

CLINICAL MEDICINE

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1

Rumenotomy. On October 26, 1945 a Guernsey cow was presented at the Stange Memorial Clinic with a history of having chewed off a stomach tube and swallowed it. The cow was in excellent spirits and showed no symptomatology relative to the foreign body in the rumen.

A rumenotomy was proposed and the cow was prepared for surgery by clipping the hair of the left paralumbar fossa and painting the area with tincture of iodine. The cow was held at the halter and no other restraint was resorted to, the operation being completed in the standing position. One hundred twenty-five cc. of 4 per cent procaine were used intradermally along the line of incision and to make deeper injections to the peritoneum. Four per cent procaine is preferred for this operation, because of the quicker and more prolonged anesthesia.

Operation

A perpendicular skin incision 10 inches in length was made half way between the last rib and the tuber coxae and two inches ventral to the lumbar vertebrae. Hemostats were placed on the edges of the skin and these were held laterally by assistants, while the external oblique, internal oblique, and transverse muscles were severed respectively. In each instance the incision was extended with a blunt pointed bistoury. Anesthesia had been nearly perfect and the patient offered no restraint problem. Avoiding prominent blood vessels on the rumen, two umbilical tapes were placed 3 inches apart. Eight inches ventrally, two other tape sutures were similarly placed.

These tape sutures were long enough so that assistants could have a suitable hand hold on them. With the assistants applying moderate tension, an incision was made between the two sets of tapes.

Prevention of Soiling

An embroidery loop was placed over a two foot square piece of oilcloth and the oilcloth within the lumen of the embroidery loop was cut out with a knife. The embroidery loop was passed vertically through the rumen incision. It was then turned so that, the flaps of the oil cloth prevented any material from soiling the peritoneal cavity.

A three foot section of the stomach tube was easily located and removed. Some of the rumenal contents were removed to facilitate suturing of the rumen. The embroidery loop was then removed, and the rumen was held in position for suturing by placing tension on the four tapes placed on the dorsal and ventral aspect of each side of the incision. The rumen was sutured with No. 2 plain cat gut using a double row of Connell sutures.

The peritoneum and transverse fascia was sutured with No. 4 plain cat gut,

using a continuous suture. The internal oblique and the external oblique muscles were sutured separately using No. 4 plain cat gut and the blanket suture. The skin was sutured with umbilical tape using a transverse mattress interrupted suture. Bipp paste was applied to the line of incision and the animal was returned to her stall. After care consisted of application of Bipp paste to the line of incision as indicated. The cow made a rapid, uneventful recovery.

—Jack Nelson, '46

2

Pressure Necrosis. On September 27, 1945, a dark bay draft horse was admitted to the Stange Memorial Clinic. The animal had a half inch chain about two and one half feet in length embedded into the angle of each mandible. Granulation tissue was rapidly obscuring the chain from view, except at the sides where the chain protruded from the flesh.

There was also a tract of pressure necrosis just above each eye, indicating where the chain had been cut loose by the farmer. The horse presented a very dejected attitude due to the swelling above the eyes, but carried no increased temperature and presented no other symptoms.

History

The history secured at this time stated that the owner had turned the horse out on pasture with a halter on, the halter having a chain throatlatch. In some unknown manner, the halter was very forcefully pulled down over the head resulting in the lesions. The owner had merely severed the chain from the halter and brought the horse to the clinic. Judging from the amount of tissue organization the accident must have occurred at least a week prior to the time it was detected by the owner.

The wounds were cleaned and the hair was shaven about the wounds as well as could be accomplished. The horse was given one and one half ounces of chloral hydrate by means of a stomach tube, and

was then restrained upon the operating table. An attempt to pull the chain out demonstrated that it was too firmly embedded. Procaine hydrochloride, 2 per cent, was used to infiltrate around the



View showing the chain deeply embedded in the mandibular tissue.

chain and then an incision was made down to the chain. At the angle of each mandible an exostosis had developed which so firmly incorporated the chain that it was necessary to chisel the bony tissue away. The chain was finally freed and the edges of the wound were smoothed as well as possible.

Aftercare consisted of daily applications of sulfanilamide powder utilizing an insufflator. Granulation tissue quickly formed, and the wound healed without further complications.

This case report has been presented not by virtue of its clinical significance, but as an emphasis of the danger of leaving halters or any other restraining device on animals turned to pasture. It is also mute evidence of the neglect some animals receive at the hands of their owners.

—Jack Nelson, '46

3

Contracted Tendons in Foals. On April 12, 1945, a three day old Shetland filly was admitted into the Stange Memorial Clinic. The colt was