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Salivary Mucocele In A Bullock: A Case Report

Veterinary Science

KEYWORDS : Salivary gland, Mucocele, Lugol's iodine and Bullock.

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ABSTRACT

A 7 year old bullock was presented with history of developed swelling below left ear. Physical examination revealed a fluctuant swelling and present at the caudal border of the vertical part of ramus of mandible. Diagnosis was based on the history, clinical signs, location, nature of fluid and postoperative evolution. The saliva was drained by using sterilized needle 16G and lugol's iodine 20ml was infused under swelling. But after three days of treatment swelling was regained its size. Bullock was sedate with the help of xylazine HCl @0.05mg/kgbwt, i/m and 4cm long horizontal incision was given over swelling. The accumulated fluid was removed and then gland was cauterized with help of copper sulfate crystals. Daily dressing was done with help of povidine iodine solution 0.5% and Post operative management with help of antibiotic and analges ic. The wound was healed in 17 days.

Introduction-

A salivary mucocele is abnormal accumulation of saliva in the subcutaneous tissue adjacent to a damaged salivary gland or duct and is surrounded by granulation tissue. (Tyagi and Singh, 1999; Dunning, 2003). Bovines have three salivary glands namely Parotid, Mandibular and Sublingual. Parotid salivary glands are considered as the main salivary gland. It is situated on the Massater muscle along the caudal border of vertical part of the ramus of mandible in cattle. In general, it is the sublingual gland that is involved; less frequently, the parotid and zygomatic glands (Brown, 1989). In the present paper, an unusually large salivary mucocele is described in indigenous bullock.

Case History and Observation-

A 7 year old bullock was presented to veterinary hospital, Raipur Karchuliyan, Rewa, M.P., with history of developed swelling below left ear (pic. 1), for the past 15 days. Physical examination revealed a fluctuant swelling, painless and present at the caudal border of the vertical part of ramus of mandible. Prepare site aseptically and exploratory puncture was made with help of sterilized 16 G hypodermic needle, about 200 ml thick fluid drooled out. Diagnosis was based on the history, clinical signs, characteristics location, nature of fluid drooled out (thick mucus) and postoperative evolution.

Treatment and Discussion-

The saliva was drained by using sterilized needle 16 G and lugol's iodine 20 ml was infused under swelling. But after three days of treatment swelling regained its size. So finally decide surgical procedure followed by cauterization of the gland. Bullock was sedated with the help of Xylazine HCl @ 0.05 mg/kg bwt, i/m and site was prepared aseptically for surgical intervention. About 4 cm long horizontal incision was given over swelling. The accumulated fluid was removed and then gland was cauterized with help of copper sulfate crystals (pic. 2). After cauterization logol's iodine gauze was packed and wound was remains open. Daily dressing was done with help of povidine iodine solution 0.5% for next seven days. Post operative management done by inj. - fortified procaine penicillin @22000 mg/kg bwt, i/m, q24h X 6 days and inj.-ketoprofen @ 2.2mg/kg bwt, i/m, q24h X 2 days. The animal had uneventful recovery. The wound was healed in 17 days and no swelling was observed thereafter (pic. 3). Some cases have been resolved by using periodic drainage, but surgical treatment is necessary to prevent recurrence (Waldron and Smith, 1991). Sialography has been described as a method for the diagnosis of sialoceles (Smith, 2005), but it is technically difficult and in most cases like the present one it was unnecessary and therefore, not often performed because the diagnosis can generally be accurately made by careful observation and palpation.

Pic.1- Swelling near vertical ramus

Pic.2-Surgical procedure of ramus salivary mucocele

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