetal head protruded from abdominal cavity

Fig 2. Surgical intervention

Fig 3. Suturing of incised part

TREATMENT AND DISCUSSION

The area near the right side of udder was clipped, shaved, and disinfected. Local anaesthesia was administered around the area to be incised using 2% lignocaine hydrochloride. The surgical site was prepared with 5% povidone iodine. A 7-8 cm incision was made through the skin and subcutaneous tissue at the site of protrusion. A full-term, non-viable fetus was carefully removed. The umbilical cord remained attached to the uterine surface through a small rupture, indicating a secondary abdominal pregnancy. Excess fetal membrane and sac tissue were excised. The surgical wound was closed using interrupted horizontal mattress sutures with 2-0 silk. The site was dressed and bandaged. Postoperatively, the goat was treated with Inj. Ringers Lactate 200 ml i/v, Inj. Cefotaxime @ 20 mg/kg i/v, Inj. Flunixin meglumine @1.2 mg/kg i/v, Inj. Chlorpheniramine maleate 2 ml i/m. Antibiotics, fluid therapy, anti-inflammatory and anti-histaminic drugs were continued for five days. The animal recovered uneventfully.

CONCLUSION

Ectopic pregnancy, though rare in goats, should be considered in cases of unexplained abdominal masses during gestation. Prompt diagnosis and surgical management are crucial to saving the life of the animal and minimizing economic losses. Further studies are warranted to better understand the etio-pathogenesis and to develop preventive strategies.

CONFLICT OF INTEREST

Authors do not have any conflict of interest.

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