Perineal Hernia in a Dog

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of the rectum were brought into apposition by a continuous suture of No. 12 black silk.

No treatment was attempted with the recto-vaginal fistula as its location made the operation impractical. The calf was dismissed from the clinic and the owner was advised to veal the animal rather than to take the chance of her ever becoming a successful breeder.

—D. W. Rawson, '43

Perineal Hernia in a Dog. A nine-year-old male dog of mixed Boston Terrier ancestry was admitted to the Stange Memorial Clinic on Oct. 14, 1942. The history presented was that the dog had had a swelling in the anal region for some time.

Upon examination, a perineal hernia was discovered on the left side. The diagnosis was made by digital palpation of the external surface as well as by rectal examination. The hernial sac was easily explored and the contents of the sac, a section of feces-filled rectum, could be reduced into the pelvic cavity. The examination also revealed the dog to be suffering from ancylostomiasis as well as having very heavy deposits of tartar on his teeth.

The owner desired surgical treatment of the hernia so the dog was prepared for surgery. The skin over and around the enlargement was shaved and the area was cleaned with soap and ether. Tincture of iodine was applied as a skin disinfectant. The patient previously having been given morphine, \( \frac{1}{2} \) gr., and atropine, 1/100 gr., as a basal narcotic, anesthesia was completed by the intravenous injection of 4 cc. of nembutal into the cephalic vein. The patient was placed on its abdomen upon the operating table. The rectum was cleaned of fecal material by digital manipulation, and packed with cotton to prevent fecal discharge during the operation.

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ANY DERANGEMENT OF DIGESTIVE FUNCTION IN LARGE ANIMALS, CHARACTERIZED BY THE VARIOUS SYMPTOMS OF COLIC OR DEPRESSION IS AN INDICATION FOR THE USE OF

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rried to Miss Maxine Shaker of Eau Claire, Wis., at Albert Lea, Minn., November 14.

Joseph Quigley, winter '43, and Miss Eileen Lomasney of Ely, Minn., were married at Ely on August 27.

The marriage of Clarence Dykstra, winter '43, and Miss Bernice De Jongh took place September 17.

Mason Vegors, fall '43, and Miss Wilma McEiven of Hutchinson, Minn., were married at Hutchinson, August 23.

Another marriage was that of Robert Irvine, winter '43, to Miss Betty Lamb of Carlisle, Iowa, at Des Moines, on October 25.

Robert Banks, winter '43, was married to Miss Analee McCormick of Olin, Iowa, at Des Moines on September 20.

Births

Mr. and Mrs. Brad Crundwell, winter '43, are the parents of a daughter, Carol Ann, born September 19.

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A three inch incision was made dorso-ventrally through the skin and subcutis over the area of the enlargement, exposing the peritoneal pouch. The hernial ring consisted of a two inch dorso-ventral rent in the recto-vesical peritoneal pouch. This pouch forms the lateral and posterior borders of the pelvic cavity, and is made up of peritoneum and a small amount of fascia. The hernia was reduced through the ring into the pelvic cavity. After reduction of the hernia, the ring was sutured with No. 1 chromic catgut. Interrupted sutures were used. The edges of the skin incision were then brought into apposition by interrupted catgut sutures. Blood was cleaned from the skin incision and collodion applied over the incision. This was done to prevent post-operative infection.

The recovery of the patient was uneventful except for a temperature rise to 104°F. on the fourth and fifth days after the operation. On the second day following the operation, the bottom silk suture was removed from the wound to provide drainage. The remaining silk sutures were removed on the seventh day following surgery. At this time the small surgical tract was being filled with granulation tissue, and only a small, slightly discharging ulcer remained. During the period of convalescence, the patient was given liberal doses of mineral oil to eliminate straining during defecation. Since the dog was quite old, six tablets of brewer's yeast were given per orum on the ninth day following the operation to prevent breakdown. The dose was then repeated daily until discharge. When discharged on Oct. 28, 1942, the hernia was apparently completely repaired.

Perineal hernia in the dog is of relatively common occurrence. The exact etiology of the condition is unknown. Varied conditions seem predisposing. Old male dogs that are under-exercised are most frequently affected. Straining because of prostatitis or constipation often seems associated with the hernia. Frequently, trick dogs that are required to walk on their hind legs are affected. Finally, traumatic injuries can be a cause. At the present time there is no evidence that susceptibility to the condition is a genetic factor, nor has any specific breed susceptibility been noted. Bilateral cases are quite rare but do occur. In some cases, the urinary bladder, prostate gland, and intestine all make up the hernial contents.

—R. A. Fister, '43

RESEARCH

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present time, with the world at war, the responsibilities of veterinary research are many times magnified. In the necessary rehabilitation and advancement of science after the war, they will be even more important. Support of the Research Council will do much to aid in solving these problems.