

## MANAGEMENT OF POSTPARTUM CERVICO-VAGINAL PROLAPSE IN COW

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**Abstract:** Cervico-vaginal prolapse is an important postpartum reproductive disorder in cattle that requires prompt intervention to prevent tissue damage and recurrence. A pluriparous cow was presented to with a history of normal parturition 12 hours earlier and delivery of a dead fetus. Clinical examination revealed a reddish, edematous, and soiled prolapsed mass involving the cervix and vagina, accompanied by excessive straining, restlessness, and reduced feed and water intake. Following epidural anaesthesia, the prolapsed tissue was cleaned, reduced in size, and gently repositioned into its normal anatomical position. A Buhner suture was applied to maintain retention, along with supportive medical therapy. The suture was removed after 10 days, and the animal recovered uneventfully without recurrence. The case highlights the importance of early recognition and timely management of postpartum cervico-vaginal prolapse for successful recovery and preservation of reproductive function.

**Keywords:** Cervico-vaginal prolapse, cow, postpartum prolapse, Buhner suture, cattle, reproductive disorder

### INTRODUCTION

Cervico-vaginal prolapse is a reproductive disorder in which a portion of the vaginal wall, along with the cervix, protrudes through the vulva, exposing the vaginal mucosa externally (Rasool et al., 2022). It is commonly observed during the last few weeks of pregnancy or shortly after parturition. Several factors may contribute to its occurrence, including increased abdominal pressure during pregnancy, hormonal changes, hypocalcemia, an imbalance in the calcium-to-phosphorus ratio, selenium deficiency, chronic genital infections, and excessive straining during or after parturition (Parikh et al., 2018). The condition is more frequently observed in pluriparous animals, possibly because repeated pregnancies and parturitions can lead to weakening of the supporting ligaments and increased laxity of the vaginal tissues (Sharma et al., 2025).

### HISTORY AND CLINICAL PRESENTATION

A pluriparous cow was presented to the Veterinary Clinical Complex, Nagpur Veterinary College, Nagpur, with a history of normal parturition approximately 12 hours earlier, resulting

in the delivery of a dead fetus. A prolapsed mass was observed protruding through the vulva. The animal exhibited signs of discomfort and restlessness, along with excessive straining and reduced feed and water intake. On clinical examination, the rectal temperature was 38.6°C, while the heart rate was within the normal physiological range. The prolapsed mass appeared reddish, edematous, and soiled, and involved both the cervix and vagina. Based on the history, clinical signs, and physical examination findings, the condition was diagnosed as postpartum cervico-vaginal prolapse. (fig1)

## **TREATMENT**

The animal was safely restrained in a trevis to facilitate examination and treatment. To minimise excessive straining and provide adequate stabilisation during the procedure, epidural anaesthesia was administered using 3 mL of 2% lignocaine. After allowing approximately 10–15 minutes for the anaesthetic effect to develop, the prolapsed mass was gently elevated to relieve the obstruction to urination. The prolapsed tissue was thoroughly cleaned using water containing 1% potassium permanganate. A POP-in spray was then applied to aid in reducing the size of the prolapsed mass. Once the swelling had sufficiently subsided, the prolapsed organ was gently repositioned into its normal anatomical position using adequate lubrication. (Fig2) To prevent recurrence and retain the organ in its normal position, a Buhner suture was applied. Supportive therapy included calcium borogluconate (250 mL, administered slowly intravenously), DNS (1500 mL, IV), ceftriaxone–tazobactam (3 g, IM), meloxicam (15 mL, IM), chlorpheniramine maleate (10 mL, IM), and Tonophosphan (10 mL, IM). The prescribed treatment was continued for three days, except for calcium borogluconate. The Buhner suture was removed after 10 days. The animal showed an uneventful recovery, with no further recurrence of prolapse.

## **DISCUSSION**

Cervico-vaginal prolapse is an important reproductive disorder because it can adversely affect subsequent fertility, leading to delayed or irregular postpartum estrus, reduced conception rates, and prolonged inter-calving intervals (Hema et al., 2025). When treatment is delayed, the prolapsed tissues may become markedly edematous and can develop ischemia, lacerations, hemorrhage, and, in severe cases, systemic shock or death (Selvaraju et al., 2019). The outcome of treatment depends on several factors, particularly the duration of prolapse, extent of tissue damage or trauma, degree of bacterial contamination, and involvement of adjacent organs such as the urinary bladder (Beheshti et al., 2011). Therefore, early recognition and timely treatment are important to minimize tissue damage, facilitate successful replacement and retention of the

prolapsed organs, and maintain future reproductive performance. In the present case, the prolapse had been present for a relatively short period and the tissue showed minimal trauma, which facilitated successful reduction and retention of the prolapsed cervico-vaginal mass and resulted in an uneventful recovery.

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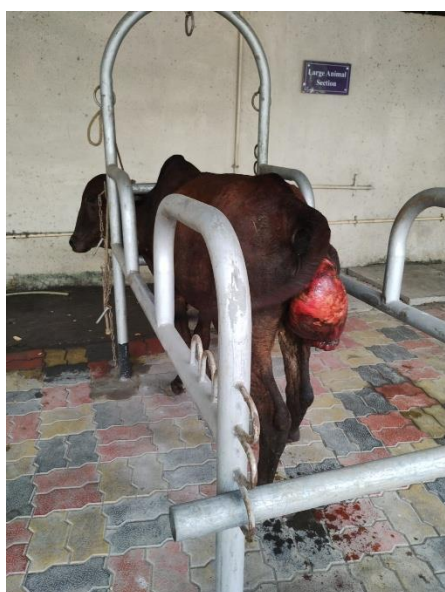


Fig 1. Prolapsed mass



Fig 2. Post treatment