



## **Lecture title: Retained Placenta**

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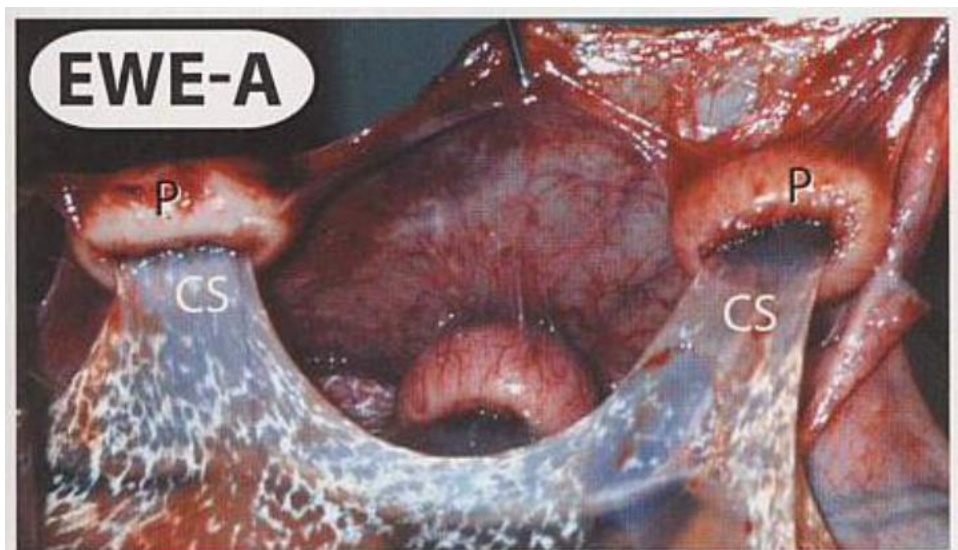
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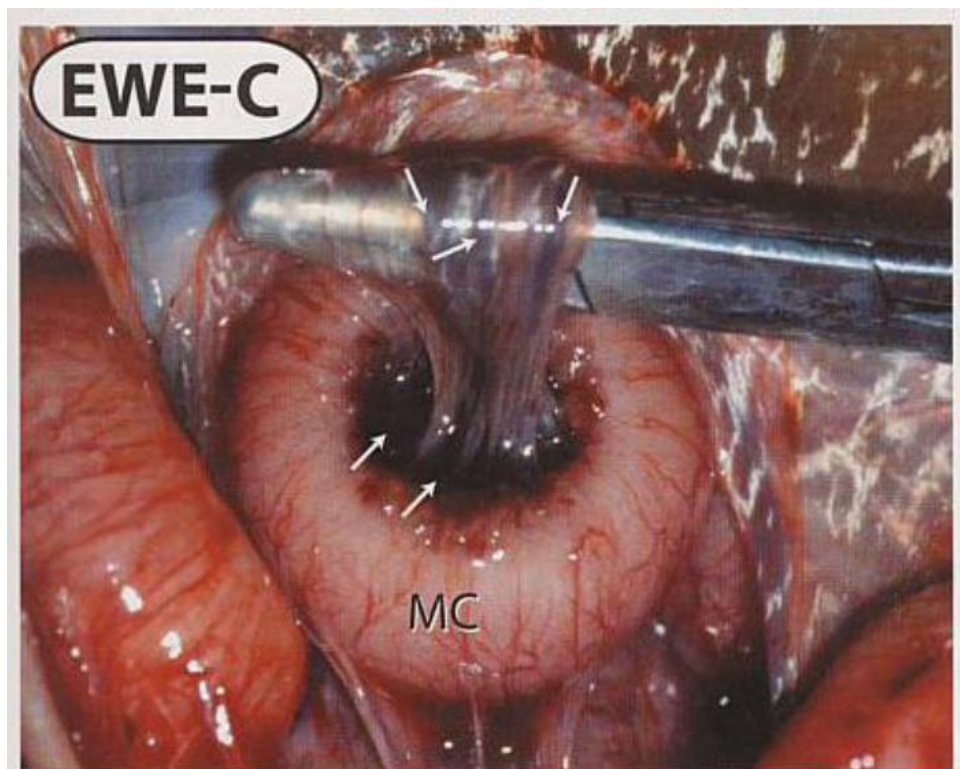
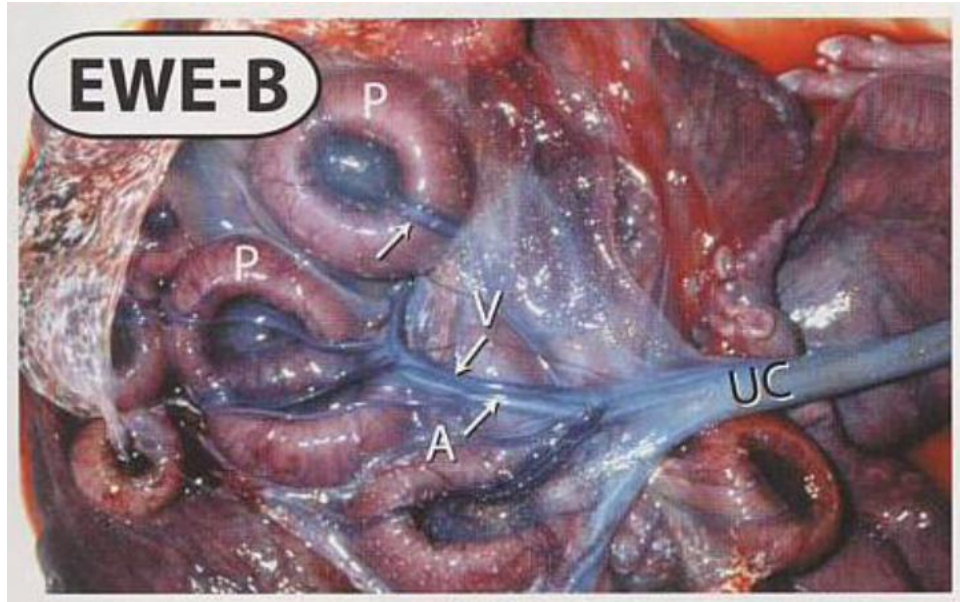
**College of Veterinary Medicine**

**Retained fetal membranes is defined**

**((as placenta not detached after 12 hours postpartum Normally, in cow the placenta is expelled within a 12-hour period after calving.))**

If any part of the fetal membranes is held for longer periods, it is considered to be pathological or abnormal . Retention of fetal membranes is observed more frequently in cattle, especially in dairy cattle, than in other animals.







Short or long gestation, milk fever, abortion, stillbirth, dystocia, twinning, induction of parturition,, fat cows, deficiencies on selenium, vitamin E, and or vitamin A.

**Patho-physiological causes are:**

immature placentomes, cotyledonitis, edema of the chorionic villi, placentitis, uterine atony.

**•Infectious causes are:**

in herds infected with *brucellosis*, *Leptospirosis*, *vibriosis*, *listeriosis*, *infectious bovine rhinotracheitis* and other infectious organisms, retention of fetal membranes may occur in 50% or more of the cows.

**Mechanism of expulsion and retention of placenta:**

•Theplacentomeistheattachmentbetweenthe

dam(caruncle)andthefetalmembranes.

•(cotyledon).Thereareapproximately100

placentomesinacow'suterusduringpregnancy.

•Whenparturitionbeginsandcontractionsofthe

uterusareinitiated,thebloodflowdecreasesto

thematernalandfetalportionsoftheplacentome.

- ◎ The effect of nutrition in initiating reproductive activity in seasonally breeding species is not clear. There is some evidence that the stabling of females and the provision of good feeding assist in stimulating the onset of cyclic activity in late spring to early summer.



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**Clinical Signs:**

- 1-the fetal membrane are normally visible hanging from the vulva
- 2-almost fetid odor is produced which pervade the atmosphere and taints the milk
- 3-when the retention is companied by metritis there will be variable symptoms according to the severity of uterine disease
- 4-in general there is increased plus, respiratory rate, temperature , anorexia, diarrhea , depression, reduce milk yield , straining and fetid sanguine purulent vaginal discharge and laminitis is an occasional complication

Therapeutic treatment with manual removal

- 1-injection of oxytocin with 24 hrof birth specially when retention due to primary uterine inertia.
- 2-estrogenic substance increase the sensitively of uterine musculature to oxytocin and bolster the anti-infective properties of the endometrial.
- 3-injection of the PGF2 $\alpha$ .
- 4-in case uterine inertia due to hypocalcaemia administration of calcium gluconate.
- 5-systemic and locally antibiotic (oxytetracyclin Tylosin )drug should be use to control of bacterial infection