TRAUMATIC ORCHITIS IN A KID - A CASE REPORT

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ABSTRACT

Orchitis is inflammation of the testicular tissue occurring in all species. The factors involved in its etiology may be either traumatic or infectious. A case of traumatic orchitis in a kid is reported.

Key words: Traumatic orchitis, Kid

CASE HISTORY AND OBSERVATION

A 6 months old male kid with reduced feed intake, abducted hind legs, difficulty in walking and painful swelling of the scrotum was brought to Veterinary University Peripheral Hospital for treatment. History revealed that the kid had met a vehicular accident a week before and it led to a tear on the scrotum. The owner was treating the animal himself, but could not get any response for first four days. The clinical examination of kid revealed elevated body temperature and pulse rate. Both the testicles were hard, painful to touch and swollen with a scrotal circumference measuring about eight inches (Fig. 1). A scar tissue on the scrotum, stiff gait and reluctance to walk were observed. Fine needle aspiration biopsy of both the swollen testicles was done. The aspirated material was greenish - yellowish in colour and thick in consistency and on culture the fluid was found to be infected with *Staphylococcus sp.* The antibiotic assay revealed gentamicin to be sensitive to *Staphylococcus sp.*

TREATMENT

The kid was administered gentamicin [4mg / kg bwt], a non-steroidal anti-inflammatory drug Meloxicam [0.2mg / kg bwt] and fluid therapy [Dextrose 5% with Normal Saline @ 10ml / kg bwt] for a week. Response to treatment was poor even after a week and the kid still continued to have severe excruciating pain in the scrotal region. The kid was observed to experience pain in getting up. The consistency of testicles was hard to palpate. Surgical removal of the testicles was decided after getting a consent from the owner. The animal was sedated with xylazine @ 0.1 mg/kg bwt intramuscularly and anaesthesia was induced and maintained with ketamine @ 1.1 mg/kg bwt intravenously. The animal was laid on lateral recumbency and a circumcision incision was made at the level of the neck of the scrotum. Both the testicles were removed as per the standard technique (Fig. 2). Post-operative therapy with antibiotic gentamicin [4mg / kg bwt] was given for a week and the skin sutures were removed on 8th post-operative day.

DISCUSSION

Orchitis occurs in all species and the etiology may be either traumatic or infectious. The traumatic etiology may be attributed to the pendulous nature of the scrotum and the position of the testicle (Smith et al., 1972). In this case the infection may have gained entry through the wound on the scrotum as suggested by McEntee (1990).

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Fig 1: Kid showing swollen testicles with a scar tissue on the scrotum.

Fig 2: Same kid after surgical remoral of both the testicles.
REFERENCES