



FORTH STAGE 2021 LECTURE NO (10)

Cesarean Section العملية القيصرية

Cesarean section: The process of fetal birth and extraction by opening the wall of the abdomen and uterus (Laprohistrotomy), performed at or near the time of natural birth or in other special cases.

The cesarean section was named according to Julius Caesar, who was born by Caesarean section in 1839, but the excavations indicated that the Caesarean section had been performed by the olden Babylonians to save the mother's life.

Indications:

- 1. Fetal oversize.
- 2. Failure of cervix to dilation.
- 3. Fetal anomalies.
- 4. Sever uterine torsion.
- 5. Insufficient of P.P.P. (fetus is alive).
- 6. Fractures in pelvic bones of the dam.
- 7. Abdominal hernia.
- 8. Hydro-allantois.
- 9. Ketosis and pregnancy toxemia.

Contraindications:

- 1. Fetal emphysematous.
- 2. Fetal maceration.
- 3. Hopeless cases.

Procedure:

- 1. Control and fix the animal according to its type.
- 2. Prepare the operation site (shave, clean and sterilize)

3. Site of operation:

- A. Ruminants (Left flank):
- ➤ The presence of the rumen on the left side prevents the appearance of the intestine in the opposite of the surgeon, but oncoming to the uterus may be distant unlike the right side
- ➤ The muscle layers are few
- > The operation can be performed by standing position.
- > There is little blood supply in this area so there is little bleeding.
- ➢ Hernia incidence is low.
- B. Mares (Right flank):
 - The presence of cecum on the right side prevents the appearance of the intestine in the opposite of the surgeon.
- C. Small animals (Lina Alba).

Anesthesia:

- 1. Ruminants: (Local anesthesia):
 - (liner infiltration) 1 cc/ cm. Lidocaine
 - Epidural anesthesia
- 2. Small animals: (general anesthesia).

Layers that open:

- Skin, subcutaneous tissue, external oblique abdominal muscle, transverse muscle, internal oblique abdominal muscle.
- When opening, avoid cutting off the milk vein that is above the udder and lengthening the abdomen.

- The length of the incision depends on the experience of the surgeon, the type of animal, and the size of the fetus (10 cm or more).
- The uterine incision must be formed between caruncles to avoid bleeding, and the incision should be fitting for the size of the fetus to avoid tears of the uterus during the removal of the fetus.
- Remove the fetus gently and then remove the placenta as much as possible and put intrauterine suppositories before suturing to avoid infection.
- ✤ Correct the uterus if it is torsion.

Suturing:

- \checkmark The uterus:
 - First layer: Schmiden or Conil (catgut suture).
 - Second layer: Cushing or lambert (catgut suture).
- ✓ The peritonea and muscles: simple continuous (catgut suture).
- ✓ Skin: simple interrupted or blanket (silk or nylon suture).

Post-operative care:

- 1. Keep the animal in a clean and healthy place.
- 2. Systemic antibiotics, antipyretics, antihistamines, and analgesics daily for 7-10 days.
- 3. Oxytocin hormone accelerates uterine involution.
- 4. Local antibiotics for the wound.
- 5. Feed the animal on soft feed and avoid giving it heavily concentrated feed.
- 6. Prevent the animal from stress and long distances.
- 7. Removal of the sutures after 10 days.

Complications:

- 1. Adhesions.
- 2. Abdominal hernia.
- 3. Post-operative bleeding.
- 4. Post-operative paralysis.
- 5. Retained placenta and metritis.
- 6. Infertility and sterility.
- 7. Shock and death of animals.