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Case Study Report

DYSTOCIA DUE TO PEROSOMUS HORRIDUS IN A MALABARI DOE: A CASE REPORT

***Vigneshwaran B, Neelima P, Anju Aravind, George Mathew, Leeba Chacko**

Department of Animal Reproduction, Gynaecology and Obstetrics, College of Veterinary and Animal Sciences, Pookode, Wayanad, Kerala. 673576

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ABSTRACT

With a history of a full-term pregnancy and significant abdominal straining, a two-year-old Malabari doe was presented to the College of Veterinary and Animal Sciences, Pookode. The cervix was relaxed and fully dilated during vaginal examination. Radiography and abdominal palpation both confirmed the presence of the foetal skeleton. To save the dam, an emergency caesarean section was performed. A monstrous dead female foetus was removed and recognized as a Perosomus horridus foetus because of the presence of spinal curvature. Animal had a full recovery after the surgery and administered follow up as per standard procedure and animal had normal fed and water intake. In the current case report, the successful management of *Perosomus horridus* via caesarean section was discussed.

Keywords: Cesarean, Foetus, *Perosomus horridus*, Pregnancy, Radiography.

INTRODUCTION

Perosomus horridus is a bovine fetal monster with general ankylosis and muscle contractures, characterized on external examination by a short spine due to marked double S-shaped lateral twisting of the vertebrae (Roberts, 1986). There are only a few reported the occurrence of this monster causing dystocia due to *Perosomus horridus* and very few cases on doe, Sathiamoorthy *et al*. (2015) and Dutt *et al*. (2018) in cow, Manokaran *et al*. (2016) in a ewe, Thulasiraman *et al*. (2022) in buffalo and Balamurugan *et al*. (2018) in a non-descript doe. The current case has been documented due to the rarity of the *Perosomus horridus* monster in caprine.

Signalment and anamnesis

Two-year-old Malabari doe was present to TVCC, College of Veterinary and Animal Sciences, Pookode, Kerala, India with history of full-term pregnancy and abdominal straining.

Diagnosis and prognosis

The diagnosis of the case was based on clinical and radiographic findings. During a per vaginal examination, it was noted that the cervix was fully dilated, but the foetus was inaccessible, suggesting abnormal presentation or positioning. Radiographic imaging confirmed foetal anomalies, particularly in the limbs, which is a key diagnostic indicator of congenital abnormalities. Despite normal maternal blood parameters and overall clinical health, the decision was made to perform a caesarean section for foetal retrieval. Pre-operative ultrasonography further supported the diagnosis by showing the absence of a foetal heartbeat, indicating foetal demise. This finding also informed the prognosis, which was guarded due to the severe foetal anomalies and the lack of viability. Prompt surgical intervention, such as a caesarean section, is often essential in such cases to prevent maternal complications, such as uterine rupture or sepsis, ensuring a favourable maternal outcome (Figure 1).

Treatment

Emergency cesarean section was performed under paravertebral nerve block and inverted ‘L’ local infiltration with 2 % lignocaine hydrochloride. The caesarean was performed as per the standard procedure. A dead female monstrous foetus weighing 1.02 kgs was removed. It

*Corresponding Author: Vigneshwaran B, College of Veterinary and Animal Sciences, Pookode Email: drvikivet@gmail.com

showed bent on the vertebral column and the spine had typical C-shaped curvature. While the hind limbs had ankylosis at the hock joint and were shorter, the fore limbs had ankylosis at the knee joint. The fetus's muscles were contracted across its entire body. The fetus's characteristics imply that it is a *Perosomus horridus* monster.

Figure 1. A dead female monstrous *Perosomus horridus* (Arrow indicating spinal curvature).

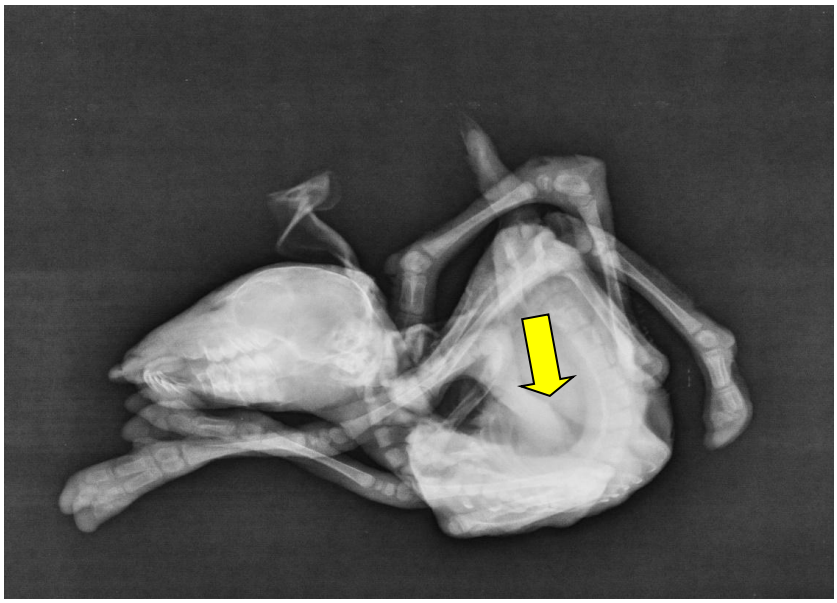

Figure 2. Radiograph of a dead female monstrous *Perosomus horridus* indicating presence of spinal deformity.

DISCUSSION

Due to the genetic transmission of such malformations, the prevalence of monstrosities in livestock is extremely important. The aetiology of such monsters is unknown; however, it is thought to be due to chromosomal defects (Morrow, 1986). *Perosomus horridus* are formed due to simple autosomal recessive genes. The affected monster fetus is usually carried to term. Such a fully developed monster usually results in dystocia and requires considerable skill to ensure a safe delivery without damage to the dam (Sharma *et al*., 2001). Cesarean section without doubt offers a safer method of delivery. Foetal monstrosities represent less than 1% of all observed congenital malformation in bovine and caprine species (Roberts, 1986). However, there have been cases of foetuses with several spinal curves or an "s"-shaped curvature. However, in this instance, the foetus only had one spinal curvature (Figure 2).

CONCLUSION

In the present case per vaginal delivery of the foetus was unsuccessful due to deep positioning of foetus in the abdominal cavity. Hence, cesarean section was opted to remove the monstrous foetus. Even the pelvic diameter will not be sufficient to relieve the foetus per vaginally and therefore cesarean section will be the best choice for these *Perosomus horridus* foetuses.

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CONFLICT OF INTERESTS

The authors declare no conflict of interest

ETHICS APPROVAL

Not applicable

AI TOOL DECLARATION

The authors declares that no AI and related tools are used to write the scientific content of this manuscript.

DATA AVAILABILITY

Data will be available on request

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