DYSTOCIA IN CAPTIVE BONNET MONKEY - A CASE REPORT

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ABSTRACT

The present communication records the occurrence of dystocia in a Bonnet Monkey due to incomplete dilatation of cervix which was managed by caesarean section.

Key words: Bonnet Monkey, Incomplete Dilatation of Cervix

INTRODUCTION

Dystocia is one of the most common factors which contribute to the prenatal mortality in non human primates (Aksel and Aber, 1983). Predisposing factors for the dystocia in non human primates are abnormal fetus size, presentation and position as well as narrow maternal pelvis (Fortman *et al.*, 2002).

CASE HISTORY AND OBSERVATIONS

An eight year old female Bonnet Monkey was presented to the outpatient department of Bombay Veterinary College with history of anorexia, distended abdomen and restless since 2 days, with no definite history of duration of pregnancy. Abdominal palpation reveled that the animal was pregnant. There was no vaginal discharge and on per vaginal examination it was observed that the cervical ring was tight, cervical dilatation was absent and animal was in severe abdominal pain and restlessness.

TREATMENT AND DISCUSSION

Considering the critical stage of pregnancy it was admitted in the S.P.C.A. Animal Hospital, Mumbai for observation and necessary treatment (Regd No.1846).Initially it was treated with intravenous fluids and multivitamins.

The animal was treated with calcium gluconate intravenously @ 1.5 ml per kg body weight and Inj.Epidosin 1 ml (8 mg) was administered intramuscularly for the cervical dilatation, Inj.Epidosin 1 ml was repeated after half an hour and after one hour the animal was re-examined per vaginaly for the cervical dilatation, which revealed mild cervical dilatation. However no further progress was observed in the cervical dilatation. Sonogram of the ventrodorsal view of the abdomen revealed skeleton of a fully developed fetus.

It was decided to perform emergency caesarian section. The animal was prepared for the surgery by shaving and scrubbing the lower abdominal portion. Atropine sulphate was administered subcutaneously @ 0.02 mg per kg body weight prior to sedation with xylazine @ 0.5 mg per kg body weight. Ketamine hydrochloride was administered as general anesthetic @ 10 mg per kg body weight intra muscularly.

By positioning the animal on dorsal recumbency the incision was made on the lower abdomen one cm below the umbilicus. Abdominal muscles and peritoneum was incised. The gravid uterus was exteriorized from the abdomen and vertical incision was made on the avascular area of the body of uterus. Dead fetus was removed from the uterine cavity after cutting the naval cord and uterine cavity was flushed with warm normal saline and mild Betadine. The uterus was then sutured with 4-0 Vicryl by Lambert and Cushing suturing method. The abdominal cavity was closed with routine mattress suture using Vicryl no. 2-0 and the skin was sutured with nylon. It is recommended by many surgeons that sub-cuticular sutures should be done to avoid further complications of removal sutures by monkey itself. In present case the monkey was tamed and fortunately she did not remove the skin sutures. Post operatively animal was given the Cefotaxime @ 25 mg per kg body weight and Metrogyl @ 15 mg per kg body weight intravenously for seven days and surgical wound was dressed as a routine manner. After complete healing of the wound the animal was discharged.

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Failure of cervix to dilate is an outcome of hormonal dysfunction which is common in dairy animals (Arthur, 1964). In the present case also dystokia occurred due to incomplete dilatation of cervix which might be due to hormonal dysfunction. Fetus might have died due to delay in presenting the case for treatment by the owner.

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