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CLINICAL CASE

Dystocia in a young ferret (*Mustela putorius furo*) with a possible ‘single kitten syndrome’[☆]



Dystocie chez une jeune furette (*Mustela putorius furo*) atteinte d'un possible « syndrome du fureton unique »

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MOTS CLÉS

Furet ;
Dystocie ;
Syndrome fureton unique ;
Césarienne

Summary A one-year-old ferret with 45 days of pregnancy was presented for a slight onset depression and brownish vulvar discharge. Because of her inability to expulse her fetuses at the end of her normal delay gestation, a diagnosis of dystocia was established. Abdominal radiographs showed a single fetus. A foetal death was revealed by ultrasound. A surgical treatment was elected. A caesarean section was performed and allowed to remove the single fetus with normal appearance. Clinical recovery of the female ferret was excellent at 15 days post-operatively. Cases of dystocia in the ferret are rarely described in the literature. This case is original because a “single ferret kitten syndrome” was suspected in order to explain a primary uterine inertia causing dystocia. Moreover the caesarean section was a successful alternative to ovario-hysterectomy or medical management. In this case, this choice prevented the risk of uterine rupture and protected the reproductive potential of the jill.

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KEYWORDS

Ferret;
Dystocia;

Résumé Une furette d'élevage âgée d'un an, gestante depuis 45 jours, est présentée pour un écoulement vulvaire brunâtre et un léger abattement. Étant arrivée à terme et incapable d'expulser ses fœtus, un diagnostic de dystocie est établi. Des radiographies abdominales révèlent la présence d'un unique fœtus. Une mort fœtale est mise en évidence par échographie.

[☆] Crédits de formation continue. — La lecture de cet article ouvre droit à 0,05 CFC. La déclaration de lecture, individuelle et volontaire, est à effectuer auprès du CNVFCC (cf. sommaire).

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Single kitten syndrome;
Caesarean section

Une prise en charge chirurgicale est alors choisie. Une hystérotomie permet d'extraire l'unique fœtus d'aspect extérieur normal. Quinze jours après l'intervention, la récupération clinique est excellente. Les cas de dystocie chez la furette sont rarement décrits dans la littérature. L'originalité de ce cas repose d'une part sur la suspicion d'un « syndrome du fureton unique » expliquant l'inertie utérine primaire à l'origine de la dystocie. D'autre part, nous décrivons l'utilisation efficace de la césarienne en alternative à une ovario-hystérectomie ou à une gestion médicale. Ceci a permis d'éviter les risques de rupture utérine et de conserver le potentiel reproducteur de la furette.

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Introduction

Reproductive system diseases are rarely described in the ferret. The main reproductive diseases reported in female ferret include hyperoestrogenism, pseudopregnancy, pyometra, and neoplasia. In periparturient jills in particular, they include pregnancy toxemia, agalactia, dystocia and mastitis. [1] Dystocia occurs at a rate of about 1% in large groups of ferrets. [1] This may affect the future reproductive function of female ferrets. Therefore each jill requires specific and appropriate care.

Observations

History

A one-year-old intact female fitch ferret was presented for a 45-day gestation, which is about 3 days longer than the usual duration (41 days in primiparous jill) [1]. The owner was a professional breeder. This first pregnancy was unexpected and unwanted. The jill was reported to have shown vulvar mucus secretions and built a nest three days before the consultation. No expulsive effort was reported. She had a good appetite despite moderate tiredness.

Clinical examination findings

On clinical examination, the ferret was slightly depressed. Cardiopulmonary auscultation was normal. Abdominal palpation revealed an enlarged left uterine horn. Brown vulvar losses were observed.

Differential diagnosis

Due to her inability to expel her fetuses at the end of her gestation, the jill was diagnosed with a dystocia. This could be explained by maternal or fetal causes. Maternal causes include primary or secondary uterine inertia and pelvic obstruction. Fetal causes include abnormal fetal presentation or position and fetal anomalies [2].

Diagnostics

Abdominal radiographs revealed a single fetus (Fig. 1). Ultrasound examination confirmed the presence of a single fetus without heartbeat (Fig. 2). It also revealed dilated thick-walled uterine horns containing an echogenic fluid (Fig. 3).



Figure 1. Abdominal radiograph of a one-year-old 45-day pregnant ferret showing only one fetus.

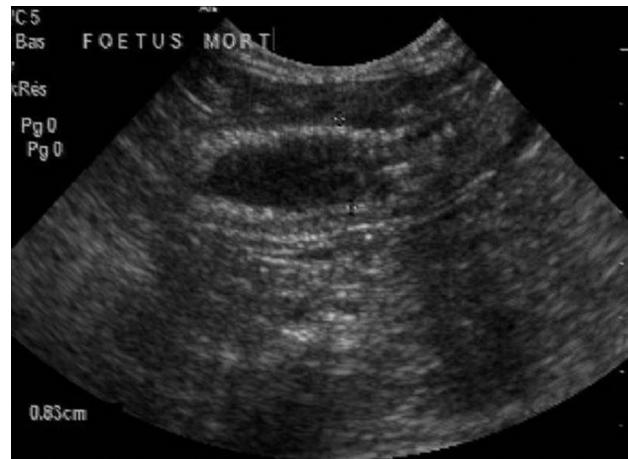


Figure 2. Uterine ultrasound of a one-year-old 45-day pregnant ferret showing a single fetus without heartbeat in the left uterine horn.

Further abdominal echographic images revealed a steatitis and some mild hypertrophic mesenteric lymph nodes. Based on these findings, metritis or early fetal resorption was suspected.

Treatment

Because of the future reproductive status of the jill and because of the fetal death, a caesarean section was elected

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