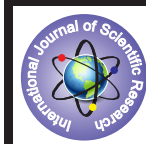


Post Parturient Udder Oedema in Murrah Buffalo – A Case Report



Veterinary Science

KEYWORDS : Buffalo heifer, Postpartum, udder oedema.

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ABSTRACT

The present study was carried on a three and a half year old Murrah buffalo weighing 350 kg was brought to the veterinary hospital with the history of Severe swelling of udder was noticed and the swelling reached up to navel region. Milk was normal in color and appearance. On Clinical examination of buffalo revealed normal rectal temperature, respiration and pulse rate. The oedema involved all four quarters and animal showed discomfort with painful condition. On palpation oedematous swelling was hot and pitting on pressure. Milk from each quarter had normal in color, consistency and pH. Milk in all four quarter was CMT negative. The animal was treated with diuretic, antihistamine and anti inflammatory for three days. Supportive therapy was also given as inj. Vit.B-complex with liver extract and cold fomentation of udder. Antibiotic were also administered to check the secondary infection. The animal was successfully recovered within three days of treatment.

Introduction

Udder oedema is characterized by excessive accumulation of fluids in the intercellular tissue spaces of udder and sub cutaneous tissue surrounding the udder. It is commonly seen in high milk-yielding buffaloes just few days before parturition or immediately after parturition, which is physiological in nature (Sharma *et al.*, 2010). Although the exact cause of udder edema has not been identified, a number of physiological and management factors have been associated with its occurrence. Predisposition to oedema may be inherited, decrease with increasing parity, and be more likely in older first-calf heifers. Excess pre partum intakes of energy, sodium, or potassium may also increase likelihood of oedema. Research relative to these factors has been reviewed extensively (Al-Ani and Vestweber, 1986). oedema edema can be a major discomfort to the buffalo and cow and causes management problems such as difficulty with milking, increased risk for teat, udder injuries, produce mastitis, and may also reduce milk production. The present case study deals with clinico-therapeutic phenomenon of post parturient udder edema in Murrah buffalo.

CASE HISTORY AND OBSERVATION

A 3-year old buffalo heifer, weighing 350 kg, was brought to the veterinary hospital, village Udawas, district Jhunjhunu, (Rajasthan), with a history of normal parturition two days ago and placenta was manually removed after 24 -30 hrs. Severe udder swelling was noticed which reached up to navel region. Milk was normal in color and appearance. Animal felt discomfort with pain and loss of appetite. A balanced nutritional diet including green fodder and concentrated mixture was fed to the animal. Physical examination of the buffalo revealed normal rectal temperature, respiration rates and pulse rate. The oedema involved all four quarters and showed discomfort with painful condition. On palpation, edematous area and swelling showed pitting on pressure. The potency of teats was normal. Milk from each quarter had normal in color, consistency and normal pH. Milk in all four quarter was California Mastitis Test (CMT) negative.

TREATMENT RESULTS AND DISCUSSION

The animal was milked thrice in a day and treated with diuretic -Inj. Frusemide @ 2mg/kg of body weight, intra muscular, once in a day, antihistamine -Inj. Chlorpheniramine maleate 10ml intra muscular, once in a day and anti inflammatory -inj. Meloxicam @ 0.5mg/kg body weight intra muscular, twice in a day. Treatment was given for three days. Supportive therapy was also given with inj. Vitamin B-complex with liver extract @ 10ml only once in a day and cold fomentation of udder. The animals successfully recovered within three days of treatment without affecting milk composition or milk production. The treatment with diuretics, antihistaminic and anti-infl ammatory were help

in draining out excessive accumulation of interstitial fluid, reducing histamine release and reducing swelling of udder and relieving pain respectively. Udder oedema is common in high-producing dairy cattle especially in heifers before and after parturition. Predisposing causes include age at first calving (older heifers are at greater risk), gestation length, genetics, nutritional management, obesity, and lack of exercise during the pre calving period. Pre partum diets that contain excessive salt increase the severity of udder edema. Physiologic edema is not usually painful and occurs when pitting edema develops symmetrically in the udder before parturition. Udder edema is a risk factor for development of clinical mastitis and occasionally can become a chronic condition that persists throughout lactation (Merck's Veterinary Manual). In present study, the postpartum udder oedema was noticed and it produces in animal fed with highly concentrated feed before parturition. The clinical observations recorded in the present study corroborated with those reported by Sharma *et al.* (2005). Ghodasara *et al.*, (2012) also advocated that udder edema is more severe in heifers than cows.

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