

Congenital Goiter in a Kid

L.A.Khan, G.S.Khante, M.S.Chavan, P.R.Suryawanshi, M.M.Qazi,
A.R.Shaikh and Ziyauallah Siddiqui

Society for Prevention of Cruelty to Animals (SPCA), NAGPUR

Introduction

Goiter is an iodine deficiency disorder characterized by a non inflammatory and non neoplastic enlargement of thyroid gland. Lall (1952) and Rajkumar (1970) reported the seriousness of goiter to the life of new born kids and suggested that the condition can be avoided by proper supplementation of iodine in diet of the goat especially during advanced pregnancy.

Case History, Observations and Discussion

An adult she goat with her three new born kids was brought to the clinic. All three kids died after one hour of birth showing respiratory distress and having swelling on either side of the larynx. The enlargement was palpated and suspected for goiter. For confirmation pieces of tissue from thyroids were collected in 10% formalin and sent to pathological lab. Microscopically sections of thyroid gland showed hyperplasia and proliferation of the living epithelial cells of the acini with presence of pale eosinophilic colloid material. The gross and histological picture of the enlarged glands suggested that these cases were of a parenchymatous type of goiter. The death of kid

was evidently to suffocation by the pressure exerted by the enlarged gland on the trachea.

The owner was advised to add iodinated salts, available in the market in the diet of advanced pregnant goat and stoppage excessive feeding of goitrogenetic plants, viz cruciferous and cyanogenetic plants (cabbage, soybean etc.).

Congenital goiter, in kids was earlier attributed to iodine deficiency. However Wright (1958) and Setchell et al; (1960) observed goiter in new born lambs when pregnant ewes were fed with diet containing goitrogenetic plants viz. Cruciferous and cyanogenetic plants. The similar pathological findings have been reported in lambs (Setchell et al; 1960) and in the kids (Choudhary et al; 1983).

References

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