BHAGNARI BULL WITH NON-HAEMOLYTIC BLOODY URINE: A CASE REPORT

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Abstract
A Bhagnari bull of 5 years age was presented to Veterinary Clinic, Faculty of Veterinary Sciences, Bahauddin Zakariya University Multan. Live Weight of animal was about 400 kg having masculine body. The owner complained for bloody red urine and anorexia for seven days. The animal was examined and given proper treatment of medicines including antibiotics but it could not survive. After postmortem it was tried to diagnose the cause of death and possible remedies for the future.

Keywords: Bhagnari bull, Edema, haemolytic bloody urine, Veterinary cover.

HISTORY OF THE ANIMAL
A Bhagnari bull of 5 years age was presented to Veterinary Clinic, Faculty of Veterinary Sciences, Bahauddin Zakariya University Multan on 31/03/2011. The animal already remained in Veterinary cover for seven days but all the exercise was futile so the animal was brought to the clinic. Live Weight of animal was about 400 kg. Body was masculine and purpose of animal was to sale on occasion of Eid-ul-Azha. The owner complained for bloody red urine (Figs. 1 and 2) and anorexia for seven days.

PHYSICAL EXAMINATION
Animal was showing slight elevation in normal body temperature up to 103 °F. Animal was also complaining for tympani and constipation. Slight edema on brisket was also visible.

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PATHO-PHYSIOLOGICAL EXAMINATION

Blood Examination
Blood Sample was checked at Pathobiology laboratory for presence of haemoparasite. Blood slides were stained with Giemsa stain [Ayaz 2010] and blood smear was examined at 100 X with oil Immersion lens under the microscope. No intra- or inter-cellular blood parasites/protozoa were found.
Fecal Examination
Fecal examination was performed to check the parasitic infestation (presence) by direct examination and by Modified Floatation Method [Ayaz 2010]. The Modified Flotation Method revealed no eggs of internal parasites.

Urine Examination
Urine sample was examined [Coles 1986, Jones et al. 1997] with the help of Uro-color urine strips and following results were observed;

- Protein: Positive with significant increase
- Blood: Positive but Non-haemolytic
- Glucose: Mild increase
- Leukocyte: Present with Mild Leucocytes
- pH: Slightly acidic
- Urobilogen: 4 mg dl\(^{-1}\)
- Acetone: Normal
- Nitrite: Normal

TREATMENT HISTORY
Animal was treated with medicines such as Amoxycillin injection @15 mg kg\(^{-1}\) body weight and Enrofloxacin injection @ 2.5 mg kg\(^{-1}\) body weight (Broad spectrum antibiotics) and was injected with general body tonics including Novacoc injection, Fosphan injection and Amivicom injection, for five days. Animal was also injected with Diclofenic sodium @ 75 mg per 50 kg BID intramuscularly and Transamin injection intravenously BID but response to all these medicines was grave. Liquid paraffin@ 500 ml to 1 liter was administered orally to release the constipation. Additionally the animal was also administered Sodium Acid Phosphate @ 100 gm orally for three days.

POSTMORTEM EXAMINATION
Animal died on 02/04/2011 with signs of severe panting leading to unconsciousness, after that Postmortem was performed. The postmortem revealed that the Liver color was deep yellow and showing diffused necrosis as friable. Histopathology of the liver tissues revealed severe hydropic degeneration (water infiltration in tissues) of hepatocytes (Fig. 3). The whole Intestine showed in parts with ischaemic necrosis while there was no fecal material too. Gall bladder was full of slimy thick bile; black in color. Rumen contained ingesta of normal consistency but with no evidence of passing on. The kidney showed slight Edema (inflammation) in parenchyma while urinary bladder and ureters were normal. All other body organs like heart, lungs and brain were normal in color and shape.
DISCUSSION AND CONCLUSION

The reason for the animal death might be the Phytotoxicity [Radostits et al., 1997] which induced complete hepatic failure. Moreover, Yeldrin et al. [2007] have indicated that the Deltamethrin; a synthetic pyrethroid contaminating agent can produce hydropic degeneration in the liver and other tissues, this might be a cause in the bull as shown in Fig. 3, and the same has been reported by Akdogan et al. [2003] by the effect of *Mentha piperita* L. and *Mentha spicata* L. on the kidneys of experimental rats. The most probable cause of non-hemolytic urine might be liver dysfunction as reported earlier in this type of syndrome by Foulk et al. [1959] and same might be cause of death in the Bhagnari Bull.

References


