

# Surgical Management of irreparable tail injury in a Lioness

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Tail injuries are most commonly observed in wild animals due to biting by the fellow mates (Sarma et al., 1992). Many a times these may go unnoticed or not properly attended. In unattended cases gangrene may set in and it may lead to septicemia and death. Examination, diagnosis, treatment and follow-up especially in wild animals requires immobilization. An irreparable injury of tail in a lioness and its surgical management is discussed in this paper.

## Case Report

A lioness with an irreparable injury of tail was brought to the Department of Veterinary Surgery and Radiology, College of Veterinary Science, Tirupati by the zoo authorities from Sri Venkateswara Zoological Park, Tirupati. She was bitten by her fellow mates and there was continuous bleeding with visible fracture of coccygeal vertebrae (Fig.1) which needed immediate surgical intervention.

## Treatment

The animal was premedicated with xylazine hydrochloride @ 1.0 mg/kg bwt and dissociation was induced with ketamine hydrochloride @10.0 mg/kg bwt intramuscularly. The tail above the affected part was prepared for aseptic surgery and tourniquet was applied near the base of tail. Two 'U' shaped incisions (Oehme and Prier, 1976 and Slatter, 1993) were placed one on the dorsal aspect and other on the ventral aspect of the tail. Inter vertebral space was palpated proximal to the skin incision. Skin and muscles were reflected up to this part and was disarticulated. The tourniquet was relaxed momentarily and bleeding vessels were identified and ligated with catgut no.1, followed by suturing of muscles with skin with simple interrupted suture. A Tincture benzoin seal was applied to the suture end and the wound was bandaged with gauze. After completion of the procedure anaesthesia was reversed with yohimbine hydrochloride @ 0.1 mg/kg bwt intravenously. Yohimbine hydrochloride antagonized the xylazine portion of ketamine–xylazine anaesthesia thereby hastened recovery within 10 minutes without any complications. Course of antibiotics (Inj. Ceftriaxone sodium @ 20.0 mg/kg bwt) and NSAIDs (Inj. Meloxicam @ 0.50 mg/kg bwt) were given intramuscularly for seven days. The wound was dressed with povidone iodine solution on alternate days. On 10<sup>th</sup> day post surgery the skin sutures were removed and animal was recovered uneventfully (Fig.2).

## Conclusion

Surgical intervention and the course of broad spectrum antibiotics could be suggested for the management of irreparable tail injuries to prevent gangrene formation and septicemia.

## References

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Figure 1. Irreparable injury tail-Lioness



Figure 2. Lioness - after surgery

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