Bulletin of Environment, Pharmacology and Life Sciences
Bull. Env. Pharmacol. Life Sci., Vol 7 [2] January 2018 : 98-99

Online ISSN 2277-1808
Journal's URL:http://www.bepls.com
CODEN: BEPLAD
Global Impact Factor 0.876
Universal Impact Factor 0.9804
NAAS Rating 4.95

CASE STUDY **OPEN ACCESS**

Dystocia Due to Dicephalus Monster in A Cow

Shantanu Kumar Kuldeep[1], Rajendra Singh[1], Devendra Singh[2]
1. Department of Veterinary Surgery and Radiology,
2. Department of Veterinary Pharmacology and Toxicology
College of Veterinary and Animal Science, Navania, Udaipur, (Rajasthan).
Corresponding author: drshantanukudeep@gmail.com

ABSTRACT
A cow of 2nd parity of about 7 year age was brought to the TVCC, having history of straining for the previous 18 hours with unsuccessful attempts to deliver the fetus. Per vaginal examination revealed dilated birth canal, loss of fluid and fetus having two heads. Emergency caesarean section was performed to relive dystocia to save life of the dam.
Keywords: *Cow, Dystocia, Dicephalus Monster,*

Received 11.10.2017 Revised 03.11.2017 Accepted 08.12.2017

INTRODUCTION

Fetal anomalies and monstrosities are common causes of dystocia in bovines [6]. Monstrosity is a disturbance of the development that involves various organ and systems which can cause great distortion of the fetus. Fetal monsters are a variety of malformation resulting in specific fetal phenotype. Abnormal duplication of germinal area in fetus will give rise to congenital fetal abnormalities with partial duplication of body structure. Duplication of cranial portion of fetus is more common than caudal portion. Monstrosity may or may not interfere with birth [5].

HISTORY, CLINICAL SIGN AND DIAGNOSIS

A non descript cow of 2nd parity of about 7 year age was brought to the TVCC, college of veterinary and animal science, Navania, Udaipur, Rajasthan after full term with the history of straining for the previous 18 hours with unsuccessful attempts to deliver the fetus. The water bags had already ruptured. The cow was handled by paravet for almost 8-12 hours, traction with rope and hook was also applied. Laceration was also present on vulvar lip which was caused during traction.

Per vaginal examination revealed dilated birth canal and loss of fluid, fetus having anterior longitudinal presentation and dors-sacral position and two heads with bilaterally flexed knee joint and uterine tearing. The case was diagnosed as dystocia due to a dicephalus monster fetus and animal owner was advised for emergency cesarean section to relive dystocia.

TREATMENT AND DISCUSSION

Preoperatively, cow was medicated with anti-shock therapy (Inj. dexamethasone 40 mg, i.v. total dose), ceftriaxone sodium and tazobactum combination @10mg/kg body weight, meloxicam @ 0.5mg/kg body weight intravenously and adrenochrome monosemi carbazone @ 25mg total dose intramuscularly. The cow was restrained in right lateral recumbency. After aseptic preparation of surgical site, 2% lignocaine hydrochloride was infiltrated locally at surgical site to obtain proper analgesia.

Approximately 12 cm long lower left flank oblique skin incision was made. After skin and abdominal muscle dissection, uterus was approached. The dead female fetus was delivered. Complete placenta was removed manually. Uterus was flushed with normal saline and uterine tear and incision was repaired with No.2 polyglycolic acid suture material. Intra-uterine preparation, levofloxacin-ornidazole- α tocopherol was poured into the uterus for prevention of contamination. The laparotomy incision was sutured as per standard technique. The animal was kept under post-operative care. The animal was treated with injection Intacef-tazo 2250 mg b.i.d for 5 days intramuscularly, Ringer's lactate 3000 ml and

DNS 3000 ml as intravenous infusion for 3 days and intramuscular Meloxicam 15 ml for 3 days. Metronidazole was given 20 mg/kg body weight in divided doses for 5 days intramuscularly. Calcium borogluconate 450 ml (300 ml slow I.V. and 150 ml S.C.) was given only once. The suture line was protected with antiseptic dressing. The skin sutures were removed on 13th day postoperatively. The animal showed an uneventful recovery.

The delivered fetus had two fully developed heads (dicephalic) on single neck (monauchenos) (Fig. 1). Both the heads were nearly of same size. The heads had separate ears but the pinnae of the medial ears were fused. The neck, thorax, abdomen and limbs were grossly normal. These observations were similar to the earlier findings [4]. Dicephalus monsters also have been reported in goats and buffalo [1, 2]. The findings of the present case study suggest that performing a caesarean section in cow with dystocia due to dicephalus monsters may be considered as a wise decision to save life of the dam.

Fig. 1: Dicephalic monster

REFERENCES

1. Agrawal, J.K., A. Patel, M. Verma, P. Kumar. (2014). Dystocia due to emphysematous dicephalic monster in a she buffalo. *Indian Journal of Animal Reproduction* **35**: 56-57.
2. Ahmed, A., B. Jena, G.K. Mishra, and R.P. Tiwari. (2015). A rare case of congenital dicephalic iniodymus defect in nondescript caprine neonate. *J. Livestock Sci.* **6**: 10-12.
3. Arthur, G.H., Noakes, D.E., Parkinson, T.J. and England, G.C.W. (2001). Veterinary Reproduction and Obstetrics, 8th Edn. WB Saunders Company Ltd., London, England. p 868.
4. Kumar, P., A. Sharma, M. Singh and P Sood, P Barman. (2014). Dystocia due to a dicephalus monster fetus in a buffalo. *Buffalo Bulletin* **33**:13-15
5. Roberts, S.J. (2004). *Veterinary Obstetrics and Genital Diseases*, 2nd ed. CBS Publishers, New Delhi. India.
6. Shukla, S.P., U.K. Garg, Anand Pandey, D.P. Dwivedi and S.P. Nema. (2007). Conjoined twin monster in a buffalo. *Indian Vet. J.* **84**: 630-31.

CITATION OF THE ARTICLE

S K Kuldeep, R Singh, D Singh· Dystocia Due to Dicephalus Monster in A Cow. Bull. Env. Pharmacol. Life Sci., Vol 7 [2] January 2018 : 98-99