Short Communication

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Management of Cervico-vaginal and Rectal Prolapse in Goat during Advanced Pregnancy

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ABSTRACT

An apparently healthy doe with a history of bright red protruding cervico-vaginal and rectal mass through the vulva and anus, respectively, and continuous straining efforts was successfully managed till kidding with Buhner sutures using silk under epidural anesthesia.

Key words: Cervico-vaginal prolapse, Rectal prolapse, Doe, Buhner's suture

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INTRODUCTION

Cervico-vaginal prolapse is defined as a partial or total eversion of the cervix and vagina through the vulva. Cervico-vaginal prolapse is seen in all species but it is most common in cattle and sheep (Bosse *et al.,* 1989).In does, it has been reported during the last 5 weeks of pregnancy and is less common than ewe (Baker, 1980).Hormones are the most common cause, followed by dietary and managemental factors (Bhat *et al.,* 2022).Other factors include relaxation of pelvic ligaments, loss of tone due to hypocalcemia, estrogenic diet like clover poisoning, high serum estrogenlevel and intra-abdominal pressure due to large sized uterus (Drost, 2007).Rectal prolapse usually develops as a result of excessive straining and tenesmus (Colins and Gary, 1989). Rectal prolapse occurs in long-standing cases of vaginal prolapse and generally complicates the condition. In all species of domestic animals, rectal prolapse can occur, but it is most common in pigs, occasionally in cattle and occurs rarely in does. The present study reports management of cervico-vaginal and rectal prolapse during advanced pregnancy.

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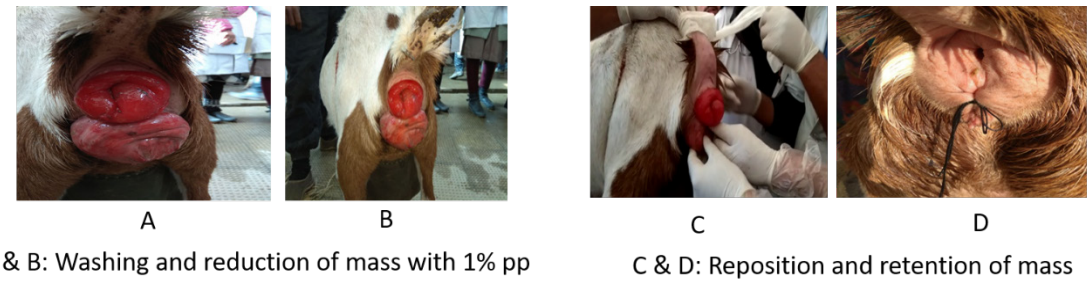

Fig 1: Reduction, Reposition and Retention procedure for management of cervicovaginal and rectal prolapse in Goat (pp; potassium permanganate solution)

CASE HISTORY AND OBSERVATIONS

A 2.5-year-old doe in her second parity and advanced pregnancy was presented at our referral hospital of Veterinary Clinical Complex, the Sher-e-Kashmir University of Agricultural Sciences and Technology, with a history of simultaneous bright red protruding masses through the vulva and anus and frequent straining efforts. Clinical examination of the presented case revealed protrusion of whole vagina and a part of cervix below the mass. Thus, the condition was cervico-vaginal and rectal prolapse. The animal was in distress and was showing severe straining efforts. All the physiological parameters were normal.

TREATMENT AND DISCUSSION

The animal was restrained in the standing position, the tail was held with a bandage and prolapsed organs were cleansed with a diluted potassium permanganate (PP) solution in cold water (0.1% PP solution) under epidural anesthesia with 2% Lignocaine hydrochloride (Lox 2%, *Apollo pharmacy*). Parts A, B, C and D of the Fig. 1 represent the managemental steps as indicated against each for the prolapse. The size of the prolapsed organs was reduced by using cold water. Lignocaine jelly (Lox 2%, *Apollo pharmacy*) and Framycetin skin cream (Soframycin, *Encube Ethical Private Limited*), combined in 2:1 ratio, were applied locally on the exposed mass to minimize the pain and discomfort and also disinfect the mass. Firstly, the inverted cervico-vaginal mass was repositioned and then rectal mass with a closed cone-shaped hand to their normal positions judiciously. Finally, the prolapsed mass was retained with Buhner's suture technique with some modification. We used double silk thread for closure, guided with a large sized weaving needle subcutaneously around the vulva. The retention suture was kept and advised to be retained for a period of 7 days and a gap of one finger was kept for urination. The owner was instructed to keep the animal's hindquarters elevated and to avoid bulky or estrogenic diets until kidding. The sutures were removed after one week and the doe delivered two fetuses normally following next 10 days.

In caprine, cervico-vaginal prolapse is less common and can occur in late gestation. The etiology of this condition in goats is same as that in bovine. Genital prolapse is related to high estrogenic feeds/green, or to maintaining animals on slopes during advanced pregnancy (Baker, 1980). In goats, it is mostly associated with twin pregnancy as reported by (Clarkson and Faul, 1990, Ayen and Noakes, 1998 and Anya *et al.*, 2006). Rectal prolapse is generally the sequel to the lesions of cervico-vaginal mass or long-standing cases (Amoud, 1974). Rectal prolapse is usually encountered with long standing cases of vaginal prolapse leading to chronic irritation and violent straining, tenesmus and increased intra-abdominal pressure (Sastri and Rama, 2001). Some authors associate this with relaxed anal sphincter associated with hypocalcemia (Radostits *et al.*, 2009) and an increased estrogen level during advanced pregnancy. The presented case was well managed by reduction and repositioning procedures followed by a modified Buhner's suture technique for retention. Additionally, the owner was instructed to keep the animal›s hindquarters elevated and to avoid bulky or estrogenic diets until kidding.

CONCLUSIONS

In conclusion, a case of cervico-vaginal and rectal prolapse in doe was managed by reduction and repositioning procedures followed by a modified Buhner's suture technique for retention.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

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