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Short Note

Surgical removal of lingual foreign body in a buffalo - a clinical case study

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Abstract

This report pertains to a successful surgical removal of a sewing needle that was ingested by an eight years old buffalo. The animal was not able to ingest anything after the needle ingested. The radiographic examination on lateral and dorsal-ventral views revealed the presence of the needle in the sub mandibular area. After preparing the animal for operation, the genioglossus muscle was incised. The foreign body was reached which was too sharp and move along with movement of tongue. A flat instrument was put in the oral cavity to stabilise the tongue. The foreign body was then removed with help of long artery forceps. Antiseptic dressing with ointment Neosporin and topicure spray locally was advised till the complete healing of the wound. Retrieval of the needle seems easy but it was still difficult as it was embedded in genioglossus muscle and was moving along with the movement of tongue.

Key words: Buffalo, foreign body, radiographic examination, genioglossus muscle, surgical retrieval

Cattle commonly ingest foreign objects, because they do not discriminate against metal materials in feed and do not completely masticate feed before swallowing. Consequently foreign bodies struck in reticulum. They may cause diaphragmatic hernia (Krishnamurthy *et al*. 1985) and foreign body syndrome in bovines (Kohli *et al*. 1982). But oral foreign bodies are rarely found and if so they are commonly found in Esophagus. The present case pertaining to a buffalo which ingested a sewing needle that was embedded in genioglossus muscle and was moving along with the movement of tongue.

An 8 year old buffalo was presented with the history of eating sewing needle a day earlier. Since then the animal was not able to ingest anything. The radiographic examination on lateral and dorsal-ventral views (Plate A and B) revealed the presence of linear foreign body in the sub mandibular area. Surgical removal of the foreign body was planned. Preoperatively the animal was given injection xylazine 20 mg I/M along with injection meloxicam 0.2 mg/kg Body Weight I/M and injection dicrysticine 2.5 g I/M [Streptomycin Sulphate: 2.5 g, Procaine Penicillin G: 15,00,000 units, Penicillin G Sodium: 5,00,000 units].

The animal was restrained in lateral recumbency on a padded large animal operation table. The site was prepared for surgery by shaving the submandibular and mandibular area and scrubbing was done with antiseptic solution containing cetrimide. Then local anaesthetic (lignocaine HCL 2%) was infiltrated (20 ml) within the skin and muscles around the foreign body. Thereafter, the incision was made on mid-ventral aspect of submandibular area. Digital palpation of area did not revealed any sharp foreign body. The genioglossus muscle was incised and the foreign body was reached which is to sharp and move along with movement of tongue. Afterwards a flat instrument was put in the oral cavity to stabilise the tongue. The foreign body was then removed with help of long artery forceps. The muscles were sutured with polyglactin 910 (No. 2-0) in simple continuous pattern. The skin was sutured with polypropylene (No. 1-0)

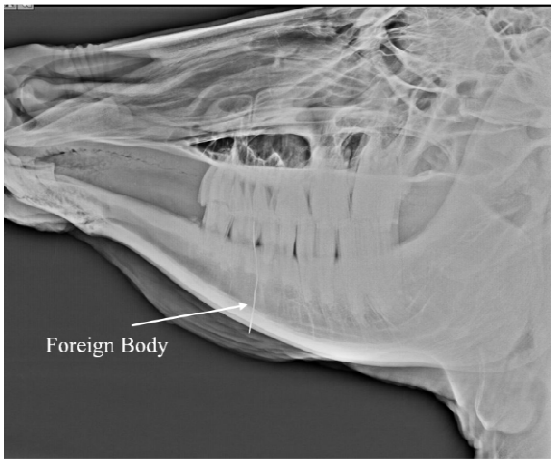

Plate A. Linear Foreign Body in lateral Radiograph

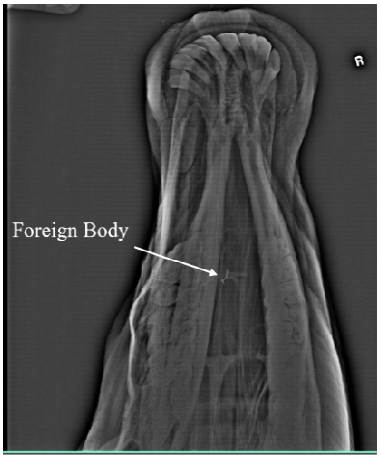

Plate B. Linear Foreign Body in dorso-ventral Radiograph

in horizontal mattress pattern. Postoperatively, the buffalo was given injection dicrysticine 2.5 g I/M bid and meloxicam 0.2 mg/kg Body Weight I/M bid, belamyl 10 ml I/M sid [Thiamine hydrochloride: 10 mg, Riboflavin: 3 mg, Niacinamide: 100 mg, Vitamin B 12: 10 mcg, Liver injection crude: 0.66 ml (having Vitamin B 12 activity equivalent to 2 mcg of Cynocobalamin per ml), Phenol: 0.5%] for 5 days. Antiseptic dressing with ointment Neosporin and topicure spray locally was advised till complete healing of the wound.

Retrieval of oral foreign body (sewing needle) in present case, seems easy to perform but it was still difficult as it was embedded in genioglossus muscle and was moving along with the movement of tongue and its retrieval was not possible till the tongue was stabilised by some flat surgical instrument.

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