alter retinol metabolism, subsequently leading to aural abscesses (Tangredi and Evans, 1997; Holladay et al., loc cit). In conclusion, Surgical intervention is the only appropriate choice for the treatment of auricular abscess. In the present case, the turtle regained her health without any further complications.

References


of milk from the sides of left fore teat. The cow was reported to have a previous history of udder and teat injury on its mid gestation. The teat laceration then was surgically repaired.

Clinical examination revealed a healthy postpartum animal except for the leaky teat. On udder assessment, it revealed leaking of milk from sides of the lower one third of the teat (Fig.1). On physical examination of the affected teat, the teat fistulation was evident and was located 1 cm above the tip of the teat. Fresh granulation was surrounding the tiny opening of the fistula. Since the cow was surgically repaired for teat injury in its mid gestation, the owner was apprehensive of another surgery in its 7th day postpartum and questioned the efficacy of it. Towards better treatment planning, Ultrasoundography was deployed to assess the nature and number of fistulation tracts.

Ultrasonographic examination was performed in standing posture without sedation. “Esoate Mylab-40” Ultrasound Station was deployed with a 7.5 to 12.5 MHz linear probe. As per Standard protocols (Cartee et al., 1986), Udder and Teat was evaluated with Gel Contact and Water bath techniques. Teat ultrasound revealed the discontinuity of teat wall with a singular fistular tract on the lower one third of the left fore teat. To assess the type of tract, a smooth ended metal teat probe was introduced through fistular opening and the same was tracked ultrasonographically (Fig.2). This confirmed a fairly clear and singular fistular tract.

**Treatment and Discussion**

Ultrasonography of the teat helped to confirm a singular fistular tract. The discontinuity of teat skin and wall was visualized sonographically. Teat canal was visualized as echoic to hypoechoic blurred structure, which was similar to reports (Cartee et al., loc.cit). The fistula was successfully repaired surgically. The sucking by new born calf in this case could have caused damage to the previously repaired teat injury and resulted in fistulation.

Teat fistulation is considered as an emergency, since delays in repair of such teat would cause development of mastitis or necrosis of the teat. Mastitis was evident in this study. Failure of wound healing results in a teat fistula and affected cows often became difficult to milk, and their milking efficiency were declined (Moreillo et al., 1993). The same was observed in this study. For localization and extension of lacerations of teat mucosa and teat stenoses, the accuracy of diagnosis was found to be improved by ultrasonography (Saratsis and Grunert, 1993). It was also useful in monitoring the healing process after surgical removal of proliferative tissue. Seeh et al. (1996) reported the use of sonography and endoscopy for diagnosis of webbed teat in a cow and its differentiation from teat fistula.
Traumatic, covered teat injuries were reported to result in Milk Flow Disorders and such cases required ultrasonographic examination of the teat (Franz et al., 2009). Ultrasonography was found to be advantageous here as it helped in better treatment planning through assessment of the nature and numbers of fistula tracts and thereby appropriate techniques for repair, as well as for client education and the overall decision making.

References

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Surgical Management of a Large Lipoma in a Cow

V. Mahesh1, A.S. Patil, Ramesh Rathod and L. Ranganath
Department of Veterinary Surgery and Radiology, Hebbal, Bangalore -560 024, KVASU Bidar, Karnataka state.

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Lipoma, benign tumour of the adipocytes are most common and multiple in dogs but occur in other species also. In all species, they usually occur in adult and aged animals and are most commonly located on the trunk and proximal limbs. These tumors were well differentiated and present as a nodular mass in the subcutis (Goldschmidt and Hendrick, 2002). Though most of them are benign, non painful and not life threatening, they affect mobility and cause discomfort. The present paper places on record a case of surgical management of an large sized lipoma over the scapular region in a cow.

Case History and Observations
An eight-year-old crossbred Jersey cow was presented to Department of Veterinary Surgery and Radiology Hebbal, Bangalore, with a huge mass over the right scapular region with a history of a round contoured mass developing gradually over period of two years (Fig. 1). The local veterinarian had lanced suspecting it to be an abscess. On examination the mass was 22” x 36” in size, soft to touch, was occupying whole of right scapula from withers to the shoulder joint and had a firm attachment. On exploration of the previously lanced area the tissue was soft in consistency. All the clinical parameters were within the normal range. Based on observations it was tentatively diagnosed to be lipoma and surgical excision of the tumor was planned.

Treatment and Discussion
The surgical excision of tumour was undertaken under xylazine sedation @ 0.1 mg/Kg B. Wt, intramuscularly and cup block infiltration analgesia with 2% Lignocaine HCl in standing position. An elliptical skin incision was made on the mass and adequate undermining of the skin was made. The mass was encapsulated in thin membrane so en bloc excision of the tumor mass was done following blunt dissection and ligation of blood vessels. Subcutaneous tissue was approximated with simple interrupted sutures using chromic catgut no -2. Skin closure was done with horizontal mattress sutures using Linex No-I. Postoperatively, Inj. Ceftri-

1Corresponding author : Email : dr.vmahesh@gmail.com