

1961

Skunk Scent Gland Removal

Clarence Fitz
Iowa State College

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



Part of the [Small or Companion Animal Medicine Commons](#), and the [Veterinary Anatomy Commons](#)

Recommended Citation

Fitz, Clarence (1961) "Skunk Scent Gland Removal," *Iowa State University Veterinarian*: Vol. 23 : Iss. 1 , Article 9.
Available at: https://lib.dr.iastate.edu/iowastate_veterinarian/vol23/iss1/9

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.

ing trochar, with a toggle pin threaded with extra heavy Supramid², was inserted into the drilled hole. The cannula was inserted through the trochar, pushing the toggle pin into the pelvic canal. With the trochar still in place, pressure was applied to the ends of the Supramid, firmly adjusting the toggle pin against the wall of the pelvis. The trochar was then removed and a medical plastic button was tied into the Supramid on the lateral surface of the shaft of the femur. The muscles were sutured into position using medium Supramid, and the skin was sutured with medium Supramid mattress sutures with just enough tension to bring the skin into apposition.

Recovery during the first week was complicated only by a temperature rise one day following surgery. Penicillin streptomycin was administered daily for three days.

This dog was very active and on the 8th day following surgery luxation of the joint again occurred. The Supramid artificial ligament had broken allowing the joint to luxate. The failure of the operation could be contributed to the over activity of the dog; there is a possibility the toggle pin had a rough surface which cut the Supramid artificial ligament; the angle of the drilled hole was wrong allowing movement of the joint which may have cut the ligament material.

The operative procedure was repeated with the exception that the joint capsule was incised. This facilitated inspection of the drilled canal with relationship to the normal joint movement. The canal was correct and another toggle pin with extra heavy Supramid suture material was inserted. The joint capsule was sutured with medium supramid and the muscles and skin were sutured as before. No attempt was made to retrieve the first toggle pin. Recovery was uneventful. One and a half months later the owner reported the dog had complete use of the joint and leg.

The Knowles Toggle Pin is a satisfactory method of repairing a chronic coxofemoral luxation. The advantages are: the head of the femur can be held securely in the acetabulum while allowing movement of

the joint; the success of complete reduction of the joint is not dependent upon the chance union of torn fibrous tissue. The occasional mechanical failures of orthopedic surgical procedures should not discourage the practitioner from attempting the operation again.

1 Winthrop Laboratories

2 Jen-Sal

Stanley J. Harless '61

4

***Skunk Scent Gland Removal.** The descended skunk has emerged as a pet which can best be described as a conversational piece. When tamed adequately, it makes a pet which is safe, lovable and above all novel and exclusive

Removal of the scent glands is best performed in a skunk which is from six to eight weeks of age. The case to be described involved an animal which was estimated to be about six weeks old. The exact age was not known since the skunk was captured after being struck by a farm implement.

Anesthesia of the skunk for removal of the scent glands can safely be done by the use of ether. Nembutal may be used, however, intravenously or intrapleurally in the same dosage as used for dogs and cats. A container in which the skunk would fit comfortably was obtained, and the bottom was covered with cotton which was soaked with ether. The skunk was placed in the container and a clear plastic sheet, which allowed view of the actions of the animal, was placed over the top of the container.

When the skunk was adequately anesthetized, it was placed on the operating table. An ether nose cone was used to maintain surgical anesthesia. Doing the surgery under a protective glass cover a way from the surgery room is recommended in the event of accidental cutting of the scent gland.

The skunk was placed on its back, and one person pulled the back feet forward to allow the surgeon to have full view of the surgical area. The anal ring was everted by placing pressure with the thumbs



Scent gland removal in the skunk.

on either side. This brought the two pink papules located just inside and lateral to the anal ring into view. An Allis forceps was used to gently clamp onto the visible nipples. By blunt dissection and gentle traction the whitish glands were separated from the surrounding tissue and the nipples and attached sacs were removed. No suturing is necessary following removal of the glands.

The skunk made an uneventful recovery following surgery, and it has become an interesting family pet.

* This operation took place in the hospital of W.A. Danker, D.V.M.

Clarence Fitz '61

5

Gunshot Wound In German Shorthair Pointer.

A female German Shorthair Pointer was brought into the clinic with an extensive wound of the thoracic area just behind the axillary region. There was some oozing of serum from many small punctures in the skin, apparently caused by shot gun pellets. The dog was placed on Kymar* to try to clear away the damaged tissue and to stop the swelling in the area. This was discontinued after one week because the fistulas to the outside were not draining properly and the swelling increased noticeably.

An x-ray was taken and it showed several shot gun pellets in the area. The dog was put on penicillin and streptomycin injections twice daily for five days, and then it was decided to remove some of the necrotic area beneath the skin.

The dog was given one grain of morphine as a basal anesthetic. Sodium pentobarbital was used as the general anesthetic. A large area posterior to the scapula was prepared for surgery. An incision was made from the posterior edge of the latissimus dorsi muscle in an arc around to the first nipple. The skin was reflected away from the fistulous tissue. The fistulous tracts ramified in an area from the front leg to the posterior end of the rib cage, and from the lateral processes of the vertebrae to the midventral line. A large mass of the fistulated tissue was bluntly dissected away and removed. Subcutaneous cat gut sutures were placed and the skin was sutured with vetafil. A roller bandage was applied and the dog was returned to its cage.

The dog was placed on penicillin-streptomycin injections twice daily for three days. On the fourth day post-surgery, a large amount of fluid had collected in the subcutaneous spaces. Eighty cubic centimeters of bloody serum was aspirated with a needle and syringe. The next day 150 cubic centimeters of fluid had collected and it too was removed. This accumulation continued for three more days, but in gradually diminishing amounts. On the seventh day post-surgery, the serum was draining by itself via a small midventral opening through the skin incision. The pressure pack was discontinued, but penicillin-streptomycin ointment was applied along the line of the incision. The sutures were removed two days later and the penicillin-streptomycin ointment was continued for four days. On the eleventh day after surgery the serum had stopped oozing and the incision was holding nicely. The dog was discharged with no appreciable after affects.

* Armour

Dale Schnepf '61

6

*Ventriculocordectomy In A Siamese Cat.

It is not infrequent that clients complain to their veterinarian about the persistent loud caterwauling of