Indian Vet. J., November 2019, 96 (11) : 65 - 66

Management of Penile Prolapse in Indian Tent Turtle (*Pangshura tentoriacircumdata,* Gray, 1834)

Animesh Talukdar[1], Gowri Mallapur, Syed Ainul Hussain and Parag Nigam

Wildlife Institute of India, Chandrabani, Dehradun 248001, Uttarakhand.

(Received : May, 2019 **171/19** Accepted : August, 2019)

Abstract

Afree rangingmale Indian Tent Turtle (*Pangshura tentoriacircumdata*) at Kachua Punarwas Kendra, Sarnath with a history of red swollen mass protruding and bleeding below the tail that was presented. This was diagnosed as penile prolapse. The organ was cleaned with dilute Savlon followed by cold fomentation to decrease the inflammation. Attempts togently push the organ back was not successful. The prolapsed mass was again pushed and tied using purse-string sutures with absorbable suture material under local anesthesia. Topical antiseptic and analgesics were administrated postoperatively. The turtle showed uneventful recovery in 10 days and was kept under observation for 20 days before being rehabilitated back in natural habitat.

Key words: Penile, prolapse, management, turtle.

Chelonians are diapsids belonging to class Reptilia under the order of Testudines which include turtles, terrapins and tortoises (Kuchling, 2012). Males have relatively lengthier and thicker tails and distally placed cloacal vent that accommodates the penis (Boyer, 1992). Penile prolapse is not uncommon and may result from infection, stress and may even may go undiagnosed (Nisbet *et al*., 2011). The paper attempts to describe a case of penile prolapse and its successful management.

Materials and Methods

An adult Indian Tent Turtle (*Pangshura tentoria circumdata)* was rescued and presented to the Kachua Punarwas Kendra, Sarnath with the history of a protruding mass below the tail and bleeding (Fig 1). The protruding penile was intact with no bruise, laceration or necrosis. After examination, it was confirmed as recently happened penile prolapse. The animal was kept in a tub of water with a padded basking spot to avoid further injury to the penis and was allowed to be heal naturally.

As the prolapse did not resolve, 2% lignocaine gel was applied locally after cleaning with dilute Savlon. Gentle pressure was applied to push back the mass.Purse-string sutures were placed around the vent using Vicryl 2-0 absorbable suture material to retain the mass. Topical antiseptic dressing using Povidone-iodine liquid was done on daily basis. Meloxicam @ 0.2 mg/kg/ body weight/day was injected intramuscularly to control pain and inflammation along with supplementation of topical antibiotic (Nebasulf). The turtle was kept under observation for 10 days to check for recurrence, and was kept in isolation pond for 20 days for closer observation. The turtle showed uneventful recovery and was subsequently released.

Results and Discussion

Etiology of prolapse of the penis is not clear however may result from stress, feeding habit, constipation, straining during defecation, etc (Sharma *et al*., 2009). Penile prolapses often lead to necrosis of exposed tissues and is susceptible to microbial infections. Environmental conditions often lead to compromised physical and physiological conditions even in the wildlife.

Summary

The free living rescued Indian tent turtle was diagnosed with penile prolapse. Surgical

[1]*Corresponding author* : Email : animesh@wii.gov.in

Fig 1 : Penile Prolapse

intervention along with medical support were providedthat resulted in improvement and full recovery. The turtle was released back in the natural habitat.

Acknowledgment

The present work is a part of "*Biodiversity Conservation and Ganga Rejuvenation*" project under "*National Mission for Clean Ganga*" being undertaken by "*Wildlife Institute of India*". The authors are grateful to officers and staff at Kachua Punarwas Kendra as well as Ms. AnujaMital, Dr.Prabhakar Yadav,BrijeshMaurya, IshuVerma, Pyarelal, Pintu and Jyoti Singh for all the support.

References

Bennett, R.A. (1997) Reptilian surgery. I. Basic principles. *CompendContEducPract Vet* **11:**10–20.

Boyer, T.H. (1992) Common problems of box turtles (*Terrapene*spp) in captivity. *Bulletin of the Association of Reptilian and Amphibian Veterinarians*, **2(1):** 9-14.

Kuchling, G. (2012) The reproductive biology of the Chelonia (Vol. 38). *Springer Science & Business Media*.Volume 38. New York: Springer-Verlag, 1pp

Nisbet, H.O., Yardımcı, C., Ozak, A., andŞirin, Y.S. (2011) Penile prolapse in a red eared slider (*Trachemysscriptaelegans*).*KafkasUniv Vet FakDerg*; **17(1):**151-3

Sharma, Y.K., and Raghuvanshi, P.D.S. (2009) Surgical treatment of cloacal prolapse in a turtle. *Indian Journal of Veterinary Surgery*, **30(1):** 70.

Indian Vet. J., November 2019, 96 (11) : 66 - 67

Treatment of Generalised Demodicosis in a Dog Using a Single Oral Dose of Afoxolaner

P. Chansiripornchai [1] and N. Chansiripornchai

Faculty of Veterinary Science, Chulalongkorn University, Henri - Dunant Road, Pathumwan, Bangkok – 10330, Thailand

(Received : June, 2019 **218/19** Accepted : August, 2019)

Abstract

A 9 - month - old female Thai - mixed breed dog with the history of skin disease was presented and diagnosed as canine generalised demodicosis (CGD). The dog was treated with afoxolaner at the minimum dosage of 2.5 mg/kg as a single oral dose on day 0. The skin lesions had decreased in size and hair regrowth was seen by day 14 of post treatment. There were no adverse drug events in the dog during the entire treatment. No recurrence of clinical signs were observed during the 18 month follow - up period. This finding suggests that single oral afoxolaner may be a potential and beneficial regimen for the treatment of CGD.

Key words: afoxolaner, demodicosis, dog

Canine generalised demodicosis (CGD) is a moderate to severe skin disease that is generated by an overgrowth of *Demodex canis*, which induced by underlying causes such as systemic disease or immunosuppression from various causes (Mueller *et al*., 2012). Many miticides

[1]*Corresponding author* : Email : spiyarat@hotmail.com