CASE REPORT

Dystocia Due to Diprosopus Monauchenos Tetraophthalmus Bibrachius Tetrapus Monster in a Graded Murrah Buffalo

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Monstrosity refers to a fetus with extensive congenital deformities or developmental abnormalities, which often makes the fetus non-viable and lead to serious cases of dystocia. Monstrosities are often associated with either infectious disease or congenital defects (Noakes *et al.,* 2019). The incidence of congenital monstrosities in Murrah buffalo ranged from 7.9 to 12.8% (Phogat *et al*., 1992). Embryonic duplication is a congenital developmental abnormality caused by incomplete twinning or imperfect duplication of the germinal area, resulting in the partial or complete duplication of body structures (Roberts, 2004). Such duplications can arise during the elongation or regression phase of the primitive streak (Noden and Lahunta, 1984). Duplication of the cranial portion of the fetus is more common than that of the caudal portion (Roberts, 2004). Congenital malformations in livestock production, caused by gene variants inherited from parents, can slow genetic progress and lead to significant economic losses for breeders due to animal deaths or reduced reproductive and productive performance, including decreased milk production (Albarella *et al*., 2017). The monstrosities usually result in dystocia. Dystocia due to fetal anomalies is much more common in bovines than in other domestic animals (Singh *et al.,* 2011, 2013; Dutt *et al.,* 2021). This report documents dystocia due to diprosopus monauchenos tetraophthalmus bibrachius tetrapus monster in a graded Murrah buffalo and its successful management.

Case History and Observations

A 7-year-old Murrah buffalo at full term was brought to Veterinary Clinical Complexes, LUVAS, Hisar (India) with a history of dystocia since last five hours. Detailed gynaecological examination after epidural anesthesia with 2% lignocaine hydrochloride and with proper lubrication using liquid paraffin revealed that dead fetus was in posterior presentation with presence of four hind limbs. One hind limb was protruding out of vulva and remaining three limbs were flexed at the hip joint. The traction was applied by local vet at the one limb at farmer's doorstep without any success in parturition process. The birth canal was fully dilated. So, the diagnosis was made as dystocia due to fetal monstrosity and decision of fetotomy to deliver the fetus per-vaginum was opted.

Treatment and Discussion

The two flexed hind limbs were ankylosed at the hock and fetlock joints. Two deformed flexed hind limbs and a third flexed hind limb were amputated at the proximal end of the femur using Thygeson's fetotome (Fig. 1). Further examination confirmed single trunk. Obstetrical chains were applied at the remaining hind limb that was extended out of vulva and traction was applied resulting into per-vaginum delivery of fetus (Fig. 1). The dam was administered with Inj. Oxytocin 50 IU in 500 Normal saline solution and Inj. Calcium magnesium borogluconate 450 mL (slow), intravenously. Further therapeutic management included administration of fluids (Normal saline, 5 L, i/v), anti-histaminic drug (chlorpheniramine maleate, Anistamin®, Intas Pharmaceutical Ltd, 10 mL, i/m), antibiotic (Amoxicillin sulbactum, Inj. AMC forte®, Virbac Pharmaceuticals Ltd, 4.5 g, i/m) and non-steroidal anti-inflammatory drug (Flunixin meglumine, Inj. Unizif®, Intas Pharmaceuticals Ltd, 20 mL, i/m) for 7 days. Inj. Metrogyl® (Metronidazole, J.B. Chemicals and Pharmaceuticals Ltd, 1000 mL) was administered intravenously for first three days. The buffalo recovered without any postpartum complications.

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The fetus had single neck (monauchenos), two faces (diprosopus) (Fig. 2a,b), four eyes (tetraophthalmus), two ears, two pair of nostrils, two forelimbs (bibrachius), single trunk, four hind limbs (tetrapus) and single tail. The two hind limbs were normal whereas rest two hind limbs were ankylosed at the hock and fetlock joints (Fig. 1).

Necropsy examination of monster revealed two oral cavities, both of them fused medially forming a single epiglottis, two tongues, single esophagus, single trachea, single esophagus, single heart, and single pair of hypertrophied lungs (Fig. 3), normal intestines, liver and kidneys. Both the ovaries were hypertrophied (Fig. 4) and normal external genitalia indicating female gender of the monster. Upon radiological examination, dorso-ventral view (Fig. 2b) of fetal head showed side by side fusion starting from facial tuberosity up to occipital bone.



Fig. 1: Delivered Fetus



Fig. 2a: Diprosopus tetraophthalmus condition

Teratogens in bovines have also been identified as toxic plants (*Veratrum californicum*), trace elements, infectious agents, and physical agents (hyperthermia, stress during rectal palpation in early pregnancy, irradiation) (Saperstein, 2002). Other factors causing monstrosities include nutritional inadequacies, endocrine abnormalities, high body temperature during pregnancy, pollution, and drugs (Smolec *et al.,* 2010).

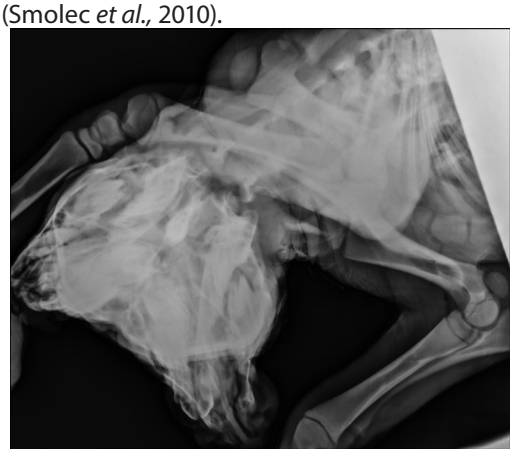


Fig. 2b: Fusion of fetal head



Fig. 3: Normal heart and hypertrophied lungs

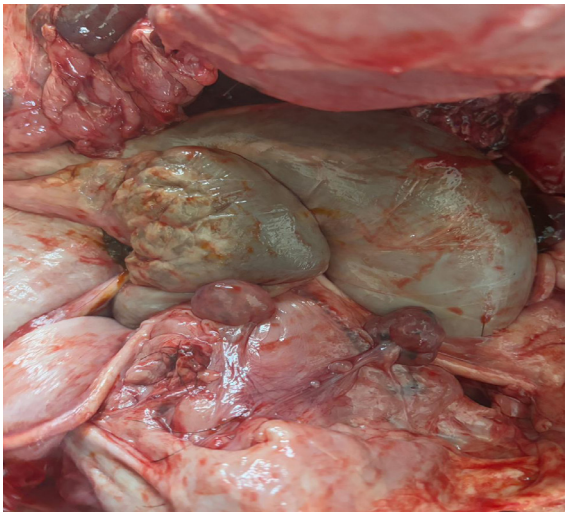


Fig. 4: Hypertrophied ovaries and rudimentary uterine horns

The diprosopus monster fetus, which typically causes dystocia, can be removed manually; however Vermunt (2009) used fetotomy to remove the fetus. When it becomes difficult to deliver the fetus vaginally, a fetotomy is chosen. Compared to Cesarean sections, fetotomies are more cost-effective and

have a higher survival rate for dams. According to certain investigations the diprosopus monsters were delivered via Caesarean section (Purohit *et al.,* 2012; Murugan *et al.,* 2023; Madhanraj *et al.,* 2024). In some rare cases, fetal deliveries can take place without any obstetrical assistance (Malik *et al.,* 2022). It is worth mentioning that ease of fetal delivery depends upon size of fetus, extent of dilatation of birth canal, size of maternal pelvis and timely obstetrical aid. Therefore, early diagnosis and timely obstetrical aid may protect future fertility and reduce the dam's morbidity and mortality.

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References

Albarella, S., Ciotola, F., D'Anza, E., Coletta, A., Zicarelli, L., & Peretti, V. (2017). Congenital malformations in river buffalo (*Bubalus bubalis*). *Animals: An Open Access Journal from MDPI*, *7*(2), 9.

Dutt, R., V., Arjun, Kumar, G., Yadav, V., & Dalal, J. (2021). Dystocia due to fetal monstrosity in a riverine buffalo. *Buffalo Bulletin, 40*(1), 185-187.

Madhanraj, R., Murugan, M., Raja, S., Mahendra, S.A., Selvaraju, M., & Dharmaceelan, S. (2024). An unusual case of dystocia due to diprosopus monster fetus and its management in crossbred cow. *International Journal of Veterinary Sciences and Animal Husbandry, 9*(4), 84-86.

Malik, A.A., Habib, R., Dar, I.A., & Malik, F.A. (2022). A rare case of diprosopus buffalo calf in a non-descript buffalo. *The Indian Journal of Animal Reproduction, 43*(1), 77-79.

Murugan, M., Palanisami, M., Ezakial Napolean, R., Selvaraju, M., & Dharmaceelan, S. (2023). Dystocia due to monocephalic thoracopagus conjoined twins and its management in non-descript sheep. *Ruminant Science, 12*(1), 177-178.

Noakes, D.E., Parkinson, T.J., & and England, G.C.W. (2019). Abnormalities of development and pregnancy. In: *Veterinary Reproduction and Obstetrics*. 10th edn., London: Saunders. pp. 168-194, 296-314.

Noden, D.M., & Lahunta, A.D. (1984). The embryology of domestic animals developmental mechanisms and malformations; 1st edn., Williams and Wilkins Baltimore, London.

Phogat, J.B., Bugalia, N.S., & Gupta. S.L. (1992). Incidence and treatment of various forms of dystocia in buffaloes. *Indian Journal of Animal Reproduction*, 13, 69-70.

Purohit, G.N., Kumar, P., Solanki, K., Shekher, C., & Yadav, S.P. (2012). Perspectives of fetal dystocia in cattle and buffalo. *Veterinary Science & Development, 2*(1), e8.

Roberts, S.J. (2004). *Veterinary Obstetrics and Genital Diseases*. 2nd ed, Indian reprints, CBS Publishers and Distributors, Delhi-110032. 73- 74p.

Saperstein, G. (2002). Congenital defects and hereditary disorder in ruminants. In: *Large Animal Internal Medicine*. 3rd edn (B. P. Smith, Edn), St Louis, Mosby, pp. 1465-1555.

Singh, G., Pandey, A.K., Dutt, R., Sunder, S., Kumar, S., & Chander, S. (2013). Delivery of a dicephalus sternopagus tetrabrachius tetrapus dicaudatus monster in a Murrah buffalo by Caesarean section. *Buffalo Bulletin, 32*(4), 242.

Singh, G., Pandey, A.K., Agnihotri, D., Sunder, S., Kumar, S., Kumar, R., Dutt, R., & Singh, K. (2011). A case of rare monstrosity in a cow calf. *Haryana Veterinarian, 50*(1), 101.

Smolec, O., Kos, J., Vnuk, D., Stejskal, M., Brkljaca B. N., & Zobel, R. (2010). Multiple congenital malformation in a Siamental female calf: A case report. *Veterinary Medicine, 55*(4), 194-198.

Vermunt (2009). *Fetotomy in Veterinary Reproduction and Obstetrics*. In: Noakes, D.E, Parkinson, T.J. and England, G.C.W. (eds), *Veterinary Reproduction and Obstetrics*. Saunders Elsevier, 9th edn, Oxford, p. 214.