

Retrospective study of dystocia in dairy cows in SaesieTsaeda–Emba district, Eastern Tigray, Ethiopia

Abstract

A retrospective study was conducted from November, 2016 to April, 2017 in SaesieTsaeda–Emba District, Eastern Tigray, Ethiopia with objectives of prevalence of dystocia occurrence and its associated risk factors in SaesieTsaeda–Emba District. In the present study, 60 dairy cows were examined for determining of dystocia. Out of the 60 dairy cows examined, 38 (63.3%) dairy cows were found to have dystocia. Out of the 38 dairy cows found problems with dystocia, 4 (10.5%) were local, 23 (60.5%) were cross and 11 (28.9%) were exotic breed of cows. This result showed dystocia was higher in cross breed of cows when compared with local and exotic breed of dairy cows. 8 (21%) of the dairy cows with dystocia were in natural mated, 28 (73.7%) were in artificial inseminated and the rest 2 (5.3%) were in both natural mated and artificial inseminated. This result indicated dystocia was higher in dairy cows with artificial inseminated 28 (73.7%) when compared to natural mated 8 (21%). 30 (78.9%) of the dairy cows with dystocia were in first calving and 8 (21%) were in second calving. This result revealed dystocia was higher in dairy cows with first calving. 20 (52.6%) of the dairy cows found to have dystocia were delivered male calves whereas 18 (47.4%) were female calves. This result showed dystocia with male calves were higher when compared dystocia with female calves. 9 (15%) of the dystocia were caused by fetal, 16 (26.7%) of the dystocia were caused by maternal, 13(21.7%) were caused by others and 22 (36.7%) were unknown their causes. This result revealed dystocia was more caused by maternal problems when compared to fetal and other problems. Awareness creation to farm owners, attendants and improved management such as, proper feeding, accurate heat detection, considering the size of sire and dam while using artificial insemination, and health management should be improved to minimize the occurrence of dystocia and associated economic losses in the dairy farms of the area.

Keywords: dairy cows, dystocia, saesietsaeda–emba district, retrospective

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Abbreviations: AI, Artificial Insemination; %, Percentage; °C, Degree Centigrade

Introduction

Dystocia is defined as difficulty or prolongation of parturition as opposed to normal parturition. Refers to the abnormal labor or calf that can be categorized as fetal, maternal and placental dystocia.¹ Incomplete cervical dilation occurs very occasionally in heifers but the true incidence is difficult to determine because in most situations the onset of first stage labour has not been noted. It is probable that some dystocia cases are classified as incomplete cervical dilation but merely represent over-zealous interference during early first stage labor.² Different factors is responsible for dystocia occurrence in cattle. The most common type of dystocia in domesticated dairy cattle is oversized calves. Abnormal foetal position most commonly presents as posterior mal presentation, foreleg mal posture, breech mal presentation or cranial mal posture. Uterine inertia, where the cervix is fully dilated but uterine contractions are too weak to expel the fetus. Incomplete dilatation of the vulva is more common in heifers while incomplete dilatation of the cervix is more common in older cows. These conditions are associated with confinement and per parturient environmental stress, premature assistance, hormonal asynchrony and preterm calving.³ Dystocia management must begin with proper heifer development. Fetopelvic disproportion is a major contributing

cause of dystocia. Replacement heifers by measurement of the pelvic area of the dam to predict dystocia is sometimes used as a criterion for selection of replacement heifers. Combination of culling heifers with small pelvic areas and using bulls that sire calves with small birth weights may reduce dystocia significantly.⁴

Description of behavioral signs of the cow or heifer before and during labor; when and how it is appropriate to assist the cow or heifer; Strategies to correct abnormal presentation, position, or posture; Hygiene practices during assisted births; Accurate record-keeping of birth events; Best communication practices within the farm team (i.e., when to call for help); and Best newborn care practices (e.g., timing and amount of colostrums to be fed) were among dystocia management practices to be considered.⁵ Risk factors for dystocia associated with the dam have been identified: parity, with first parity animals having a higher incidence of calving difficulty;⁶ nutritional status and its interaction with age at first calving, particularly under condition or over condition at calving; and previous history of dystocia.⁶ Similarly, risk factors associated with the calf have been identified: higher birth weight and higher weight relative to the dam's BW,⁷ gestation length, plurality, and sex.⁸ Embryos produced in vitro resulted in calves with longer gestation, greater birth weight, and greater levels of difficulty than calves arising from AI or in vivo embryos.⁹

In SaesieTsaeda–Emba District small holder dairy farmers are not much perceived up on the development and management of dystocia

even though dystocia is very common reproductive threat of small holder dairy farmers. Therefore, the objective of this study is to determine the prevalence of dystocia occurrence and its associated risk factors in SaesieTsaeda–Emba District, Eastern Tigray, Ethiopia.

Materials and methods

Study Area

The study was conducted in SaesieTsaeda–Emba District, Eastern Tigray. The district is located at a distance of 83 km north from Mekelle, capital city of Tigray Regional State of Ethiopia. The district is bordered by Districts namely: Ganta–Afeshum (north), Kilde–Awlaehlo (South), Atsbi–Wenberta and afar region (east) and Hawzen (west).¹⁰ It has an altitude of 13°5'27" N and longitude of 39°29'25" E. It lies in semi–arid “Wainadega” at altitude of 2204m above sea level. The average minimum and maximum temperature of the area vary between 22°C–27°C. The district receives a bimodal rain fall with an average annual precipitation being 450–500 mm. The short rainy season locally called “azmera” extended from March to May and the long rainy season locally called “Tsidia” extended from June to August. SaesieTsaeda–Emba District has 28 Sub–Districts (two urban and 26 rural). It has a total 164885 of human population (80794 male and 84091 Female), and livestock population of 80651 Cattle, 160,000 small ruminants and 12379 Equines.¹¹

Study animal

Animal's including in this study was cattle including local and cross breeds of urban, per urban and extensive management system that got veterinary service.

Study design

Across–sectional descriptive study design will be followed to determine the epidemiology and management of dairy cattle under different management system based on the past veterinary clinic records and questionnaire survey of small holder dairy farmers purposively based on knowhow and experiencing veterinary service delivery.

Sample size

The study involves districts, individual dairy cattle as a sampling unit. The districts will select purposively based on their representation of having veterinary service; the sample size for the study is determined based on expected prevalence rate of the disease 50% and absolute desired precision of 5 % at confidence level of 95 %.

The sample size is calculated according to the following formula (Thursfield, 2005).

$$n = \frac{1.96^2 Pexp (1-Pexp)}{d^2}$$

Where n, required sample size; Pexp, expected prevalence; d, desired absolute precision.

Accordingly 384 samples will be taken doubled to increase its accuracy of the study based on the records found on veterinary clinics

Questionnaire survey and Epidemiological data collection

The investigation process involves occurrence of dystocia, seasonal occurrence of the disease, presence of affected or dead animals and productivity loss. Relevant data will be gathered by interviewing around 60 livestock owners and animal health workers

and information will be carefully recorded on a designed format which is annexed at the end of this page.

Results

Potential Risk Factors

In the present study, 60 dairy cows were examined for determining of dystocia. Out of the 60 dairy cows examined 38 (63.3%) dairy cows were found to have dystocia. Out of the 38 dairy cows found problems with dystocia, 4 (10.5%) were local, 23 (60.5%) were cross and 11 (28.9%) were exotic breed of cows. This result showed dystocia was higher in cross breed of cows when compared with local and exotic breed of dairy cows (Table 1).

Table 1 Dystocia association with potential risk factors

Risk factors	No	Yes	
Breed	Local	6(27.3%)	4(10.5)
	Cross	11(50%)	23(60.5)
	exotic	5(22.7%)	11(28.9%)
Breeding method	Natural mating	18(81.8)	8(21%)
	Artificial inseminated	3(13.6%)	28(73.7%)
	both	1(4.5%)	2(5.3%)
Parity	First calving	5(22.7%)	30(78.9%)
	Second calving	17(77.3%)	8(21%)

8 (21%) of the dairy cows with dystocia were in natural mated, 28 (73.7%) were in artificial inseminated and the rest 2 (5.3%) were in both natural mated and artificial inseminated. This result indicated dystocia was higher in dairy cows with artificial inseminated 28 (73.7%) when compared to natural mated 8 (21%) (Table1). 30 (78.9%) of the dairy cows with dystocia were in first calving and 8 (21%) were in second calving. This result revealed dystocia was higher in dairy cows with first calving (Table 1).

20 (52.6%) of the dairy cows found to have dystocia were delivered male calves whereas 18 (47.4%) were female calves. This result showed dystocia with male calves were higher when compared dystocia with female calves (Table 2). 11 (28.9%) dystocia of dairy cows occurred in winter, 16 (42.1%) dystocia of dairy cows occurred in summer, 4(10.5%) were occurred in autumn and 7 (18.4%) were occurred in spring. This result indicated dystocia was higher in summer seasons followed by winter seasons when compared to autumn and spring seasons (Table 2). 11 (18.3%) of the dystocia was handled with mutation, 25 (41.7%) of the dystocia was handled with traction, 2 (3.3%) of the dystocia was handled with fetotomy and 229 (36.7%) were unknown its handling of the dystocia (Table 2).

Table 2 Dystocia association with potential risk factors

Risk factors	No	Yes	
Sex of the calf	Male	3(13.6%)	20(52.6%)
	Female	19(86.4%)	18(47.4%)
Seasons	Winter	6(27.3%)	11(28.9%)
	Summer	7(31.8%)	16(42.1)
	Autumn	4(18.2%)	4(10.5%)
	Spring	5(22.7%)	7(18.4%)

Table Continued

Risk factors	No	Yes	
Handling	Mutation	0(0%)	11(18.3%)
	Traction	0(0%)	25(41.7%)
	Fetotomy	0(0%)	2(3.3%)
	Not known	0(0%)	22(36.7%)

15 (39.5%) of the dairy cows with dystocia were in extensive farming system and 23 (60.5%) dairy cows with dystocia were in semi-intensive farming system. This result indicated dystocia was higher in semi intensive farming system when compared with extensive farming system (Table 3). 9 (15%) of the dystocia were caused by fetal, 16 (26.7%) of the dystocia were caused by maternal, 13 (21.7%) were caused by others and 22 (36.7%) were unknown their causes. This result revealed dystocia was more caused by maternal problems when compared to fetal and other problems (Table 3).

Table 3 Dystocia association with potential risk factors

Risk factors	No	Yes	
Farming system	Extensive	6(27.3%)	15(39.5%)
	Semi-intensive	16(72.7%)	23(60.5%)
Causes of dystocia	Fetal	0(0%)	9(15%)
	Maternal	0(0%)	16(26.7%)
	Others	0(0%)	13(21.7%)
	unknown	0(0%)	22(36.7%)
Number of animals	3-Jan	10(45.5%)	5(13.2%)
	6-Apr	8(36.4%)	19(50%)
	Greater than 6	4(18.2%)	14(36.8%)

Discussion

In the present study, out of the 60 dairy cows examined, 38 (63.3%) dairy cows were found to have problem with dystocia. Out of the 38 dairy cows having dystocia, 4 (10.5%) were local, 23 (60.5%) were cross and 11 (28.9%) were exotic breed of cows. In this study 8 (21%) of the dairy cows with dystocia were in natural mated, 28 (73.7%) were in artificial inseminated and the rest 2 (5.3%) were in both natural mated and artificial inseminated. In this study also 30 (78.9%) of the dairy cows with dystocia were in first calving and 8 (21%) were in second calving.

In the present study the prevalence of dystocia was found to be 38 (63.3%) which was higher when compared with the findings of Mamo T¹² who reported 5.79% in small holder dairy cows in and around Debre Zeiet, Dawit & Ahmed¹³ who reported 7.75 %, Gashaw et al.¹⁴ who reported 3.8% and Hadush et al.¹⁵ who reported 2.9%. This variation in the occurrence of dystocia may be due to the fact that it is influenced by the factors such as, age and parity of the dam as well as breed of the sire. Inseminating cows with semen collected from large sized bulls without taking into account the size and age of cows is an important factor in precipitating dystocia.¹⁶

In this study the higher prevalence 23(60.5%) of dystocia was found in cross breed of cows when compared with the findings of Temesgen & Tegegn¹⁷ who reported 6.7% prevalence of dystocia among cross breed of cows; Sekhar & Rajani¹⁸ who reported 2.9% prevalence of dystocia among cross breed cows of chittoor district

of and harapradesh. This difference in prevalence of dystocia might be due to difference in management and hygienic practices. In this study high incidence of dystocia was observed with male calves which might be attributed to their higher birth weight.¹⁹ The Higher occurrence of dystocia in summer season followed by winter seasons than autumn and spring seasons in the present study may be attributed to higher number of calving occurring in these seasons.

The prevalence of dystocia (63.3%) found in the present study was relatively in agreement with findings of Nejash & Ahmed²⁰ who reported 58.26%. The fetal causes of dystocia found in this study were found to be 9(15%). This finding is relatively lower when compared to the findings of Nejash & Ahmed²⁰ who reported 60.97 % of the dystocia was resulted due to fetal causes. The maternal causes of dystocia found in this study were found to be 16 (26.7%). This finding is relatively lower when compared to the findings of Nejash & Ahmed²⁰ who reported 39.04% of the dystocia was occurred because of the maternal causes. In this study, higher prevalence of dystocia was observed in dairy cows with first parity number 30(78.9%) whereas 8(21%) of dystocia was observed in dairy cows with second parity numbers. This finding is disagree with the findings of Nejash & Ahmed²⁰ who reported higher prevalence of dystocia in dairy cows with second parity numbers (44.57%) than dairy cows with first parity number (24.31%).

Higher prevalence of dystocia in the present study was observed in semi-intensive of farming system 23(60.5%) when compared to extensive of farming system 15(39.5%). This finding is in agreement with the findings of Molalegne & Shive²¹ who reported higher prevalence of dystocia at semi intensive of farming system 18(38.3%) when compared to extensive of farming system 62 (24.4%).

Conclusion and recommendations

This result showed a high prevalence of dystocia in dairy cows was observed in Edagahamus district. In this study high prevalence of dystocia was observed in cross breed of dairy cows when compare to local and exotic breeds. In this study, higher prevalence of dystocia was observed in dairy cows with first parity number when compared to dairy cows with second parity numbers. In this study high incidence of dystocia was observed with male calves which might be attributed to their higher birth weight. The Higher occurrence of dystocia in summer season followed by winter seasons than autumn and spring seasons in the present study may be attributed to higher number of calving occurring in these seasons. The maternal causes of dystocia found in this study were higher than the fetal and other causes. This result also showed higher prevalence of dystocia was observed in semi intensive farming system than extensive farming system.

Based on the above conclusion the following points were recommended:

- Awareness creation to farm owners, attendants and improved management such as, proper feeding, accurate heat detection, considering the size of sir and dam while using artificial insemination, and health management should be improved to minimize the occurrence of dystocia and associated economic losses in the dairy farms of the area.
- High prevalence of such problem require further study to identify the most causes to design control strategy and community awareness on its early control and prevention activities in the study area.

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Conflict of interest

Author declares that there is no conflict of interest.

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