MANAGEMENT OF FOETAL MACERATION IN A DOE CARRYING TWIN

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ABSTRACT

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A case of foetal maceration in a non-descript doe and its successful obstetrical management is reported in the present communication.

Key words: Doe, Foetal maceration, Twin

INTRODUCTION

Foetal maceration may occur at any stage of gestation and has been observed in all species (Roberts, 1971). The condition may develop as a consequence of failure to expel an aborting foetus. Bacteria enter the uterus through the dilated cervix and by a combination of putrification and autolysis the soft tissues are digested, leaving a mass of foetal bones within the uterus (Noakes *et al.*, 2001). Conditions of foetal maceration in goat are earlier reported by Mehta *et al.* (2005) and Ajitkumar *et al.* (2007). In the present communication, foetal maceration and its successful management in a non-descript goat is reported.

CASE HISTORY AND OBSERVATIONS

A non-descript doe in her first kidding was presented to the Teaching Veterinary Clinical Complex of the institute with a history of successful delivery of a kid about twelve hours back and since then bleating and straining continuously. On clinical examination, the anorextic doe had a rectal temperature of 102.2°F and putrefied placenta was hanging outside vulva Abdominal ballottement revealed a foetal head laying in the birth canal. The animal was secured with the hind limbs uplifted and examined per vaginum with the help of a lubricated vaginal speculum. There were foetal bones present just anterior to os externus and the condition was diagnosed as macerated foetus.

TREATMENT AND DISCUSSION

The recovery of the foetal bones was effected with the help of forceps. First the bones of the forelimbs, then skull and then the hind limbs were recovered (Fig.). On successful recovery of the bones intrauterine boluses were introduced in the uterus. Along with the parentral antimicrobials, oxytocin 5 IU and 200 ml DNS were administered. Antimicrobial treatment was advised to continue for next four days with oral prescription of ecbolics. The anorexia disappeared and the animal had uneventful recovery in seven days.

Rarely in cattle, sheep and horse one fetus die in the first half of gestation and macerate and are expelled with the placenta and the normal twin fetus (Roberts, 1971). In the present case also, there was a normal delivery of a live kid while other was macerated. A similar type of condition was earlier reported in doe by Sontekke *et al.* (1999). Mehta *et al.* (2005) reported a case of fetal maceration in doe where three foetuses were delivered normally and the fourth fetus was macerated. They opined that the long time in the process of delivery of three foetuses might result into fatigue of the uterine muscle and diminished the strength of uterine contraction and the infection gains entry causing maceration. The cause of foetal death in the present case cannot be ascertained; however it may be due to some infection or injury. After death of the foetus the microorganisms present in the uterus might lead to foetal maceration.

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Fig. Bone pieces of macerated caprine foetus