Short communication

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Dystocia in a Goat Due to Triplets

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ABSTRACT

This communication depicts about the successful treatment of the dystocia due to triplets in a goat.
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INTRODUCTION

Dystocia in small ruminants is considered of low incidence worldwide (<5%). (Brounts *et al., 2004,* Purohit, 2006, Sharma *et al.,* 2014 and Bhattacharyya *et al.,* 2015). Dystocia is considered when first or second stage of parturition is blocked or not progressed within stipulated time period of 30 minutes. The symptoms shown by the dam during the first stage of parturition are the isolation from the rest of the herd, restlessness, loss of appetite. Towards the end of this stage, the abdominal contractions which are forceful becomes more frequent and stronger. This is supposed to be the essential process which help to push the fetus in the birth canal. Fetus is get expelled during the second stage which generally occurs within 15-30 minutes. Expulsion of the foetal membranes is last stage of the parturition that completed usually within 4-6 hours. (Brounts *et al.* (2004), Purohit (2006), Sharma *et al.,* 2014 and Bhattacharyya *et al.,* 2015). Early recognition and interference in cases of dystocia will result in a satisfactory outcome both for the dam and the neonate.

CASE HISTORY AND OBSERVATIONS

An adult doe, approximately 3 years old and weighing 25 kg was presented to Out Patient Department OPD, Mumbai Veterinary College, Parel with a history of straining and no progress in the 2nd stage of kidding since last six hours. The case was handled by the local veterinarian unsuccessfully and was presented as a case of dystocia. Clinical examination revealed presence of one forelimb at the vulva with ruptured foetal membrane. On per vaginal examination, another forelimb was palpated in the vaginal passage and complete dilatation of cervix was. The exam-

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ination revealed the presence of two foetuses in anterior presentation where the more advance foetus showed right lateral head deviation and right shoulder flexion posture entangled with left forelimb of another foetus. This posture resulted in the engagement of foetus in birth canal and the condition was diagnosed as foetal dystocia due to twins.

TREATMENT AND DISCUSSION

Dystocia or difficult birth, results in huge economic losses to farmers either due to death of fetus or dam or by adversely affecting dam fertility (Mcsporran *et al*., 1980). The causes of dystocia have been reported either due to maternal or fetal in origin (Arthur *et al.,* 1996). Fetal mutation to correct the maldisposition and proper traction are the safe technique to relive the dystocia (Taha *et al*., 2005). In goats with fetal maldisposition, fetal mutation was carried out and the fetuses were delivered per-vaginally.

The doe was administered with Inj. Avilin Vet (MSD Animal Health) @ 2 mg/kg and Meloxicam (Intas Pharmaceuticals) @ 0.5mg/ kg b.wt intra muscularly along with saline including Ringer's lactate @ 300 ml and dextrose 25 % @ 200 ml intravenously was administered to provide analgesia, compensate for electrolyte, fluid and glucose loss and to prevent shock during foetal manipulation and extraction r The birth passage was lubricated properly using Carboxymethyl Cellulose CMC. Repulsion was done and malposture of more advanced foetus was corrected manually and dead fetus was removed by applying forced traction (Fig. 1).

The second foetus was also found to be in shoulder flexion malposture of head and shoulder. The shoulder flexion and lateral head deviation of the second foetus was also corrected and dead fetus was extracted. Upon abdominal palpation presence of one more foetuses in the uterus was felt. Hence the per vaginal examination was carried out and the third live foetus was removed which was in normal disposition (Fig. 2). The placenta was removed manually and Cleanex (Boehringer pharma) Furea boluses were placed in the uterine lumen. The uneventful recovery in terms of apparent health was observed on next day and the case was discharged.

CONCLUSION

Delayed cases of dystocia in goats with prolonged attempts for vaginal delivery may seriously affect the outcome of the case. Early intervention with appropriate approach with due care during dystocia handling can save the whole litter and minimum harm to the dam.

CONFLICT OF INTEREST

None

Fig. 1: Two dead Foetuses

Fig. 2: Live foetus and Doe

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