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Chronic Prolapse of the Vagina.

On June 28, 1946, a 3-year-old Hereford cow was admitted to Stange Memorial Clinic with the history of a tumor protruding from the vagina.

The cow was examined and a diagnosis was made of chronic prolapse of the vagina and a chronic cervicitis. The prolapsed portion was found to be an outpouching of the right vaginal wall about 6 inches inside the vulvar opening. The everted area was oval shaped, 6 inches wide and 3 inches deep, it protruded from the vulvar lips about 2.5 inches.

For the next few days, the prolapsed portion of the vagina was kept clean by washing it with 5 per cent boric acid solution. It was noticed that it was everted only after the cow had been lying down or straining severely. Once each day the vagina was irrigated with a 3 per cent alum solution and at every opportunity the vagina was replaced. At the end of 2 weeks the cow was showing no improvement so it was decided to operate the following day. At this time the cow was restrained on the operating table. The area around the vulva for approximately 6 inches was shaved, washed, defatted with ether, and tincture of iodine was applied. The anesthesia was manifested by the epidural injection of 25 cc. of 2 per cent procaine hydrochloride. Complete anesthesia of the area was obtained. A vertical 3 inch incision was made paralleling the vagina about 1 inch to the right of the vulva. The incision was deepened into the subcutaneous tissue until the opening was approximately 6 inches anterior. With the aid of tumor forceps and scalpel the adipose tissue surrounding the vagina on the right side was bluntly dissected away and withdrawn. The everted portion of the vagina was then replaced by introducing the hand into the vagina. The cavity of the incision was then packed with sterile gauze and the incision was sutured with surgical tape, using a Stewart stitch. The vulva and posterior part of the vagina were packed with gauze and the vulvar lips were sutured loosely with 3 interrupted surgical tape sutures.

It was hoped that the surgery would be followed by adhesions between the external vaginal wall and the lateral pelvic wall with sufficient granulation tissue proliferating to fill the cavity caused by the fat removal.

The day following the operation, the sutures in the vulva were removed and the gauze pack withdrawn. The cow strained violently at this time but the vagina did not evert. The next day the sutures from the incision were removed.

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and the pack extracted. A sterile sulfon-nilamide pack was replaced in the wound and bipp paste applied to the incision. Two more packs were inserted at 2-day intervals. The purpose of the packs at this point was to prevent rapid healing and allow time for adhesions to form. On the eighth day the last pack was removed and the outside of the wound was cleaned with mercury bichloride solution 1:2000. Bipp paste was applied to the external opening. The treatment for the next 10 days consisted simply of applying bipp paste to the incision.

On the seventeenth day following the operation the cow was examined. The incision was completely healed and the vagina had not been everted since the operation. The cow was then discharged.

—Richard T. Howard, '47

2 Deformity of Hoof Following Injury of the Coronary Band. An aged Belgian horse was admitted to Stange Memorial Clinic. The owner explained that the horse’s hoof had been cut by a wire several months before. Examination revealed that the cut had penetrated the coronary band. At the time the animal was admitted the hoof was growing in 2 separate parts divided at the point of injury and exuberant granulations were forming in the cleft between the 2 parts of the hoof.

The small snag of hoof was removed along with the exuberant granulations in the area. The owner was instructed to keep the hoof dry and well trimmed. Wound powder was dispensed to apply on the area to control excessive granulations. The animal was then discharged.

Several months later the owner reported that the animal was being used daily and was a satisfactory work animal.

—R. T. Howard, '47

3 Chronic Gonitis. A 2-year-old Belgian colt entered Stange Memorial Clinic for examination. The owner explained the colt had been running on pasture and was found lame. How long it had been lame was not known.

When the colt was examined, it was found to have a mild swinging and supporting lameness which became worse on exercise. A pouching of the stifle joint capsule was evident. The straightening of the leg with the body weight resting on the toe so that the sole surface of the foot is visible from the rear was typical and should be noted as it is a valuable aid in correct diagnosis.

This case was given a very guarded prognosis, as chronic gonitis seldom recovers. The colt was treated by draining the stifle joint with a sterile hypodermic