Fibromyoma in a Bovine

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olved the lateral canthus and part of the sclera and cornea. It was dissected from the sclera and cornea. That part of the cyst involving the lateral canthus was incised and the hair and follicular material were also removed from here. Two more interrupted sutures using silk suture material were used to close this incision. The dog made an uneventful recovery and was discharged on March 27, 1949.

Ralph Muhm, '50

Fibromyoma in a Bovine. A 5-year-old Holstein cow was admitted to Stange Memorial Clinic, March 25, 1949 with a history of a pedunculated growth on the left ventral abdominal wall for the past three years. It had been growing faster during the last year. There was also a small growth in the region of the anterior cervical lymph nodes.

Further examination showed the mandibular, anterior cervical and left prefemoral lymph nodes to be enlarged. The enlargement in the ventral anterior cervical area was softer than the mass on the abdominal wall. The body temperature was normal and remained normal throughout the period the animal was in the hospital.

On March 30, the patient was restrained on the operating table in a right lateral recumbency. The pedunculated mass was cleansed with .035 percent aqueous solution of a quaternary ammonium compound. The surrounding abdominal wall was shaved and 70 percent (by weight) ethyl alcohol was applied. Two percent solution of procaine hydrochloride was infiltrated into the area. By combining surgical excision and thermocautery the tumor and underlying subcutis were removed. Many small arteries were encountered and considerable ligation was required. Silk suture material was used for the ligation. Eupad powder was applied to the exposed tissue. Last minute hemorrhage occurred and it was necessary to apply two hemostats as the patient was being led to her stall. The tumor mass was submitted to the laboratory for histopathologic study. Sulfanilamide powder was dusted on the swollen and edematous wound for the next four days.

A biopsy of the swollen area in the region of the anterior cervical lymph nodes was made on April 1. A coffee-colored fluid was obtained. The pulse rate on this day was 140 per minute but was a strong pulse. In the belief that the mass was a hematocyst, it was surgically excised and found to be a dermoid cyst filled with dark colored hair. The cavity was packed with sulfanilamide gauze and the wound edges were approximated with interrupted silk sutures. The bottom of the wound was left open for drainage. A laboratory examination of a blood specimen showed the hemoglobin content to be 56.8 percent of normal.

The pulse returned to normal on April 2. The bottom suture was removed from the site of the cyst and the gauze pack was withdrawn. The wound was dusted with sulfanilamide powder. The patient was given 400 cc. of citrated blood intravenously to compensate for the low hemoglobin content.

The following day, the bottom edges of the cervical wound was spread with hemostats to facilitate drainage. The next day the sutures were removed from the cervical wound and hereafter it was treated as an open wound. Boric acid and air-slaked lime (equal parts) healing powder was dusted on both wounds daily until the patient left the Clinic.

Fig. 4. The fibromyoma before removal.
By April 11, the abdominal wound was granulating satisfactorily. The cervical wound had not reduced in swelling as much as was hoped. The next day the cervical wound was draining satisfactorily and the patient was discharged.

A laboratory report of the histopathologic section of the abdominal tumor revealed it to be a fibromyoma.

D. H. Crawford, ’50

Foreign Body in the Esophagus of a Cow. A peculiar case of esophageal obstruction in a bovine was treated at the Stange Memorial Clinic during February. The patient, a 6-year-old Guernsey cow, was admitted to the Clinic on February 18, 1949.

The history obtained was that on February 12, 1949, the cow broke into a hog lot where the owner was feeding garbage. After this the cow was unable to eat and an enlargement was observed in the anterior esophageal region. The local veterinarian passed a stomach tube, but the condition did not improve. The day before her admission a stomach tube could not be passed, and it was advised that the owner bring her to the Clinic.

The symptoms observed when the cow was presented for treatment were: an enlargement in the anterior portion of the esophagus about the size of a large orange, but somewhat irregular in shape; and apparent pain on palpation. The cow was unable to eat and showed dehydration and considerable loss of weight.

An Emont’s speculum was placed in the mouth and an attempt made to pass a stomach tube. The tube would either strike a solid object in the esophagus or pass down the trachea. Next, an equine mouth speculum was placed in the mouth. The tongue was pulled out of the mouth and by reaching down into the esophagus, the foreign body could be touched with the tips of the fingers. It was determined to be a lid from a No. 2 (20 oz.) tin can, and was lodged in a horizontal position in the esophagus about 4 or 5 inches from the pharynx. Only the anterior edge of the lid could be reached with the hand, and then only with a thumb and forefinger. The edge of the lid was bent upwards with the fingers and by rotating it, the lid was easily removed. It was thought that the lid had tipped enough to allow the escape of gas, and a limited amount of swallowing.

After removal of the lid, the patient drank a large amount of water and then began to eat hay. The patient was discharged the same afternoon.

This case is another example of the peculiar things cows will eat and which often become lodged in the esophagus.

E. A. Gubser, ’50

Nasal Polypus In The Horse. A 3-year-old Standardbred male horse was admitted to Stange Memorial Clinic.

Fig. 5. The horse as he appeared when admitted to the Clinic.