Migration of broken hypodermic needle in the cervical muscles of dog

A.K.Sharma, Hemant kumar, L.L.Dass*, Shivendra Kumar and Vinod Kumar

College of Veterinary Science and Animal husbandry, Birsa Agricultural University, Kanke, Ranchi-834006 (Jharkhand) * Corresponding author

Abstract

A Spitz bitch of 21/2 years of age was presented in the Department with complaint of anorexia, depression, frothy salivation and distress. However, history of vomition was lacking. The bitch evinced pain on palpation of cervical region. The Radiograph revealed the presence of a linear radioopaque body lodged in the cervical musculature just above the vertebrae. A broken hypodermic needle was retrieved from the cervical musculature just above the last cervical vertebrae, following faulty mode of injection in the cervical region which is not advocated for pets.

Key words: Dog, Hyperdermic needle, Cervical muscle, Spitz.

Lodgement of broken hypodermic needle at the site of injection may be a sequel to unscrupulous and faulty technique. The condition is not uncommon in large animals but is probably rare in pets. Moreover, the manifestation of associated symptoms presented an uncommon clinical features unrelated to the condition. Considering these aspect in view the present communication deals with an unusual case of broken hypodermic needle which got lodged in the cervical musculature following faulty injection in a Spitz bitch.

Clinical symptom and physical examination

A Spitz bitch of 21/2 years of age was presented in the Department of Surgery on assumption that it had ingested foreign object. However, the dog had not been provided meat or fish for the last two weeks. The anamnesis of the case was vague and the owner could't rule out the possibility of a foreign body. The bitch exhibited anorexia, depression, frothy salivation and distress. However, history of vomition was lacking. The bitch evinced pain on palpation of cervical region. The animal was examined for the presence of foreign body in the mouth cavity and oesophagus .Lateral view radiography of neck region was suggested to preclude the possibility of any foreign object in the lumen of the oesophagus. The Radiograph revealed the presence of a linear radioopaque body lodged in the cervical musculature just above the vertebrae.

Treatment: The cervical region of surgical interest was prepared for aseptic surgery. The surgical procedure was accomplished under ketamine and xylazine anaesthesia. The dog was held in left lateral recumbency and incision was given just infront of scapula. The presence of needle in musculature was judged by digital pressure. The needle was removed by needle holder following blunt dissection of muscles.

Postoperatively a course of Ceftriaxone 250 mg intramuscularly was administered for 5 days. Meloxicam 0.25 ml was given intramuscularly for 2 days. The skin sutures were taken out on the 10th postoperative day.

Results and Discussion

The symptoms viz. anorexia, depression, frothy salivation and distress manifested in the present case may be due to irritation of nerves and muscles produced by broken hypodermic needle resulting into inflammation of the area. Lack of vomition in the present case was suggestive of absence of extra and intraluminal intestinal obstruction. The confirm diagnosis was made by plain radiography which is good tool for diagnosis of any foreign body of radiopaque in nature (Keely, 1987). The dog recovered uneventfully after the treatment. In this case, a broken hypodermic needle was retrieved from the cervical musculature just above the last cervical vertebrae, following faulty mode of injection in the cervical region which is not advocated for pets.

References

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