

Parturient Paresis in Crossbreed Cow

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Introduction

Parturient paresis is a metabolic disease occurring most commonly within the first 2 or 3 days after calving in dairy cows. It is manifested by tonic and clonic spasms changes in mentation, generalized paresis, and circulatory collapse. The uncomplicated clinical case responds to calcium therapy. However, the cases which are unable to rise after 24 hr and after two treatments are classified as 'downers' (Radostits *et al.*, 1994).

Case History, Clinical Observation, Treatment, Result and Discussion

The present study reports parturient paresis in two cross bred cows which were successfully treated. Two cross bred cows ageing between 5-8 years belonging to Kalmeshwar (Taluka) of Nagpur Dist. near the Nagpur Veterinary College, Nagpur were referred with the history of paretic syndrome. The major clinical manifestations exhibited by the cows were muscle tremors, ruminal atony, grinding of teeth, agalactia and sternal recumbency with a lateral kink in the neck and head resting over the flank, which is a typical posture of parturient paresis (Smith, 2000).

Both the affected cows were given two doses of 3ml of B1,B3 and B12 Inj. Diluted with 6ml of distilled water epidurally, one at lumbo-sacral space and another at first coccygeal space, on first day. Calcium, magnesium and phosphorus preparation 450 ml by intravenous route and inj. Meloxicam 15ml

by intramuscular route were given for two days. The owner was advised to turn the animal frequently and to provide soft bedding to prevent bed sores.

Out of both cows, one recovered uneventfully and was able to get up on their own on 1st day of the treatment and complete recovery on third day. However another cow needed 2nd dose of nervine tonics on fourth day.

The animals were treated with polyionic solutions containing calcium, phosphorus and magnesium as there is likely to be deficiency of all these elements in the paretic cross bred cows. (Radostits *et al.*, 1994; Uma Kanthan, 1996; Syma Sunder 1996). Neurotrophic vitamins were given to facilitate neuronal transmission and skeletal muscle action. The treatment was successful in treating both the Cases of parturient paresis, instead of opting routine intramuscular route, epidural route was selected to stimulate motor neuronal activity which facilitated fast recovery.

References

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