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ASE REPORT OF GUNSHOT FRACTURE, OMETRA AND ABDOMINAL HERNIA IN A ORT HAIR DOMESTIC CAT DUE TO TRAUMA O COEXISTING INFECTION

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uma is common in cats because they are often hyperac- and delicate in nature and may result in hernia and bone ture. A one year old domestic short hair cat was referred to an open wound and lameness in the right forelimb. ical signs were: Skin necrosis, obvious puss drainage the wound and vagina, dehydration and abdominal dis- ion. Radiography showed complete comminuted frac- in the mid radial and ulnar bones of the right forelimb to gunshot, and sonography revealed abdominal hernia. injured area was rinsed with normal saline and systemic biotics (cefazoline 22 mg/kg Tid) were administered. forelimb was temporarily bandaged and it was decided erform a limb amputation. After stabilization of the cat, ine surgery of amputation was performed in combination herniorraphy and OVH, with proper anaesthetic meth- here was a complication in abdominal herniorraphy. The ateral abdominal ring of the hernia sack was not obvious it was suggested that muscle atrophy had happened. As sult, closing the ring was not possible and the surgeon ded to suture the ring to the upper thigh and lumbar cles which made movement discomfort, considering that forelimb was amputated simultaneously. The cat recov- after surgery and systemic antibiotic (cefazoline) and killers (ketoprophen) were prescribed. The cat was hos- ized and proper care was taken but unfortunately, died 6 post-surgery. Autopsy was done and the results were as owed: No obvious sign of internal haemorrhage or liga- failure was seen. There was no other clinically impor- finding except puss in the gracillis muscles of the tight in sides which the reason was unknown. It was suggested the cat died from endotoxemic shock due to progressed ction as a result of trauma.

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A CASE REPORT OF UROABDOMEN IN A DOG

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Uroabdomen is an accumulation of urine in the peritoneal cavity. Urine may leak from kidney, ureter, bladder and proximal urethra. Bladder rupture is the most common cause of uroabdomen in dogs. Accurate diagnosis and prompt medical and surgical treatment is vital to save the animal. An eight-month-old Terrier dog weighing 5 kg with history of lethargy, loss of appetite, hematemesis and absence of urination, 24 hours after a blunt trauma was referred to veterinary teaching hospital. In physical examination abdominal distension, muscle tension and pain were observed. In ultrasonography bladder was not obvious and copious amount of fluid was evident. In subsequent radiography absence of the bladder and decreased visceral detail were seen. About 200 milliliter fluid obtained through abdominocentesis. Laboratory examination showed high Urea and low PCV. Pre-operative stabilization was performed by fluid therapy with NaCl 0.9%. In surgery, the ruptured bladder was closed in two layers and leakage was examined. In abdominal exploration progressive congestion of jejunum was observed. Five days post-operation, the dog returned to the clinic because of hematemesis and anorexia. A complete blood count, serum chemistry profile, radiography and endoscopy were performed. Total protein was (3.8 g/dl) and PCV was (38 %). Positive contrast cystography showed normal bladder without any leakage and in endoscopic examination gastric wall was intact.