# Mastitis with subsequent abscessation in a pony mare

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#### **Abstract**

A five year old mare was reported with the history of lameness from hind limbs since last 5 days. Mare had delivered a foal before one month which died 10 days back and after that the problem arose. Clinical examination revealed that mare used to stand with abducted hind limbs. There was a firm, painful, circumscribed swelling of left mammary gland and in the area between the two mammae. Fine needle aspiration of the swelling, yielded thin well formed pus with no foul odour. The case was treated on the principles of abscess and mastitis management.

Keywords: Mare, Mastitis, Castration

Mastitis or inflammation of the mammary gland is very common in dairy cows; however, in mares it is a rarely reported condition. Mastitis in equines generally occurs in one or both glands during dry period rather than during lactation (Jackson, 1986). The common manifestations of mastitis in mare are pain and edema of mammary gland and without prompt treatment, abscessation or induration of the gland can occur (McCue and Wilson, 1989). Present report describes mastitis in a lactating mare with subsequent development of abscess.

# **Case History and Clinical Observations**

A five year old mare was reported with the history of lameness from hind limbs since last 5 days and had been treated by local veterinarian for lameness with Dicrysticine and Esgipyrine N, without any improvement. On inquiring history, owner revealed that the mare had delivered a foal one month before which died 10 days back and after that the problem arose. Clinical examination revealed that mare used to stand with abducted hind limbs. There was a firm, painful, circumscribed swelling of left mammary gland and in the area between the two mammae. Fine needle aspiration of the swelling, yielded thin well formed pus with no foul odour. The milk and pus were collected in a sterile glass vial for microbiological investigations. The pus was cultured on the nutrient agar and MLA but there was no any bacterial growth observed after 24 hrs of incubation. Therefore, on the basis of history, clinical examination and microbiological investigations, the case was diagnosed as mastitis with subsequent abscess formation in left mammary gland and treated accordingly.

The mare was casted on right lateral recumbency and an incision of about 2" was made in the most soft area of the swelling and about two liters of pus was drained out, The pus cavity was lavaged thoroughly with normal saline, and packed with the povidone iodine soaked bandage. The antiseptic dressing and gauze packing was done regularly till complete healing of the wound from inside. Daily complete milking of both teats was also advised. Simultaneously animal was given Intacef 3g IM for 7 days, Melonex, 10 ml IM for 3 days and Pendistrin SH intra mammary infusion was made for 3 days. At seventh day there was significant improvement in the condition in term of appearance of the mammary gland, absence of pain on palpation, and there was no lameness from hind legs.

## Discussion

The present case was diagnosed as mastitis with subsequent abscessation in a lactating mare, the reason of development of mastitis might be no evacuation of the milk because of the death of foal, which might have resulted in accumulation of milk in gland and subsequent development of mastitis and abscessation thereof, signs of lameness from hind legs is quite common in equine mastitis (Rodostits *et al.*, 2000), which might have developed due to false diagnosis and inappropriate therapy and subsequent abscessation of mammary gland (McCue and Wilson, 1989). Microbiological culture of pus could not reveal any bacterial growth which might have occurred due to previous use of antibiotic. Abscess formation in mammary gland is quite common in equine mastitis (Ronald, 2014). The treatment was similar to that



Fig.1. Marked circumscribed swelling in left mammary gland

of abscess treatment and intramammary infusions and broad spectrum systemic antibiotic and antinflamatory therapy is recommended for the treatment of mastitis (Rodostits *et al.*, 2000).

## References

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Fig. 2. Pus like milk coming out from left teat

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