

'COCONUT' ABSCESS IN A BUFFALO

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A 7-years old Nili-Ravi buffalo in her 3rd lactation was brought to the outdoor clinics of Department of Clinical Medicine and Surgery, University of Agriculture, Faisalabad, for the treatment of a massive swelling at the base of left ear. Clinical examination revealed a coconut-shaped hard hanging mass attached to the posterior aspect of the left aural base (Plate 1). Anamnesis indicated that the mass had been steadily growing for the last four years. The mass was painless, pendulous; had a definite neck (5 x 10 cm) and body (20 cm circumference) (Plate 2). The upper third of the body of the mass had a doughy consistency whereas the rest of the body was covered with long superficial dry fissures traversing along its long axis. The vital parameters (temperature, pulse and respiration) of health were within normal ranges for buffalo (Cockrill, 1974). Feed intake and milk yield had remained unaffected ever since the mass was noted. Exploratory puncture with a sterile 16 gauge (2.5 cm long) revealed thick tapioca-like granular pus in the centre of the mass. As such, a diagnosis of chronic abscess was arrived at. Culturing of the pus on the blood agar containing 5% sheep erythrocyte revealed multiple β -haemolytic colonies of *Staphylococcus aureus* in pure culture.

Surgical Treatment and Response

The animal was sedated by intramuscular injection of 5 ml Sedastress (Acepromazine 10 mg/ml). The cord-like base of the mass was prepared aseptically for surgical management. The base of the neck was anaesthetized by infiltrating xylocaine hydrochloride 2% around it. The incision was made at its base to expose the cord-like root containing blood supply which was ligated with chromic catgut No. 1 and was excised followed by closure of one inch long incision with braided surgical silk No. 2. The mass weighed 3 Kg. Sawing the mass revealed thick fibrous capsule encircling a small amount of thick granular non-ordourous light brown pus of the texture of cream of wheat. Injection Combiotic 5 g (Strepto-pencillin) IM daily for 4 days was given as post-operative measure. Wound was dressed aseptically with Tr. Iodine until its complete healing followed by removal

of stitches on day 10 post-operatively. The recovery was uneventful.



Plate 1: A coconut abscess at the posterior aspect of the left aural base

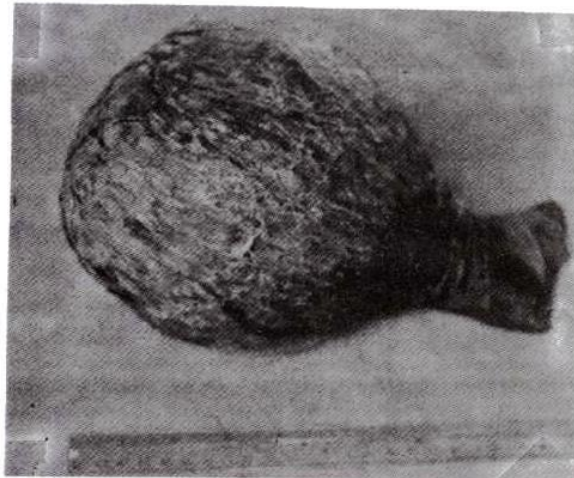


Plate 2: Close up snap of the abscess taken after excision.

REFERENCE

- Cockrill, W.R., 1974. The Health and Husbandry of Buffalo. FAO, Rome, Italy.