

## Surgical Management of Oesophageal Obstruction in a Goat

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### Abstract

A goat was presented with history of anorexia, regurgitation of feed and water, salivation, swelling on left side of oesophagus. Oesophagotomy was performed and foreign body was successfully removed.

**Keywords:** Choke; goat; oesophagotomy.

### Introduction

Accordingly to several authors oesophageal obstruction *i.e.* choke is common in cattle and buffalo, but occasionally reported in goats (Sanker *et al.*, 2010, Tejpal *et al.*, 2016). This report focuses on oesophageal obstruction in goat due to foreign body in oesophagus.

### History and Diagnosis

A four and half year old Non-descript female goat was presented with history of anorexia, regurgitation of feed and water, salivation, swelling on left side of oesophagus and tympany.

Based upon history and clinical symptoms, the case was diagnosed as oesophageal obstruction due to foreign body.

### Treatment

The animal was secured on left lateral recumbancy. The surgical site was aseptically prepared (Fig.1). Local anaesthetic *i.e.* 2% Lignocaine hydrochloride was infiltrated over the swelling. Muscles were separated and oesophagus was exposed. Incision was made on the bulged oesophagus. The foreign body which was a leather piece was removed (Fig. 2 and 3). The oesophagus was washed with normal saline. The mucus membrane was sutured with chromic catgut 0/2 using simple interrupted suture pattern. Sub mucosa and muscles were sutured with chromic catgut using simple interrupted sutures. The

skin was sutured by routine manner using nylon (Fig. 4). In post-operative regime, the goat was maintained on Dextrose Normal Saline (DNS) and Ringer's Lactate (RL) intravenously for five days, during this period the feeding was completely stopped. Inj. Streptopenicillin 500mg and inj. Meloxicam (Melonex<sup>a</sup>) @ 0.3 mg/kg b. wt. for five days was given intramuscularly. Skin sutures were removed on twelfth post-operative day. The recovery was uneventful.



Fig. 1: Swelling over oesophagus



Fig. 2: Foreign body removed from oesophagus

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## Oesophageal obstruction in goat

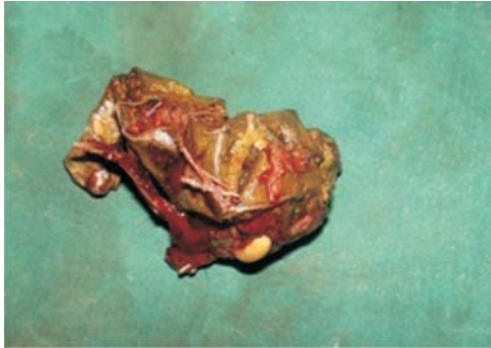


Fig. 3: Retrieved leather piece



Fig. 4: Animal post-operatively in standing position

### Discussion

Intra-luminal oesophageal obstruction may occur due to vegetables, phytobezoars (Tyagi and Singh, 1999), pieces of leather or rubber (Salunke *et al.*, 2003), coconut (Madhava Rao *et al.*, 2009), impaction of pelleted ration (Anderson *et al.*, 2010), palm kernels (Hari Krishna, 2011), mango (Vishwanatha *et al.*, 2012), ingestion of cloth or rexin material in buffalo (Sivaprakash, 2003) and trichobezoars (Radostits *et al.*, 1994). Oesophageal obstruction *i.e.* choke is rare in goats because they are selective feeders (Sanker *et al.*, 2010). Scarcity of fodder and drought conditions, forced animals to eat the foreign bodies. Diagnosis of oesophageal obstruction was done by palpation as per Gangwar *et al.* (2013).

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