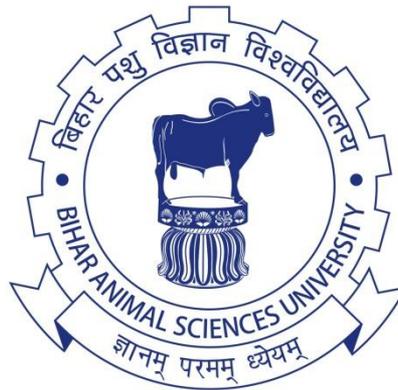


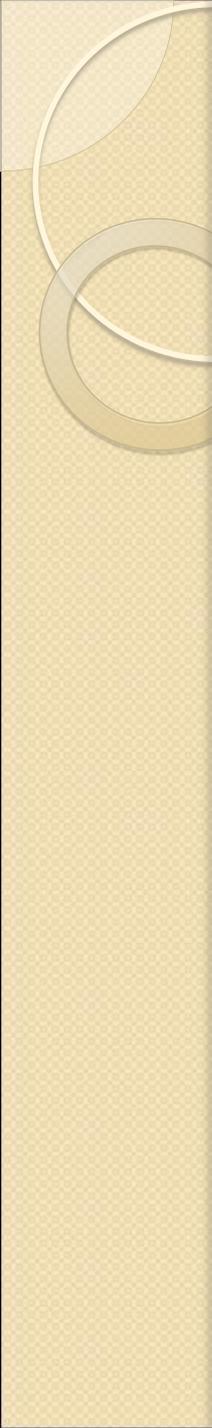
# Pregnancy Diagnosis



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# Pregnancy

- Normal physiological condition
- Presence of fetus in uterus

# Purpose of pregnancy diagnosis

Identify  
non-  
pregnant

Certify  
animals for  
sale

Seasonal  
breeder

Economic  
feeding

Breeding  
programme

# Techniques

```
graph TD; Techniques[Techniques] --> Managemental[Managemental]; Techniques --> Clinical[Clinical]; Techniques --> Lab_methods[Lab methods]; Lab_methods --> Immunological[Immunological]; Lab_methods --> Chemical[Chemical]; Lab_methods --> Biological[Biological];
```

The diagram illustrates the classification of techniques. At the top is a teal box labeled 'Techniques'. A horizontal red line is positioned below it. Three arrows point downwards from the 'Techniques' box to three red boxes: 'Managemental', 'Clinical', and 'Lab methods'. From the 'Lab methods' box, three arrows point downwards to three dark blue boxes: 'Immunological', 'Chemical', and 'Biological'.

**Managemental**

**Clinical**

**Lab methods**

**Immunological**

**Chemical**

**Biological**

# Cattle and buffalo

**External indications-** just indicators not confirmatory

- Breeding history
- Cessation of estrus
- Increase in abdominal size
- Development of udder
- Change in temperament
- Relaxation of pelvic ligament
- Abd ballotment of fetus
- Fetal heart auscultation

# Clinical methods

- Vaginal examination
- Rectal palpation

Changes in ovaries

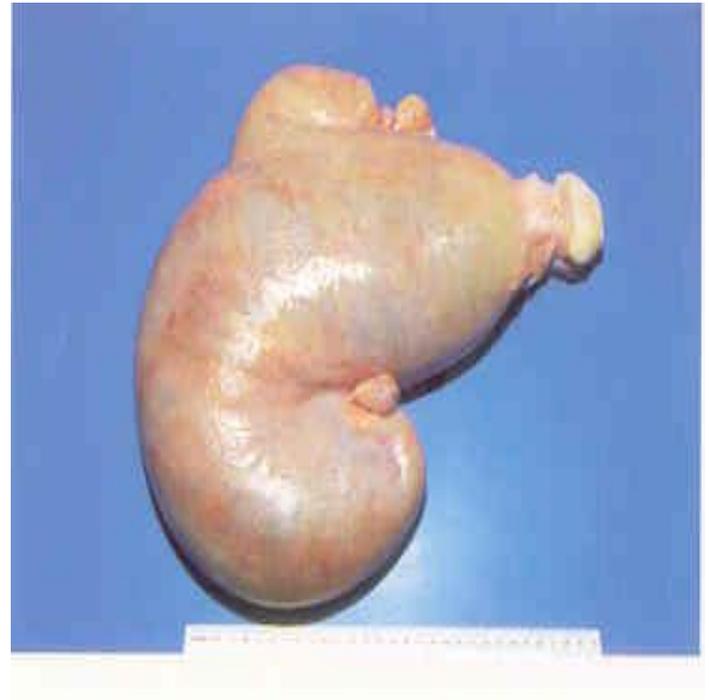
Changes in uterus and its contents

# Changes in uterus and its contents

- Asymmetry of uterine horns (30-50 days)



60-70 days



100-110 days

## Changes in uterus and its contents

- Size of amniotic vesicle
- 35-40 d- shell less egg
- 45-50d- small hen egg
- Beyond 60d- not detectable

# Changes in uterus and its contents

**Slipping of fetal membranes (fincher's technique  
35-90 days)**

**May be appreciated till 130-140 d of gestation**

# Changes in uterus and its contents

- Location of uterus

2<sup>nd</sup> Month - asymmetry, within pelvic cavity

3<sup>rd</sup> month – on pelvic brim, cotyledons palpable

4 – 6 Month – Abdominal cavity - Uterus not palpable

7<sup>th</sup> months – ascending again due to larger fetus

8<sup>th</sup> month - fetal extremities palpable

9<sup>th</sup> month – fetal reflex



Can't diagnose



Diagnose only  
with ultrasound



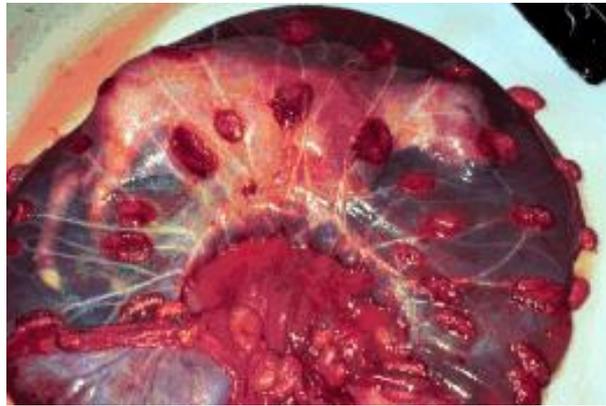
Some fluid one horn,  
membrane slip,  
amniotic vesicle



Fluid, membrane  
slip, amniotic  
vesicle

# Changes in uterus and its contents

- Palpation of placentomes (80 days onward)



# Changes in uterus and its contents

- Palpation of fetus
- The fetus descends out of reach from 3-7 M. You can first feel the fetus at 55-60 days inside the Amniotic Vesicle. To estimate an aborted fetus they are:

Fetal head size	Fetal size	
Soft ball	Large cat	~130-140 days
Tennis ball	Small cat	~110-120 days
Golf ball	rat	~90-100 days
Marble	mouse	~60 days



# Fremitus

- Palpation of middle uterine artery (branch of internal iliac artery) (80-120 d onward)- ↑ed blood supply- whirring/gushing  
size of artery- non-preg- 3-4 mm, preg- 1-1.5 cm



- Fremitus - not a positive sign of pregnancy, but can help.
- At 5 M the artery ipsilateral to gravid horn
- At 6 M both side

# Three positive signs of pregnancy?

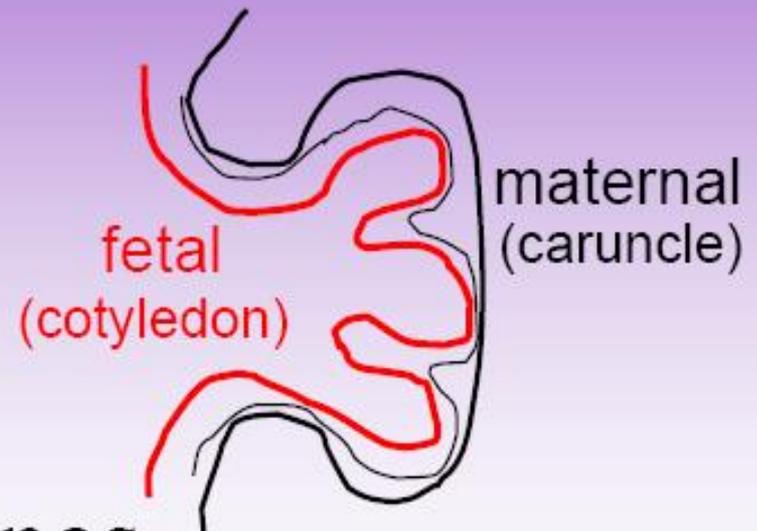
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Things that are pregnancy-specific:

1. Fetus



2. Placentomes



3. Fetal membranes

To confirm <60 day pregnancies

# Differential diagnosis

Urinary bladder

Kidney

Rumen

Pathological conditions



Tumors- uterus (fibroma, leiomyomas), ovary (granulosa cell tumor, lymphocytoma) tumors do not have fluid surrounding them while fetus does have. No fremitus, no membrane slip

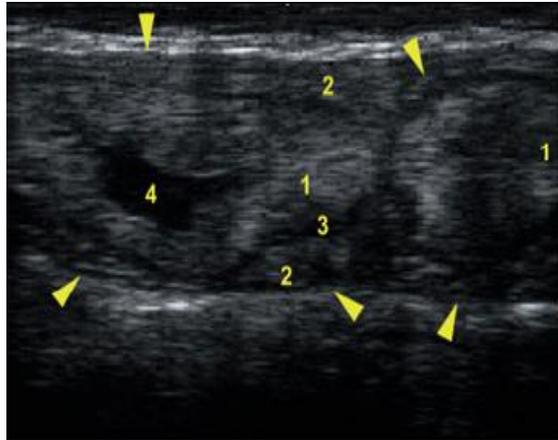
Pyometra-  
Mucometra/hyrometra } leather like consistency of uterus, no asymmetry, no placentomes and fetal bump.

Mummified fetus - absence of fluid, fremitus and slipping of membranes.

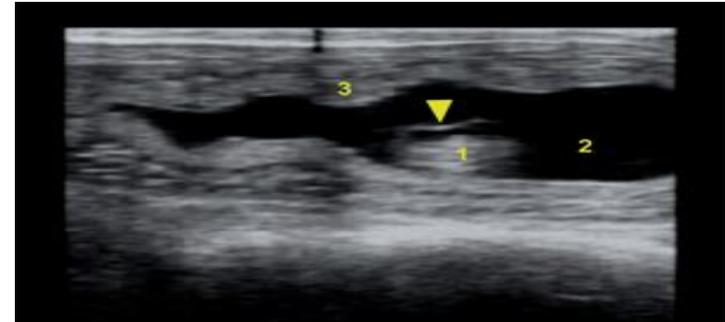
Macerated fetus - crepitating on palpation

# Ultrasonography

## Uterus Day 23

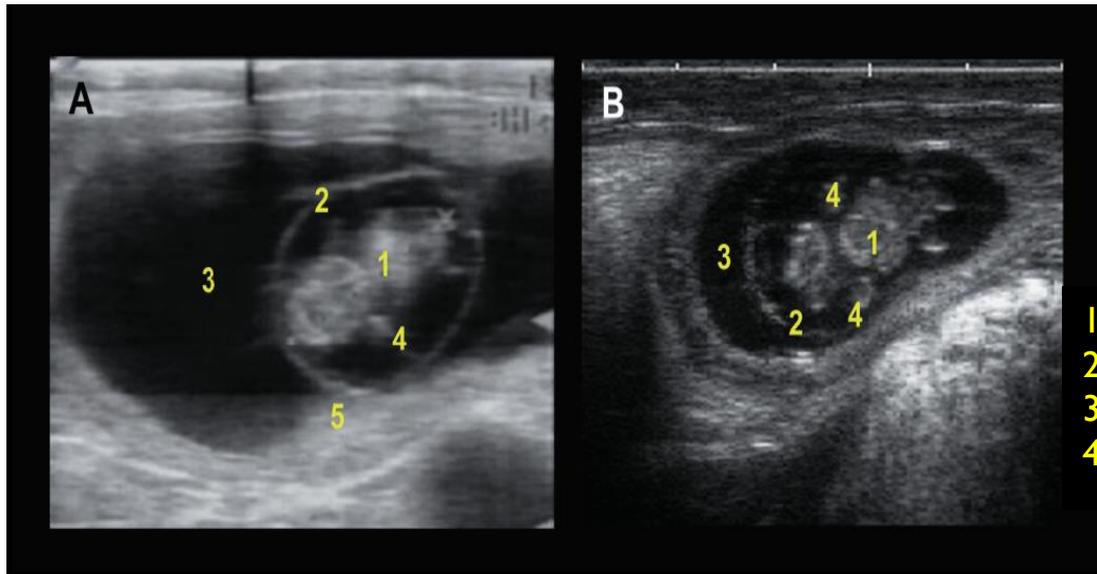


## Uterus Day 28-30



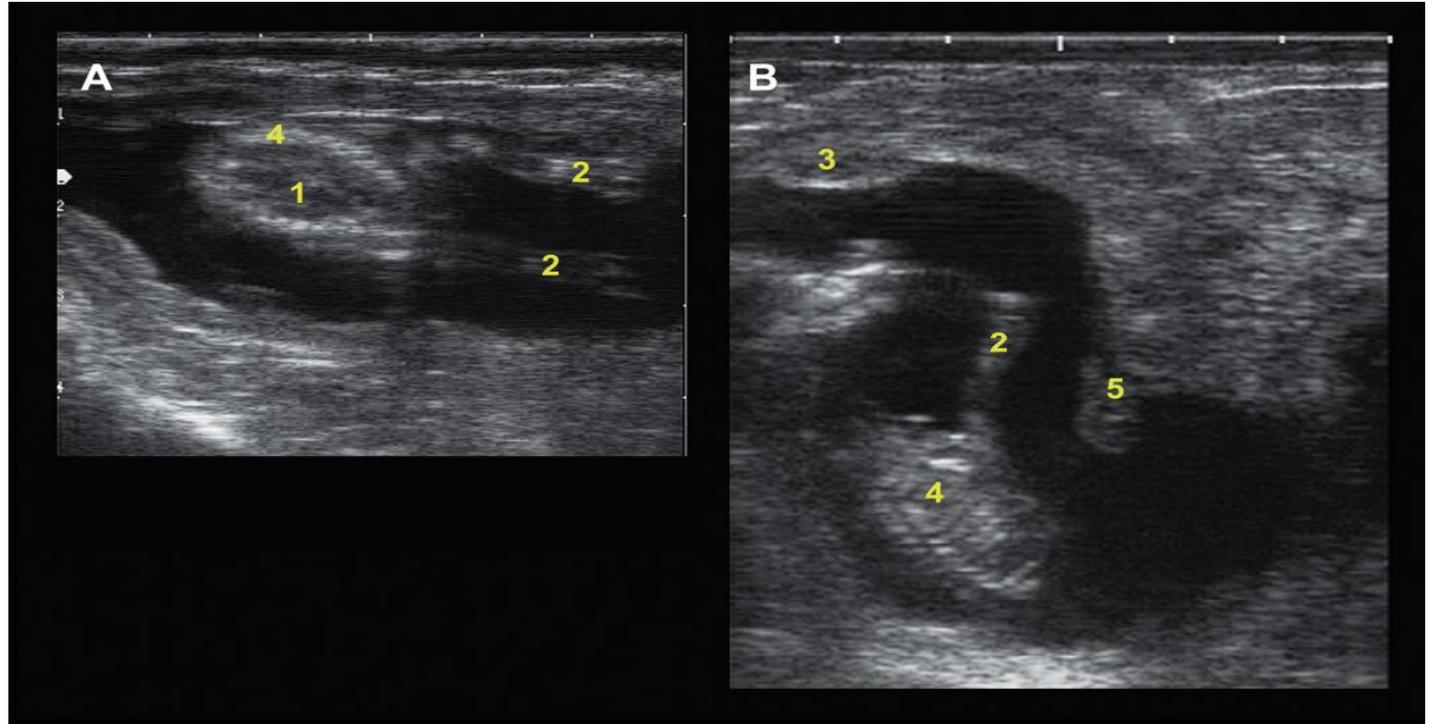
1-embryo  
2- AI fluid  
3- Cotyledons

## Uterus Day 40



1-Embryo  
2- Amniotic membrane  
3- Allantoic fluid  
4- Limbs

- Day 59



# Lab methods

- **Hormones- RIA/ELISA**

P4- blood plasma (>1.0ng/ml) & milk plasma (>11 ng/ml)

False +ve- EED, luteal cyst, Persistent CL

Estrone sulphate- produced by placenta

- milk, urine, plasma

At 72 D of gestation

- **Pregnancy associated proteins- in serum by RIA**

PSPB (from 24D- till parturition)&

PSP-60 (at 28 day)

- **Protein B (bovine pregnancy-specific protein B) (bPSB, bTP-1)**

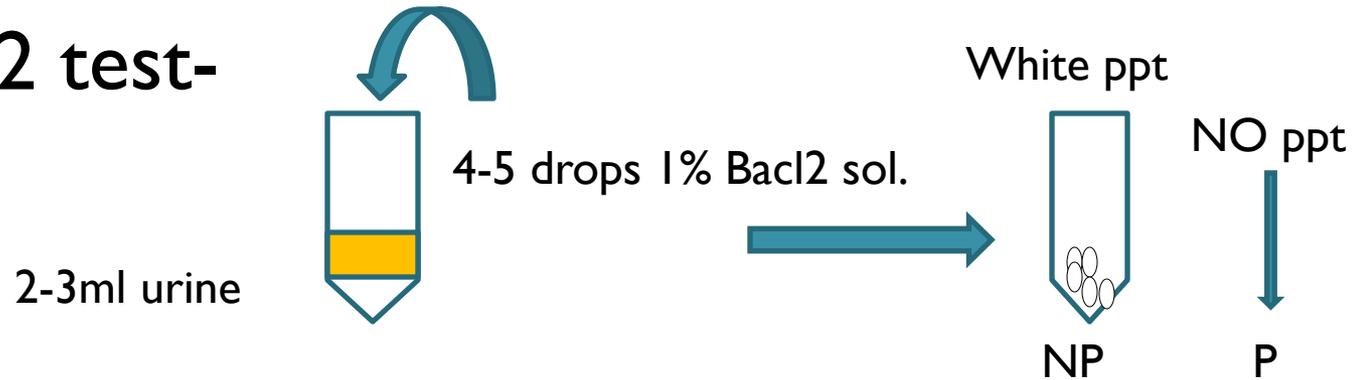
Protein B is secreted by trophoblast cells (binucleate giant cells).

RIA - time consuming and relatively expensive.

- There are false positives early in the post partum.
- No clinical use.

# Chemical tests

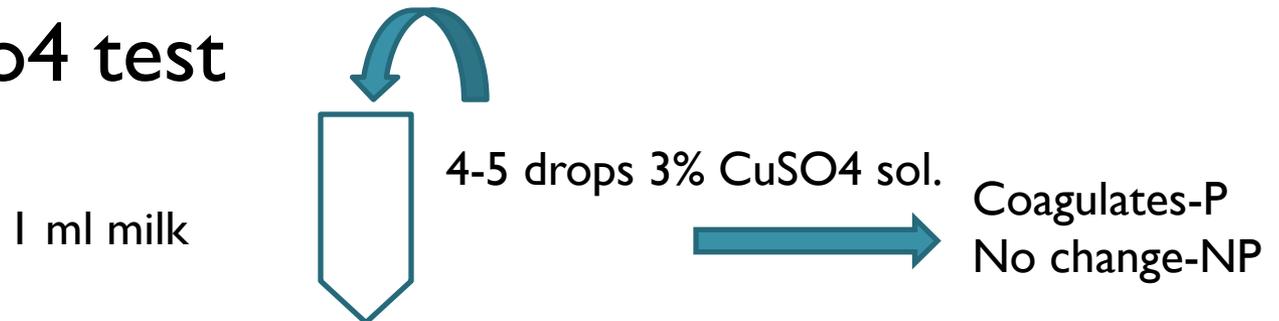
- **Bacl2 test-**



- **Alcohol milk test-**



- **Cu So4 test**



**All have low accuracy and increased rate of false + and false -ve**

# Sheep & Goat- 148 d-sheep, 150d -goat

**Managemental-** cessation of heat

**increased** abdomen and udder size

**Abdominal ballotment-** on Rt side, from 3.5-4 Mo

**Radiography-** after 75-90 days

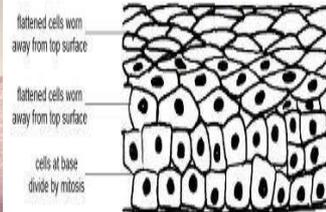
**Ultrasonography-** T/abd, at 60 d, T /rectal- 20-22d

**Vaginal biopsy-** histological exam- 40 d post

**breeding, strat. Squ. Epi-**

**cuboidal cell**

Slide 23 Vagina



**P4 – RIA > 3ng/ml-P, <2ng- NP**

**Protein B-** 7-8 d post mating in blood

**Early pregnancy factors-** within 24 hrs.

# Recto-abdominal method

- On 65-70 d post breeding
- Lubricated rod (0.5-1.5cm dm & 50 cm long) is inserted in through rectum about 30-35 cm
- Put another hand on posterior abdomen
- If pregnant- significant obstruction will be encountered when rod moves side to side or up & down.
- If NP- No obstruction

# Sows - 114 d

**Managemental-** cessation of heat

size & body wt. Increase

**Rectal palpation-** thin, soft ball like fetal unit at the level of cornual bifurcation after 90-100 days

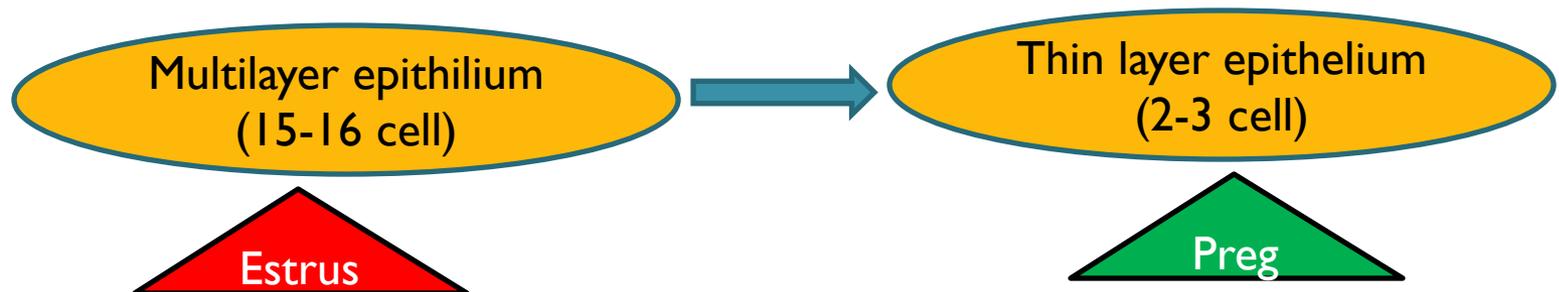
**Fremitus-** after 40 d or more of gestation

**Ultrasonography-** 24 days after breeding

**P4 – RIA** 7 ng/ml-P,

**Estrone SO4-** 26d post mating in blood, urine

**Vaginal biopsy-** at 30-35 d post mating from ant vagina



False + ve- if biopsy taken from Cx

# Bitches- 62 days

## Managemental-

abd size & bd wt. Increase (35 d onward)

Increased teat size (35-45d onwards)

**Abd palpation-** ovoid shape ping-pong ball like str. Of 1.5-3.5 cm dm, at 28-32 d

**Radiography-** after 35-45 days

**Ultrasonography-** T/abd, at 25-28 d onward

**Relaxin assay-** at 20-30 days

# Mare - 340 days

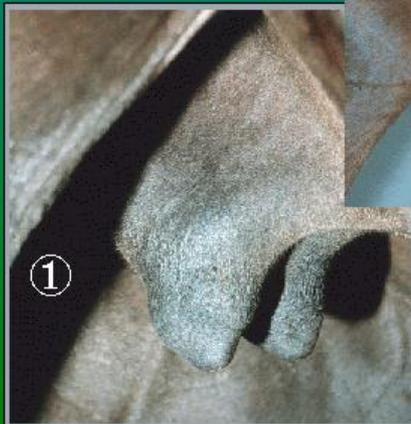
**Managemental-** cessation of heat

abdomen (7-8 m) and udder size (3-4 wks before foaling)

Waxing of teat (few hrs to few days before foaling)

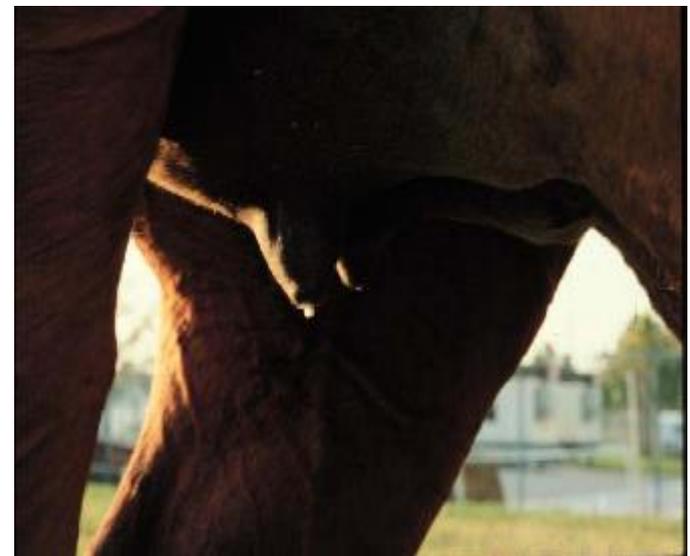
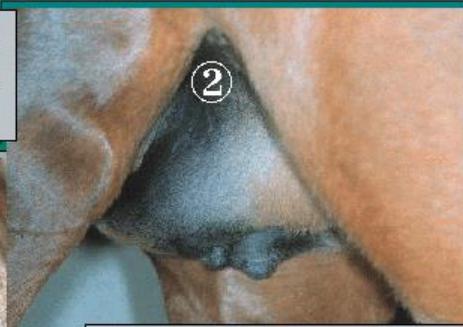
Sweating- few hrs to few days before foaling at flank & elbow

There is obvious udder enlargement as foaling approaches



Compare the udder of a mare at 10 months gestation ①

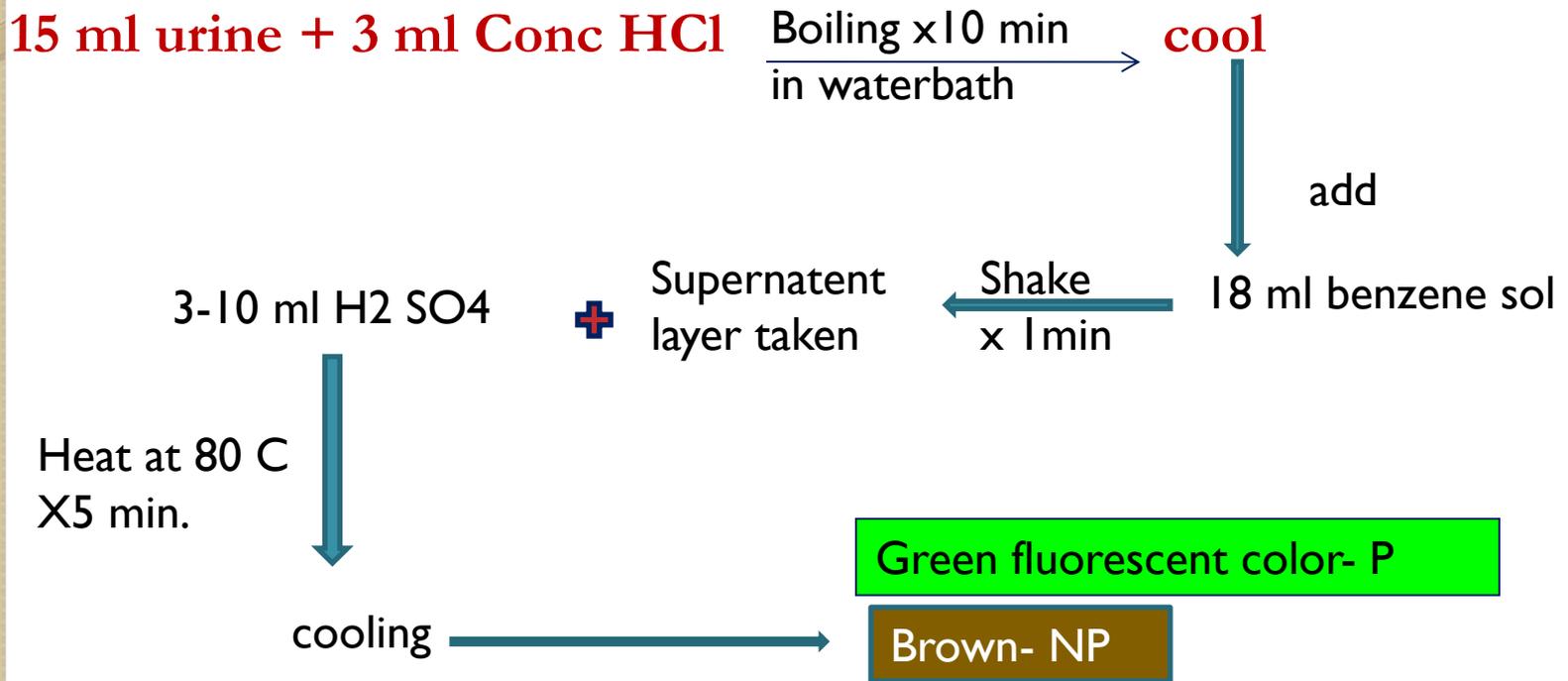
with another, shortly before foaling ②



# Rectal palpation

- D21-28- embryonic vesicle (bulging of 3.5cm),
- Most practical time – 35 days post breeding  
amnion size- golf ball, good ut.muscle tone
- At 42-45d- amnion at the junction of ut horn 5  
cm dm
- At 60 d- amnion-football shaped, 8-10 cm
- Palpation of fetus- from 90-120 days
- Pulse- middle ut artery, utero-ovarian artery- -  
after 150d
- 5-7 m- descends of ut continues
- 7-foaling- fetus palpable

- Ultrasonography- 10-12 d- embryonic vesicle
- Lab methods- chemical test
- **Cuboni test-** (at 150-290 days b/c urinary estrogens)



- P4- RIA
- Estrone So<sub>4</sub>- blood, urine milk- at 40-100 d

# Biological test

- Ascheim-Zondek test- (50-120 days)

Inject 2 ml of serum (collected from mare) I/P

Immature rat (22 d old)

Sacrifice after 72 hrs

Pregnant

Hypertrophy of uterus and haemorrhagic ovaries

Due to presence of PMSG (Secreted from endometrial cups from 40-150 days)

- Toad/Frog test- (50-120 days)

Inject 1 ml of serum (collected from mare) I/P

Toad/ frog

after 5-6 hrs

If sperm present -  
Pregnant

Cloacal washings

**Sperm ejaculated under the effect of PMSG**