Non-Congenital Atresia Recti

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in. incision was made down to the bone. A bone chisel and mallet were employed to enter the medullary cavity. The exposed portion of the medullary cavity was then infiltrated with 15 cc. of procaine hydrochloride by using a 2 in., 16 gauge needle. This type of anesthesia was used because of the failure that is too often associated with the mandibular foramen nerve block. The involved tooth was repelled with the use of a flat punch. A dental pack was then applied to the cavity. The aftercare consisted of removing this dental pack every 2 days and flushing the cavity with warm potassium permanganate 1:3,000. This was continued until the opening was practically closed.

The tooth that was repelled was split and upon examination it was found that there was a failure of the central island of dentine to completely close. However, the resulting opening could not be detected upon gross examination of the table surface. This opening was large enough to permit a piece of straw to be forced down into the tooth. It can be assumed that this straw carried with it enough pathogenic organisms to result in the periostitis.

When the surgical wound had completely healed the horse was ordered home and the owner was advised to rest the horse for a few days and then begin the training period by using a hackamore. After the animal is trained this way for several weeks a soft rubber or chrome bit may be tried. If the horse still continues to be bit shy he is to be returned to have the right, first, lower cheek tooth repelled.

At this writing, no additional information can be given. However, if anything of significance does develop, it will be included in a subsequent issue of this publication.

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Non-Congenital Atresia Recti

On Feb. 11, 1947 a Spotted Poland China pig, age 4 months, was admitted to Stange Memorial Clinic.

Upon admission the pig was suffering from an acute bloat. His abdomen was greatly distended and firm. He had begun to bloat, according to the owner, about 3 days previously. His condition had not improved and he was getting visibly worse.

An operation for a prolapsed rectum had been performed on the pig about 4 weeks previously by a local veterinarian. The animal had appeared to recover from the operation. However, upon examination it was found that scar tissue had formed in the rectum. This tissue had formed so completely that a stricture developed resulting in a complete occlusion of the rectum.

No treatment was attempted and on Feb. 12 the animal was destroyed by electrocution. Necropsy revealed an occlusion of the rectum due to a stricture about 6 to 8 centimeters inside of the anus. A sharply circumscribed fibrinous proctitis suggestive of necrophorous infection was found. However, no cultures or smears were made of the inflamed

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Fig. 1—Acute bloat in Spotted Poland China pig, caused by atresia recti.
areas. The small intestine was entirely devoid of ingested material; but the large intestine and colon, up to the stricture, were greatly distended by the accumulated intestinal contents.

It was thought the scar tissue formed in the rectum as a result of the operation performed earlier. Perhaps a necrotic enteritis became established at that area, and this infection provided the stimulation for the proliferation of connective tissue which finally resulted in a complete stricture of the rectum.

—A. Neumann, '49

Aberrant Lymph-Duct System

Chauveau describes the thoracic duct as a highly variable structure. Additional support for this statement was found recently during routine dissection in the veterinary anatomy laboratory of Iowa State College. A stallion was found to have an aberrant lymph-duct system of the thoracic cavity.

The thoracic duct made its entrance into the thoracic cavity and coursed anteriorly as described by Sisson, "on the right of the median plane, between the vena azygos and the aorta, covered by pleura."

At the region of the 6th intercostal space it turned medially and entered into a large ampullated portion. The latter also received a short twig from the left side whose origin was 3 intercostal spaces posteriorly.

Anterior to the ampullated portion, 3 well-developed branches continued, one on the left which followed the course described by Sisson as that of the thoracic duct and entered the jugular-vena caval junction. The other branch took a similar course forward on the right side and entered the jugular-vena caval junction on the right as would be common for the right lymphatic duct.

John J. Edenburn, V.M. 1

Improving DDT

Latest experiments with de-fleaing have included use of a commercial insecticide, Pestroy, containing 10 per cent DDT and pyrethrum activated by piperonyl cyclohexene. One hour after treatment, not a single flea was found on 10 long-haired infested dogs. Even after 2 weeks of association with flea-ridden dogs, only 1 of the treated dogs was found to have any fleas, and then only a few. Experimenters suggest occasional applications of the same powder in kennels, on rugs, and furniture to keep these areas entirely free of fleas.

Heart Muscle Grafting

Dead parts of the heart muscles of dogs have been successfully replaced with grafts of fresh, living striated, voluntary muscle from other parts of the body, Dr. Mandel Weinstein and Benjamin Shafiroff of the New York University College of Medicine, report in Science. They grafted strips of muscle from the abdomen and legs onto the heart muscles. Within 2 or 3 days after the operation, the dogs were up and about their kennels, and later were exercised daily with no signs of heart trouble.

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