RECURRENT VAGINAL PROLAPSE IN A BITCH- A CASE REPORT

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Introduction

Vaginal prolapse is uncommon in bitches and occurs in association with dystocia, straining or forceful separation of the male and female during coitus and disproportion in size between male and female during breeding. The condition is more frequently described in brachycephalic breeds (Feldman et al., 2004, Mostachio et al., 2007). The extent of vaginal tissue protrusion classified the prolapse into three types. Type I can be detected by only vaginal exploration and the vaginal tissue does not reach the vulva. In type II, the anterior ventral and part of the lateral walls of the vagina prolapse through the vulvar opening. The protruding mass is pear-shaped. In type III, complete prolapse of the entire circumference of the vaginal wall, with a doughnut-shaped or ring shaped mass (Johnston, 1989).

The majority of cases reported during proestrus or estrus are thought to be a result of estrogenic stimulation of the vaginal tissues. For this reason, no treatment may be required in mild cases as regression is usually spontaneous during metestrus with the corresponding lower level of estrogen (Johnston et al., 2001). It has been suggested that the administration of progesterone during the proestrus phase of the cycle will prevent excessive vaginal hyperplasia or prolapse. The effectiveness of this therapeutic measure, however, is debatable.

Case history

A mongrel bitch was presented to the Teaching Veterinary Clinical Complex of College of Veterinary Science & Animal Husbandry, Bhubaneswar with clear signs of vaginal prolapse. The bitch was five years old weighing 23Kg and not mated before. Eversion of the vaginal tissue had occurred during several previous heat periods. No medical treatment had been required as regression occurred spontaneously with the onset of metestrus. However, this time there is no remission of the prolapse even after late post estrus.

The exposed vaginal tissue was doughnut-shaped and approximately five inches in diameter (Fig 1). The mucosa was dry with no marked induration. The urethral diverticulum was involved and had become extravaginal. The vital signs (temperature, pulse, respiration) of bitch were normal.

Fig.1. Dough-nut shaped exposed vagina  
Fig.2. Application of ice
Treatment and Discussion
Initially the bitch was sedated under general anesthesia. For this a cocktail of Atropine Sulphate (0.045mg/Kg body wt.), Xylazine (1mg/Kg body wt.) and Ketamine (7.5mg/Kg body wt.) was administered. Then the exposed part was washed with normal saline. Then ice pack was applied on it to reduce the inflammation (Fig 2). Then the inflamed part was pushed inside the vaginal tract by applying xylocaine jelly over it (Fig3). Purse string suture was applied around the edges of the vulva to prevent further prolapse (Fig 4). Progesterone (P-Depot) was administered (250mg, I/M) for three days alternatively followed by 250mg at three days interval to counteract the Estrogenic influence. A broad spectrum recovery antibiotic, Ceftriaxone @ 25mg/Kg body wt. was given for five days. An uneventful recovery was noticed after one month of treatment. As the condition may be hereditary (Alexander et al., 1961) the owner was advised not to breed the bitch in future and recommended spaying of bitch at the end of the breeding season.

Fig.3. Prolapsed part pushed inside

Fig.4. Purse string suture on vulval lips

Summary
A case of recurrent vaginal prolapse in a crossbreed bitch was discussed along with its therapeutic measures.

References: