1952

Suppurative Sinusitis Following a Dehorning Operation

Gene Petersen
Iowa State College

Follow this and additional works at: https://lib.dr.iastate.edu/iowastate_veterinarian

Part of the Large or Food Animal and Equine Medicine Commons, and the Veterinary Pathology and Pathobiology Commons

Recommended Citation
Available at: https://lib.dr.iastate.edu/iowastate_veterinarian/vol14/iss2/12

This Article is brought to you for free and open access by the Journals at Iowa State University Digital Repository. It has been accepted for inclusion in Iowa State University Veterinarian by an authorized editor of Iowa State University Digital Repository. For more information, please contact digirep@iastate.edu.
The patient showed no improvement on the next day, and the temperature remained the same. Water was again offered but the heifer was unable to drink, although she definitely desired to. She had absolutely no control over her body movements, and she bawled intermittently with a hoarse, masculine sound.

During the next two days the patient showed no improvement. She refused all food and water. The temperature decreased to 95.4°F. The heifer was severely constipated; the hoarse, masculine bellowing and lack of control of body movements were still evident.

On Oct. 21, 1951, 6 days after entering the clinic, the patient appeared in very poor condition, and convulsive tremors were noted all over the body. Later in the day the heifer died.

A brain smear was made in the bacteriology laboratory and a positive diagnosis for Negri bodies was reported, thereby substantiating the clinical diagnosis. Smears of the heart, liver, spleen, and kidney were reported as negative.

The postmortem laboratory reported the following findings: (1) encephalitis, (2) catarrhal enteritis, (3) ecchymotic hemorrhages on the heart and parietal pleura, (4) hypostatic congestion in the right lung, and (5) dehydration of the rumen mass.

John M. Wenzler ’53.

4 Suppurative Sinusitis Following a Dehorning Operation. On Dec. 13, 1951, a yearling Hereford bull was admitted to the Stange Memorial Clinic for treatment with a history of having been dehorned December 1. On December 12, the owner had noticed the area around the left eye swollen and had summoned a local veterinarian, who referred the case to the clinic.

Upon admittance, the animal was greatly depressed and had a purulent exudate from both nostrils and from the dehorning area. A clinical diagnosis of suppurative sinusitis was made. The patient was given 2.5 gm. of aureomycin in the right jugular vein.

The animal succumbed on December 15. Autopsy revealed the following: (1) a very acute septicemia and toxemia, probably resulting from the sinusitis following the dehorning operation; (2) diffuse hemorrhages in the subcutaneous tissues, heart, and abdominal viscera; (3) suppurative sinusitis of the left frontal sinus. (4) blood-tinged, edematous cellulitis along the underline of the neck; (5) a blood-tinged hydrothorax and hydropericardium, the thorax containing approximately 5 gal. of fluid; (6) a layer of gelatinous fibrin, 1 cm. in thickness, covering the left cerebral hemisphere; resulting in pressure on the brain; (7) marked hemorrhagic lymphadenitis of the cervical lymph nodes.

In view of the acuteness displayed in this case, bacteriological cultures were made. The brain, liver, spleen, heart's blood, kidney, and a swab of the pleural fluid were all negative for the presence of any pathogenic bacteria.

Escherichia coli was isolated from the hemorrhagic subcutaneous tissues. Pasteurella multocida and Corynebacterium pyogenes were isolated from the left frontal sinus and incriminated as the primary etiological agents.

Gene Petersen ’53

It is recorded that epilepsy has the longest history of any disease in medical literature.

Issue 2, 1952