

Schistosomus reflexus in a Holstein Frisian Newborn (*Bos Taurus*) calf: A case Report

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Abstract

One schistosomus reflexus calf was expelled following mutation and forced extraction in a 2nd lactating, 350 kg body weight Holstein Frisian crossbred (*Bos Taurus*) cow. The tail and ankylosed limbs were closed to the foetal head. Viscera were exposed through incomplete abdominal skin.

Keyword: *Bos Taurus*; calf; Holstein Frisian; Schistosomus reflexus.

Introduction

Foetal monstrosity is associated with skeletal defects which are encountered as an obstetrical problem. Schistosomus reflexus is such type of congenital syndrome reported most common in cattle (Roberts, 1971) but rarely occurs in small ruminants (Tsuma and Abuom, 2008). In true schistosomus reflexus besides exposed thoracic viscera the spinal inversion also occurs with a distinctive ventral curvature (Laughton *et al.*, 2005).

Therefore, a case of true schistosomus reflexus in a Holstein Frisian Newborn (*Bos Taurus*) calf is presented here as a piece of study.

History and Observation

One 2nd lactating HF crossbred cow approximately 350 Kg body weight was reported with history of problem of calving since early in the morning. The animal showed straining intermittently with expulsion of part of viscera as reddish, fleshy mass hanging down from the vulva. On clinical examination, a part of the viscera exposed in the vulva. The foetus was found in abnormal posture with downward deviation of head.

Treatment and Discussion:

The foetus was corrected manually following mutation. After correction the abnormal posture a dead foetus was finally delivered by forced extraction. Clinical significance revealed the tail and hind limbs were closed to the foetal head (Fig. 1.) which might be due acute angulation of the vertebral column (Noakes *et al.*, 2009). The abdominal and thoracic viscera exposed through the incomplete abdominal

skin and muscles. Failure of abdominal wall to close might be due to overgrowth of certain abdominal organs (Roberts, 1971). Exposed thoracic viscera with ventral spinal inversion through incomplete abdominal skin are also known as true schistosomus reflexus (Laughton *et al.*, 2005). The foetus had five stiff limbs which were reported to be observed in schistosomus reflexus (Roberts, 1971). Forelimbs were found shorter compared to its posterior counter parts. The congenital defects observed in newborn Holstein Frisian calf (*Bos Taurus*) was therefore, diagnosed as schistosomus reflexus.



Fig. 1. True Schistosomus reflexus in a Holstein Frisian Newborn (*Bos Taurus*) calf

The extra forelimb was found develop from margin of right scapular which was confirmed as polymelia (Denholm, 2011).

The cow was treated before relieve from dystocia with antihistaminic (avil @20ml IM). After expel out the foetus the dam was treated with Melonex (@10mlx3 days IM), Calcium Borogluconate (@450ml IV), Endrofloxacin (@3gmx 5Days IM) injection. Exapar liquid was administered orally @ 100ml X 10 days. Cyclin DT and Furex (@4Bol. of each) was given IU.

The cow was found recovered normally after one weak and no any puerperal problem was shown up to one month after incidence.

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