

**MANAGEMENT OF UTERINE TORSION IN BUFFALOES**

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**ABSTRACT :**

Ten pluriparous full term pregnant Murrah buffaloes were admitted in Teaching Veterinary Clinical Service Complex, College of Veterinary Science & A.H Mhow with history of restlessness and excessive straining with no progress in parturition from last 12-36 hours. Uterine torsion was confirmed by rectal and vaginal examination. The degree (angle), direction (Right or left) and location of torsion (pre or post cervical) was identified. Successful detorsion was achieved by Schaffers method in eight cases and rest two protracted cases needed surgical intervention (cesarean section). The survival rate was 100% in Schaffer's method, while one among the two buffaloes undergoing cesarean section died after 12 hrs of operation. Of these eight cases solved by Schaffer's method four live calves were delivered. It was concluded that Schaffer's method is an effective method to relieve uterine torsion with better survival rates, however in protracted cases surgical intervention is the method of choice.

**KEY WORDS :** Pluriparous, Murrah, Restlessness, Straining.

**INTRODUCTION**

Uterine torsion is defined as revolution or twisting of uterus on its long axis. Torsion of gravid uterus in bovines is reported to be one of the major causes of dystocia, which inflicts heavy economical loss to the farmer due to death of either foetus or dam or both (Murty et al., 1999). The incidence is higher in buffaloes as compared to cows. Srinivas et al., (2007) stated that uterine torsion was the most important cause of maternal dystocia in buffaloes with an incidence of 83.33%. Several predisposing factors including excessive foetal movements at the time of parturition have been reported to cause uterine torsion. Schaffer's method of detorsion and surgical approach (cesarean section) in protracted cases are common remedies for its management, however survival rates are variable.

**MATERIALS AND METHODS**

Ten pluriparous full term pregnant Murrah buffaloes were admitted in Teaching Veterinary Clinical Service Complex, College of Veterinary Science & A.H Mhow with history of restlessness and excessive straining with no progress in parturition from last 12-36 hours. All these cases were referred by field Veterinarians for expert intervention. The animals were off fed with lack of rumination, rapid pulse and respiration rate. Further grinding of teeth, arched back and switching of tail was also observed in few cases. Schaffer's method of detorsion was employed in eight cases and rest two cases were managed by surgical intervention (cesarean section). For detorsion, the animals were made recumbent in the same direction as that of the twist with separately tied fore and hind limbs. The buffaloes were also rolled in the same direction as that of torsion. After rolling through 180° body of the buffalo was pushed slowly over the legs and sternum so as to continue rolling in the same direction. The vaginal passage of the animal was examined after each roll to find out whether the rolling was effective or not. Uterine torsion was confirmed by rectal and vaginal examination. The degree (angle) and direction of torsion (Right or left) was ascertained. The location of torsion such as pre or post cervical was also identified.

**RESULTS AND DISCUSSION**

The details of uterine torsion in buffaloes are presented in table 1. Clinical examination revealed that occurrence of right-sided post cervical torsion was more common than left sided torsion and incidence of 180 to 270 uterine torsion was also common as compared to torsions greater than 270. These findings were in close agreement with those reported earlier by Mathura and Prabhakar (2001).

After rolling by Schaffers method, in eight cases foetal fluids gushed out of the uterus and foetal parts were now easily palpable. On application of traction to these fetuses, in four buffaloes live calves and in

**Table 1: Details of uterine torsion in buffaloes**

S.No	Direction of torsion	Degree of torsion	Location of torsion
1	Right	Less than 180 °	Post cervical
2	Right	180 °	Post cervical
3	Right	180 °	Post cervical
4	Right	More than 180 °	Post cervical
5	Right	More than 180 °	Post cervical
6	Right	270 °	Post cervical
7	Right	Less than 180 °	Post cervical
8	Right	More than 270 °	Pre cervical
9	Left	Less than 180 °	Post cervical
10	Left	More than 180 °	Post cervical

remaining buffaloes dead calves were delivered. In two protracted cases cesarean section was employed after sedation with xylazine (0.2 mg/kg b.wt.) and caudal epidural analgesia and local infiltration using lignocaine HCl. In these two cases dead calves were delivered.

Intra uterine antibiotics 6 Furea boli (Nitrofurazone 60mg + urea 6gm) were left in the uterus and parenteral antibiotic therapy was given using Strepto-Penicillin (2.5gms) twice daily with other supportive treatment including anti-inflammatory (Pheniramine maleate 10ml I/M) and analgesics (Meloxicam 15ml I/M) once daily for next 5 days in all buffaloes, in addition to parenteral fluid therapy to restore the normal body condition.

Schaffer's method in fresh cases and surgical intervention in protracted cases are effective methods to relieve uterine torsion (Arthur et al., 2001). The objective of rolling is to suddenly and rapidly rotate the body of dam in the same direction while the uterus remains stationary during the procedure. Right sided uterine torsion is more common than left sided uterine torsion (Srinivas et al., 2007) and incidence of 180° to 270° uterine torsion is also common as compared to torsion more than 270°. (Mathura and Prabhakar, 2001). In the present study, eight cases were solved by Schaffer's method and four live calves were delivered. The survival rate of dams was 100% in Schaffer's method, while one among the two buffaloes undergoing cesarean section died after 12 hrs of operation. It was concluded that Schaffer's method is an effective method to relieve uterine torsion with better survival rate, however in protracted cases surgical intervention is the method of choice.

## REFERENCES

- Arthur, G.H., D.E. Noakes, T.J. Parkinson and G.C.W. England (2001). *Veterinary Reproduction and Obstetrics*, 8th ed. WB Saunders Company Ltd., London. p.233
- Mathura, S. S. and S. Prabhakar. (2001). Clinical observations and success of treatment of uterine torsion in buffaloes. *Indian J. Anim. Reprod.*, **22** (1): 45-48.
- Murty, K.K., V. Prasad and P.R. Krishna (1999). *Indian Vet. J.*, **76** (7): 643-645
- Srinivas, M., M. Sreenu, N.L. Rani, K.S. Naidu, and V.D. Prasad (2007). *Buffalo Bulletin.*, **26** (2): 40-45.