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Carotid Artery Laceration

John M. Terry, D.V.M.*

Complications or hazards involving intravenous drug administration via the jugular vein in the equine are well known. The most common problems would involve perivascular injection, intra-carotid injection, too rapid administration, sensitivity to the drug(s) used, and use of drugs incompatible with the intravenous route. In this case report, I would add carotid artery laceration to the list.

A 60 cc. plastic syringe with a 16 gauge 1 inch needle attached was being used to administer an intravenous injection in a very flighty yearling Quarterhorse filly. Just as blood was being aspirated into the syringe after entering the vein, the filly startled, breaking away from the groom. Within a minute's time, the filly was caught and a firm hematoma, 1 1/2 inch diameter, was present at the injection site. The groom was instructed to apply pressure over the area with a towel and I would return in a few minutes to finish treatment. Not more than 3-4 minutes later, the filly was becoming excited, dyspneic, and her color cyanotic.

An area approximately 12 inches long, extending from jugular furrow to jugular furrow was swollen to the point of the overlying skin being stretched extremely taut. As the excitement, dyspnea and cyanosis was increasing by the minute and it appeared the swelling was choking the filly, I made a midventral incision over the tightest area. The skin separated back 4-5 inches from the point of incision. The dyspnea and cyanosis was temporarily relieved, but within another 3-4 minutes was just as before. At this time, a Dyson tracheotomy tube was inserted resulting in a 50 per cent improvement. A second tracheotomy tube was installed when it appeared that one wasn't sufficient, and oxygen was administered at 4-6 liters per minute via a tube in one of the tracheostomies. It was approximately 2 hours until the filly had normal color and was relaxed. At this time she was given a penicillin-streptomycin antibiotic combination I.M. and tetanus protection along with topical wound treatment.

The next day, the filly appeared normal with the exception of the rather gruesome wound and swelling on the neck. Antibiotics were continued for seven days and the wound allowed to granulate in with topical treatment. Healing was uneventful and three months later the only apparent residual affect was a small skin scar. The filly was sold at this time so I have not been able to follow her progress.

I had previously not seen this complication of intravenous treatment and have not found anyone else thus far who has had this experience. The rapid onset and severity of signs demanded quick action. The course of treatment I undertook seemed logical at the time and resulted in success in this case.

Turkey Breeders

High correlation coefficients between body weight and various ages suggests that selection for turkey breeder candidates could be early in the growth period. These were the findings of a recent Texas Agricultural Experiment Station study. The correlation between body weight at two-week intervals and 18-week body weight increased with increasing weight of the bird. According to these data, selection for 18-week body weight could be made very early in the growth period in either sex with considerable accuracy. Selecting birds at 12 weeks, as opposed to 18 weeks of age, reduced labor requirements due to handling birds 35 to 40 percent. Also stress on birds at this age is less and mortality from handling the birds is less costly. (Source: T. M. Ferguson and K. K. Krueger, Texas Experiment Station, Texas A&M, College Station, Texas.)

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