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Treatment through surgical intervention of an injured grey hound due to attack of wild boar

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Abstract

Injuries on the neck region are likely to cause severe pain, conditions become more worse when the damage/injury is deep which sometimes damages the major nerves passing through the area producing a severe pain/irritation there by making the conditions even tough while restraining. Secondly if the wound gets infected with some micro-organisms the case becomes even worse. The canines specially guard dogs, hunting dogs have aggressive nature which makes them difficult to control. Mostly suturing is regarded as the best way to correct the damaged area. Suturing needs the animal to be in complete anaesthetised state which has a risk of cardiac arrest and accordingly the maintenance dose is decided.

Keywords: Surgery, grey-hound, anaesthesia, suturing

Introduction

Grey hound breed of dogs has a history in hunting. That part is still being practiced in some of the rural areas. This breed of dogs, Racing Greyhounds are usually 25 to 29 inches tall, and show Greyhounds are slightly larger, at 26 to 30 inches in height. Greyhounds generally have a wonderful temperament, being friendly and non-aggressive, although some can be aloof toward strangers. Give them a treat, though, and they're likely to become a friend for life.

A similar case was reported from a village Dabelhar near R.S. Pura owner sh. Gulshan kumar whose dog was injured. The owner reported that his dog was bitten by a wild boar on the right side of neck region. He reported that he was away when the incidence took place and when he returned back in the evening, he provided his dog with some first aid treatment from a local vet. The dog was then brought to SKUAST-J the next day

Case history and observation

The dog had swelling in his right forelimb. The wound was covered with a half-voile cloth piece, which was seen wrapped around the neck of the dog. The wound was contaminated grossly with dust and hardened mud, even though after covering this shows that the dog was in long time fight and thereby the neck muscles where seen damaged, necrosed, and where partially blackish in colour, the skin was hanging down from and was attached with the body only on a single point. The dog was breathing very heavily and was in active state of mind and body, he was listening to commands of his owner and was acting accordingly the dog had a body temperature of 105.8 degree Fahrenheit with a body weight of 29.30kg, after examining the condition of patient decision was made to go for sutures rather than just dressing the wound.

Treatment and discussion

The dog was restrained and was given Inj. vetalgin 1.8 ml via I/M route and Inj. Anistamine 1.8 ml via I/M route. The dog showed aggressiveness and resisted anyone to touch the wound for any further diagnostic treatment. The patient was relaxed by his master and was administered with atropine 2 ml I/M after 5 minutes intacef tazo (an antibiotic) was given 5ml I/M. Xylazin was injected 2.8 ml I/M. it normally takes 10-15 min, for xylazin to come into action. The patient was examined thereafter and deep penetration and damaged muscles were seen. A maintenance dose was administered. The dog was injected with ketamine hydrochloride 5.8 ml slow I/V and the animal was rested upon.

The effect was observed just some minutes after the ketamine was administered. The patient stood calm thereafter and was lied down with an end-tracheal tube inserted to facilitate easy breathing in anaesthetized state, the wound was washed with normal saline and cleaned with povidine-iodine solution the necrosed part of neck muscle was removed, a catheter was placed alongside of damaged muscles to facilitate easy drainage of any kind of fluid or pus if it gets accumulated in the area due to damaged muscle the damaged muscles were sutured, a maintenance dose of 1 ml of diazepam and ketamine was given in the ratio of 1:3 when the effect was seen to decrease during the treatment, antibiotic intacef tazo was injected. Slow I/V and the skin was then sutured and the site cleaned with povidine-iodine and the right forelimb was bandaged upto the neck region.

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Fig 1

Recovery

The patient quick a fast recovery after the surgical intervention and was back to its normal life in almost 6 weeks. The owner had an observation of post-operative pain which was easily corrected with melonex Inj. The dog was back on its feet thereafter.

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