A Rare Case of Leydig Cell ...  

(Benazzi and Marcato, 2002). But we recorded this tumour in a cryptorchid testicle. Leydig cell tumors are usually benign and rarely metastasize and could lead to the development of hyperestrogenism (Foster and Ladds, 2007).

**References**


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**Cecal Dilatation and Distention and it’s Management in a Cow and a Kangeyam Bullock**

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**Abstract**

Cecal Dilatation and distention (CDD) is an important intestinal disorder which predominantly affects dairy cattle during periparturient period. The objective of this study is to report CDD in a Kangeyam bullock and dairy cattle. The predominant clinical signs were tail thrashing, mild abdominal pain and partial cessation of feces in bullock and complete cessation in cow along with mucus in rectum. The cases were diagnosed by dilatation of cecum on rectal examination, Ultrasonography and ping sound on auscultation. The animals were treated with polyionic fluids including calcium borogluconate, oral purgatives and neostigmine. Uneventful recovery was noticed on third day of therapy.

**Key words:** Cattle, Cecal dilatation, Ultrasonography, Neostigmine, Purgative

Cecal dilatation is a common abdominal disorder that affects mainly dairy cattle (Meylan, 2008). Disorders of cecum tends to occur in adult dairy cattle within 60 days of parturition, although they have been reported throughout the lactation. Occasional instances have been reported in bulls (Fubini, *loc. cit*). The pathologic features of the condition include distention, displacement and in some cases, retroflexion or torsion of the cecum and proximal portion of the cecum and proximal portion of the colon, leading to partial or complete obstruction of the passage of digesta (Meylan, 2008). Fecal production may be decreased in cecal dilatation (Fubini, *loc. cit*). Caecal dilatation can easily be diagnosed based on clinical findings and treated conservatively or surgically (Braun, *et al*. 2012). The present paper describes clinical report of cecal dilatation in a Kangeyam bullock and cow and its successful management.

**Case History and Observations**

Case No. 1: A six year old crossbred cow calved twice was referred to the Teaching Veterinary Clinical Complex, VCRI, Orathanadu with the history of not passing dung for three days. The animal kicks its abdomen occasionally and thrashing tail. The animal was treated with 500 ml of liquid paraffin. The animal calved 2 months back. Up on clinical examination, the animal had normal vital sign except suspended ruminal motility and enlarged right sided...
abdomen. On rectal examination, there was distended cecum from the pelvic inlet which extended cranially. On auscultation and percussion, there was a clear metallic ping sound over the distended area which extended cranially up to 11th intercostal space. Ultrasonographic examination revealed the enlarged cecum filled with fluid and gas.

Case No. 2: A 4 year old Kangeyam bullock received with the history of animal voiding small quantity dung containing mucoid plaques occasionally for four days. On clinical examination, the animal had sluggish ruminal motility with no clinical signs of abdominal pain. Empty rectum was observed on rectal examination with little mucoid plaques. There was distended cecum on the right upper lateral aspect which extended cranially. Clear metallic sound was audible on auscultation. Hematolgical values were within normal range in both the animals.

Treatment and Discussion

The animals were rehydrated with fluids dextrose normal saline and ringer’s lactate and calcium borogluconate followed by oral purgatives administration, milk of magnesia (Bovilax – 500 gm/day/time) and mineral oil like liquid paraffin 3.5 litres/day. Further they were administered with neostigmine (Myostigmin, Neon Labs) @ 0.025 mg/kg I/M once daily for two days. Immediately after neostigmine administration, bullock showed the flatulence and cow had flatulence along with mild abdominal pain evidenced by frequent lying down and getting up which continued for about 2-3 hours. On third day morning both animals started defecating with pellets initially followed by diarrhoea. Appetite was improved from third day evening onwards. Uneventful recovery was noticed on fifth day onwards.

Cecal dilatation and volvulus are common entities in dairy cattle, whereas cecal torsion is not often encountered (Fubini, loc. cit). Caecal dilatation is associated with partial or complete cessation of the passage of intestinal contents (Braun et al., loc. cit). Partial cessation of defecation was observed in bullock and complete cessation in cow was observed. Caecal dilatation occurs primarily in dairy cattle during the first few months of lactation and its etiology is uncertain (Mesaric and Modic, 2007). The occurrence of cecal dilatation in Kangeyam bullock is a rare incidence and the etiology was not known. The most important diagnostic tool in cecal dilatation and distension is rectal examination, which can be used to palpate dilatation, displacement and sometimes torsion of the caecum in 95% of cases (Braun et al., 1989a). Swinging percussion and auscultation as well as rectal examination are important diagnostic tools in cecal dilatation (Braun et al., loc. cit). The results of haematological and blood biochemical analyses are not diagnostic for caecal dilatation but serve to estimate the severity of disease (Braun et al., loc. cit). These cases were diagnosed and confirmed based on cecal dilatation by rectal examination, ultrasonographic study and ping sound on auscultation. The pathogenesis of the disease remains poorly understood (Meylan, loc. cit). Administration of neostigmine (87.5 mg in 5 or 10 L of isotonic saline solution supplemented with 5% dextrose as a continuous intravenous infusion at a rate of 1–2 drops per second) or of bethanechol (0.07mg/kg subcutaneously, every 8 hours for 2 days) have been advocated along with calcium borogluconate. Paraffin (3 L) or sodium sulfate (300 g in 10 L water) administered through stomach tube have been described as adequate purgatives for medical management of CDD (Braun et al., 1989b; Braun et al., loc. cit). In our cases, neostigmine along with polyionic fluids and purgatives were successfully used to treat the cases. A successful
diagnosis and medical management of CDD in a cow and Kangeyam bullock has been reported.

References

Abstract
An 8 year old kangayam bullock was referred with the history of anuria and anorectic since 4 days. On Clinical examination distention of the abdomen, shrunken eyeball and pale mucus membrane were noticed. Trans-rectal and abdominal ultrasonographic examination revealed thickened bladder and severe anechoic fluid accumulation with floating of the abdominal viscera within peritoneum. By abdomino-centesis about 10 liters of modified transudate of peritoneal fluid was removed. Peritoneal fluid BUN and creatinine concentrations were higher than serum BUN and creatinine. Based on the USG and peritoneal BUN and creatinine concentration the present case was diagnosed as uroabdomen in a Kangayam bullock.

Key words: Uroabdomen, USG, Creatinine, bullock

Uroabdomen due to urinary bladder rupture (cystorrhexis) is common in the working bullocks. Cystorrhexis occurs due to the urethral obstruction by urolith in male animal. Diagnosis and initiation of appropriate treatment in delayed cases of urethral or bladder obstruction may result in rupture of urinary bladder. The ultrasonographic examination and serum peritoneal creatinine ratio is very much useful for the diagnosis of the uroabdomen (Braun et al., 2006).

Case History and Observations
An 8 year old kangayam bullock was referred to the Medicine Unit, Teaching Veterinary Clinical Complex, Veterinary College and Research Institute, Orathanadu, TANUVAS.

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Uroabdomen in a Kangayam Bullock - A Case Report
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