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Case report

Dystocia due triplet fetal death in an UDA ewe

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ABSTRACT

An Uda ewe was presented to the large animal unit of Veterinary Teaching Hospital Sokoto with chief complaint of straining noticed about 48hrs prior to presentation. The animal was examined and a dead fetus in anterior presentation located through the fully dilated cervix. Emergency Caeserean operation was performed to relieve the dystocia and three dead fetuses removed.

1. Introduction

One of the most important traits in sheep production industries is reproduction (Astan *et al,* 2007). This natural tendency is often time distorted as a result of dystocia which result to the loss of either the dam, the fetus (es) or both. The incidence of dystocia is generally low, 3% in the cow, 4% in the mare and 3% in the ewe (Noakes, *et al.,* 2001). Fetal maldisposition has the cause of dystocia in sheep (50%), obstruction of the birth canal (ring womb) is next with 35% and the least is fatal moinster/abnormalities, 3%.(Noakes, *et al.,* 2001). In Nigeria, cases of dystocia have been reported to be due to fetal oversize, faulty disposition, partial dilation of the cervix, fetal moinster/abnormalities and toxaemia.(Mohammed, *et al.,* 2001,Bello, *et al.,* 2008, Ate, *et al.,* 2011 and Kisani and Wachida, 2012). Other factors that can influence the occurrence of dystocia are breed (sire and dam), number of

fetuses and weight of dam (Hanie, 2006). In sokoto, dystocia was observed to occur more in semi-intensively managed ewes (Adeyeye and Olajide, 2009).

2. Case report

A four-year old Uda ewe was presented to large Unit of the Usmanu Danfodiyo Veterinary Teaching Hospital Sokoto with recumbency and intermittent straining noticed two days prior to presentation. Furthermore, investigation revealed that it had two previous eutocias with the first singleton and the second twins.

Fig.1. Animal on presentation to the clinic with copious fluid discharge from the vagina.

3. Clinical examination

On physical examination, rectal temperature, respiratory and pulse rates were 38.3^{oc}, 35 cycles/minutes and 56baets/minutes respectively. Fetal parts were felt on abdominal ballottement, vaginal exploration revealed patent cervix with fetus in anterior presentation that did not respond to suckling reflex. There was carpal flexion of the left forelimb. Blood samples were taken for Packed Cell Voume (PCV), Complete Blood Count (CBC) and hemoparasitic analysis. Faecal sample was also taken for routine routine parasitological investigation.

4. Management

Attempt to correct the defect and relieve the dystocia through retropulsion and manual traction was unsuccessful. Having established fetal death for non response to suckling reflex, the dam was surgically evaluated and caesarean section was indicated. The right paralumbar region was prepared for sterile procedure as described

by Noakes, *et al.,* 2001. Three dead lambs A,B and C (an ewe lamb and two ram lambs) were removed. The ewe (A) lamb has CRL of 41cm and weighed 5.1kg, lamb B (ram) has CRL of 43cm and weighed 6.7kg and Lamb C (ram) has CRL of 40cm and weighed 4.9k g. The Post surgical medications include Penstrep at a dose rate of 200 iu/kg and 20 iu/kg i.m for five days, multivitamins inections 3mls. i.m for three days and daily dressing of the surgical site for a week. The animal was discharged on the tenth day post surgery after removal of stitches.

Fig. 2. three dead fetuses removed during C/S.

5. Laboratory results

Laboratory results revealed the following: Complete Blood count (CBC) and Packed Cell Volume were within normal range. No hemoparasite was found while parasitological analysis revealed *Eimeria oocyst* +.

6. Discussion

Dystocia as a result of abnormal position, posture and presentation can present in any of the following forms; Dorso-illiac or dorsopubic position, in anterior presentation with deviation of head and neck, deviation of fore limbs, interlocking of the maternal birth canal and fetal pelvic or hip lock which is common in heifers (primipara) and forward extension of the hind limb beneath the fetal body or dog sitting position. Anomalies for posterior presentation include deviation of the limb, complete retention or extension of the rear limbs beneath the body or breech presentation (Arthur *et al.,* 1989). The incidence rate of dystocia in cattle is 3.3% while it is 1.1% in horses (Willians *et al,.* 1943). In pigs incidence of dystocia was given to be 2.9% (Randan *et al* 1972). The alarming rate at which cases of dystocia is being reported to the clinic calls for concern. Of all dystocia cases in sheep, this is the

only triplet encountered, the author also have not come across any documented case of triplet parturition in this breed of animal in Nigeria.

The case we handled would have saved the life of both the dam and the fetus but we only succeeded in saving the dam, because of the delay in presentation to the hospital. There is therefore need to enlighten our client to seek for Veterinary Ante-natal services and to always present cases early enough to limit economic loss (due to fetal or maternal mortality) and hence encourage the growth of animal husbandry for self sustenance and economic development.

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