UMBILICAL HERNIA IN AN ADULT PUG- A CASE REPORT

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Umbilical hernia is commonly seen in calves and canines. Canine umbilical hernia appears within the first five weeks after birth and seems to be due to failure of the normal occlusion of the umbilical ring. Such a defect can lead to umbilical hernia as the pet grows and intra-abdominal pressure increases with growth forcing omentum and intestines through the aperture as reported by Philips and Felton in 1939. The occurrence of umbilical hernias varies widely in domestic animals depending on species, breed and lineage. (Enzerink et al., 2000., Distl et al., 2002.).

Case history and observation:
A male pug aged three years had a swelling in its ventral abdomen at the umbilical region which was painful and had increased in size since the past three days. The pet had not passed faeces since three days and was unable to sit down properly because of pain at the area of the swelling. Owner was not aware of any trauma that could have led to the swelling.

On palpation the mass appeared very hard and hernial ring couldn’t be palpated. The site of the hernia was bruised suggesting trauma leading to the herniation. The temperature, pulse, heart rate and respiratory rate were all within normal limits and the mass was ruled out to be an abscess or cyst. The case was diagnosed as umbilical hernia.

Treatment and Discussion:
The pet weighed 6.5 kilograms. Dog was prepared for aseptic surgery and premedicated with Atropine sulphate @ 0.04 mg/kg body weight subcutaneously, preemptive Analgesic, Pentazocin @ 1 mg/kg intramuscularly and Triflupromazine hydrochloride @ 1 mg/kg body weight intravenously. After 10 minutes, animal was anaesthetized with 2.5% Thiopentone sodium at a dose rate of 25 mg/kg body weight given “to effect”.

A linear incision was made on the mass, subcutaneous tissue and fascias were separated. On exposing the hernial ring found blood clots and omental fat were herniating through the umbilical ring. Affected omentum was separated from the surrounding intestines and resected. Herniorrhaphy was done by simple interrupted pattern of suturing using polyglactin 910 no.1-0, subcutaneous and skin were opposed in a routine manner.

Herniation of abdominal contents through umbilical area due to imperfect closure of the linea alba and associated structure has appeared in both sexes either at birth or later in life. The hernia may disappear as animal gets older but such animals should not be used for breeding (Scammel and Smith, 1968). Umbilical hernias in puppies are a genetic or congenital defect in over 90% of the cases. Rarely it is caused by trauma or excessive pressures during whelping as it was found in the present case.
Summary:
Successful surgical management of umbilical hernia in a three year old male pug is reported.

References:

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