



Rare Case of Foetal Ascitis in a Kid

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Foetal ascitis or dropsy of peritoneum is usually ascribed to derangement of foetal circulation. It may either be hereditary or associated with brucellosis (Roberts, 1982). The condition is common in bovines but rare in other domestic animals (Noakes *et al*, 2001). On vaginal examination ascitic foetus shows increased size of abdomen that fluctuates on pressure and such animals are usually born dead. If alive they are weak with less survival. The present case describes a rare case of ascitis in a kid.

MATERIALS AND METHODS

Case history, Observation and Treatment

A pleuriparous crossbred full termed goat weighing 18 Kg. was presented with the history of straining since 2 days. The goat was anorectic, depressed, severely dehydrated and slightly febric (103.8°C) with pale and dry mucus membrane. The animal was frequently getting up and down showing extreme abdominal pain. Examination of external genitalia revealed slightly swollen vulva discharging fetid purulent materials. Pervaginal examination indicated fully dilated os. The kid was in posterior longitudinal presentation and dorso-sacral position; however, both hind limbs were flexing at hock. Haematological examination of the doe revealed 6 g/ dl Haemoglobin (Hb), 41% packed cell volume (PCV), $5.12 \times 10^6/\mu\text{l}$ erythrocytes (RBC) and $17 \times 10^3/\mu\text{l}$ leucocytes (WBC).

RESULTS AND DISCUSSION

After careful repelling of the foetus, both the hind limbs were corrected manually (Fig-1) however, the foetus was tightly retained in the birth canal due to its enlarged abdomen. Lubrication

of the birth canal was achieved by applying vaseline and the male foetus was extracted out (Fig-2). Although, the kid was delivered alive it died after about 5 minutes probably due to forceful exhaustion of the foetus leading to bradychardia and shock during the prolonged phase of labour. Rectum of the foetus was also found everted through anus. Succussion of the foetus revealed fluid splashing sound. On abomasocentesis a large amount of abdominal fluid (1.5 l) came out and thus the condition was diagnosed as foetal ascitis. Another dead female foetus, which was in anterior longitudinal presentation, was also removed by mild traction and no ascitis in this second foetus was observed. After removing both the foetuses the goat was treated with injection Ciprofloxacin @ 10 mg/ kg IM bid X 7 days, injection Rintose @ 300 ml IV od X 3 days, injection Feritas 1ml IM (each ml contains iron sorbitol citric acid-50 mg, folic acid-500 mcg and cyanocobalamin-50 mcg; Intas Pharmaceuticals Ltd., Ahmedabad, India) at weekly intervals for 3 occasions and 2 boli of Furea were administered through intrauterine route. The body weight of the dam following removal of foetus was 12 Kg. The animal discharged same day of treatment and information of the patient was taken telephonically every alternate day. The goat was found active and alert resuming normal appetite after 10 days. Marked improvement in clinical status 20 days post treatment as indicated by increase in level of Hb (9 g/ dl) and RBC ($9.10 \times 10^6/\mu\text{l}$) and decrease in PCV (35%) and WBC ($10.2 \times 10^3/\mu\text{l}$) was recorded with an extra body weight gain of 2 Kg. The level of MCV (80.08 pg), MCH (11.72 fL) and MCHC (14.63%) before treatment revealed severe macrocytic and hypo chromic anaemia that

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could be due to deficiency of iron (Fe), folic acid and cyanocobalamin in the feed (Radostits *et al*, 2000). After administration of haematinic (Inj. Feritas) a marked improvement in the haemogram and haematological indices (MCV 38.46 pg, MCH 9.89 fL and MCHC 25.71%) was observed. Severe leucocytosis ($17 \times 10^3/\mu\text{l}$) before treatment revealed acute bacterial infection and a drastic reduction in the WBC count ($10.2 \times 10^3/\mu\text{l}$) was observed following Ciprofloxacin administration. The severe macrocytic and hypo chromic anaemia along with bacterial infection might have resulted in deterioration of dam's health and foetal death.

In the present case hereditary nature in the occurrence of foetal ascitis could not be ascertained due to non availability of record as the goat purchased form the local market only few months earlier. The probable involvement of brucellosis causing fetal ascitis was also ruled out by conducting serum agglutination test. The occurrence of this condition in goat from rural Assam is reported for the first time.

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Fig 1: Removal of hind limbs after correction



Fig 2: Ascitic kid showing abdominal enlargement

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