





ANESTRUM

(Anestrum in dairy animals)

Lecture 3 False anestrum diagnosis and treatment









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- History
- Clinical signs
- *Rectal examination
- Ultrasonography

History

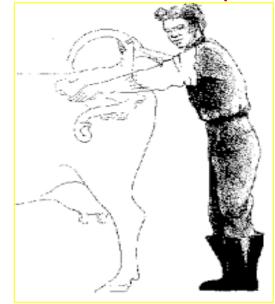
Based on the information viz., failure of displaying the overt signs of estrus by the animals after attaining puberty or 60–90 days postpartum;

Clinical signs

symptoms of estrus shown with cyclicity which subsequently ceased and revert in to anestrus.

Rectal examination:

- 1. Reveals a mature CL in one of the ovaries and a flaccid uterus
- 2. A tonic uterus with regressing CL and follicle or developing CL indicating estrus, proestrus or metestrus.
- 3. Examination of postpartum anestrus cows at 60-90 day



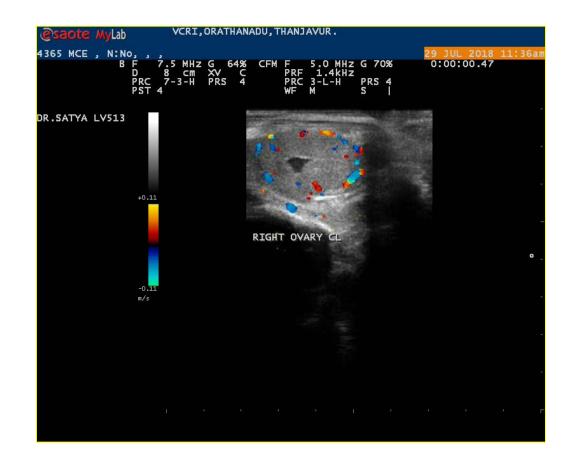






Ultrasonography

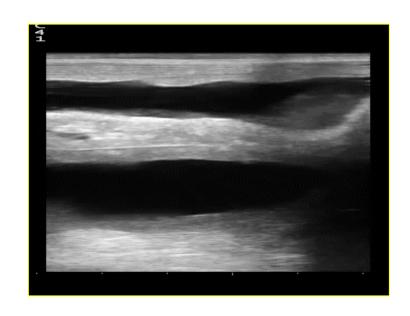


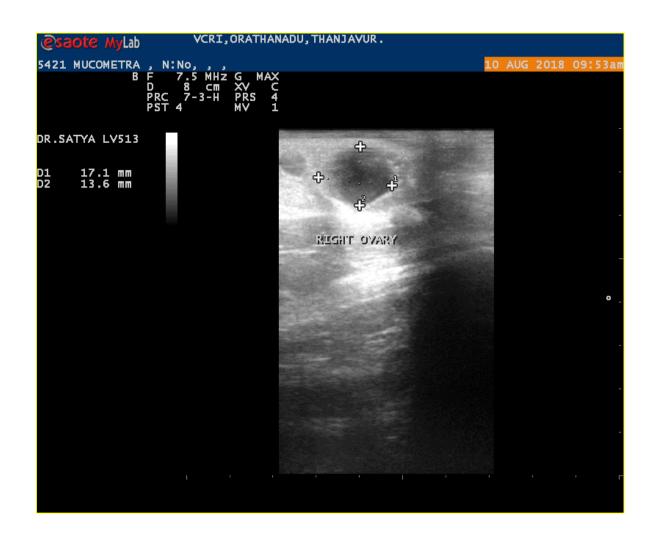


Left Ovary: MSF

Right Ovary: CL – 23.5mm

False Anestrus-Mucometra





Treatment

- Education of farmer/herdsman
- Unobserved estrus
- Improving the managerial practice
- Increased regular observation thrice a day for estrus.
- Provision of adequate lighting to improve estrus detection
- Use of estrus detection aids.

Treatment

- Use of teaser bulls.
- Careful and frequent examination of cows, prediction and confirmation of estrus and breeding.

 Specific treatment using prostaglandin or progesterone therapy and fixed time insemination. Highly effective (Refer Chapter 2 on Controlled Breeding)

Hormonal treatments

Prostaglandin Based Treatment

Prostaglandin (PGF2 α) is the treatment of choice for persistent corpus luteum and sub estrus.

Natural or synthetic analogue of PGF2 α as a single dose has been used with a reasonable degree of success for management of silent estrus in cattle and buffaloes





Summary of Day 3 Lecture

- **✓** False anestrum
- ✓ Diagnosis by different methods
- **✓** Treatment
 - Non hormonal
 - Hormonal

Thank you