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Separation of the Symphysis Mandibulae

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kick both of its elbows but would stagger and fall in the attempt. When down a muscle twiching was noted in the front limbs. A rolling inward of the eyeballs was noted as well as several subcutaneous lumps on the left side of the head. A blood picture was as follows:

R.B.C. ........................................... 8,550,000
W.B.C. ............................................ 28,400
Stabs ................................ ...... 5,800
Segments ................... ... ...... .... 16,400
Lymphocytes .... ........... ......... 6,200

On the second day the animal showed the same symptoms together with exspiratory dyspnea. Finally she could not stand at all although kicking movements at the left elbow could be initiated if a spot about 12 in. posterior to the point of the elbow on the thorax was rubbed.

The patient expired on May 9, and necropsy revealed the following lesions: (1) Abscessation at the base of the brain involving the medulla and pons, (2) Impaction of the omasum and acute catarhal enteritis, (3) Lungs were 30 per cent atelectatic from a former bronchitis, (4) Six chronic abscesses in the subcutis on the left side of the head, (5) An 11 cm. embryo indicating about a 2½ months pregnancy. The frontal sinus showed no gross infection although the patient had been recently dehorned.

The nervous symptoms noted and cause of death were probably due to the abscessation eventually spreading to the base of the brain. The etiology of the abscessation was not determined.

Russell H. Anthony '53

Suppurative Pododermatitis. On July 17, 1951 a one-year-old Guernsey heifer was admitted to the Stange Memorial Clinic. She was lame on the left front leg. Further examination of the affected leg revealed a fistulous opening on the lateral side of the claw just above the hoof. The owner suspected a foreign body, possibly a piece of glass, to be the causative factor.

An x-ray picture was taken. No marked evidence of suppurative arthritis could be seen, nor did any foreign objects show up in the picture. The foot was cleaned and a phenol-formalin pack 0.18 per cent phenol, 0.12 per cent formalin) was put on the foot. On July 20, the patient was placed on the operating table, in a right lateral recumbency, for an examination. The condition of the claw was worse and it was deemed necessary to amputate. The left front leg was clipped, shaved, scrubbed and painted with a tincture of iodine. Two per cent procaine hydrochloride was infiltrated into the area of the second phalanx. The left claw was amputated through the middle of the second phalanx and a tourniquet was applied. A sterile pack with sulfathiazole powder was put on the wound and the leg was bandaged before returning the heifer to her stall. The tourniquet was removed one half hour later.

Two days after the operation, the pack and bandage were removed. The wound was clean and appeared to be healing properly. A sulfonamide-urea-lactose powder (10 percent sulfanilamide, 5 percent sulfathiazole, 20 percent urea, 65 percent lactose) was applied to the wound and the leg was bandaged again. The next day, the wound was irrigated with KMnO4 1:3000. Sulfonamide-urea-lactose powder was again applied and the leg bandaged. By July 31, the heifer was beginning to use the left foot quite well and she moved about freely.

On August 6, the wound was irrigated with KMnO4 1:3000 and sulfanilamide powder applied. The wound was healing by granulation and the epithelium was growing toward the center of the wound from all edges. A durable bandage was placed on the foot and the heifer was discharged from the clinic.

Robert E. Gamble '53

Separation of the Symphysis Mandibulae. A mixed Collie, one-year-old, was admitted to the Stange Memorial Clinic on July 12, 1951. Early diagnosis supposed a broken jaw. The dog was placed on the operating table in left
lateral recumbency. Sixteen gr. of Sodium Pentobarbital were given intravenously. The mandible was examined and a fracture of the symphysis was found.

It was decided to wire the two halves of the mandible together by drilling a hole in the right and left mandible—behind the respective first premolars, and inserting a stainless steel wire. The stainless steel wire was inserted from medial to lateral, through the left hole. The long end of the wire on the medial side, was brought up and over the left canine tooth, down and across in front of the incisors to the right hole. The wire was inserted through the hole from lateral to medial and brought up, over and behind the right canine, continuing down across in front of the incisors to the short end. These two ends were pulled tightly and twisted. Another wire was inserted in both holes, brought together in back of the incisor teeth where the two ends were pulled together and twisted. The twisted portion was cut and bent down to prevent laceration of the tongue.

Another hole was drilled through the mandible from right to left at right angles to the symphysis, just anterior to the canine teeth. A Steinmann pin was driven into this hole and the right end clipped off. The pin was then driven into the mandible. The opposite end was clipped off so that the end was flush with the gums.

Soreness was noted in the area for several days, however the dog ate well and was in good spirits. Recovery was uneventful.

E. M. Freeman '52

Fracture with Sequestrum. On July 10, 1951 a 9-month-old Guernsey heifer was admitted to Stange Memorial Clinic with a bony growth located on the left mandible.

An x-ray taken on July 13 revealed the bony growth to be a bone fracture with sequestration.

On July 20, the patient was restrained, the swollen area of the mandible was shaved, washed, and disinfected with 7 percent tincture of iodine. A 2 percent procaine hydrochloride solution was injected into the area for local anesthesia. The swelling was then incised and the sequestrum was removed. The wound was packed with sulfathiazole powder and a sterile guaze pack. The wound edges were closed with a continuous nylon suture.

The day following surgery, the patient seemed quite alert. Several loops of suture were taken out and the pack was removed. A new pack containing equal parts of strong tincture of iodine and glycerine was placed in the wound.

On July 22, the pack was again removed and was replaced with a fresh pack of iodine and glycerine. The pack was removed on July 23.

On July 24, Corynebacterium pyogenes was found to have been the infective agent present in the bony tissue of the jaw.

No medication was administered for a number of days and the wound was healing nicely, although an enlargement of the mandible remained. Fly repellant was applied about the area of incision on July 29.

The patient was discharged Aug. 2 with healing progressing nicely, although the swelling persisted.

Robert Boyce '53

A Clinical Diagnosis of Diabetes Mellitus in a Dog. A four-year-old female dog of mixed breeding was presented at the clinic on Jan. 15, 1951 with a history of having been irregularly off feed for about a month. She was also listless and seemed to be constipated.

The patient was emaciated and somewhat depressed, but pulse, respiration, and temperature were within normal limits. A slight conjunctivitis was evidenced by the dried exudate in the canthi of the eyes.

A chronic obstruction of the intestinal tract was suspected, but palpation over the peritoneal region did not confirm the suspicion. A radiologic study of the gastrointestinal tract was made but proved to be negative for foreign bodies.