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**FOREIGN BODY CAUSING SESAMOID-LIKE  
LAMENESS IN A MULE**  
(With 3 Figures)

By

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جسم غريب يسبب عرج مشابه لإصابة العظام السمسانية

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لقد شخص عرج مشابه لإصابة العظام السمسانية العليا في القائمة الأمامية اليمنى لبغل عمره خمس سنوات . وبالفحص الأشعاعي وجد أن هناك جسم غريب على هيئة خط أبيض يشبه إلى حد كبير عيب من عيوب التصوير الأشعاعي ولكن بمقارنة التصوير الجانبي والأمامي أمكن التأكد من وجود هذا الجسم الغريب الذي يشبه الأبرة . هذا وقد أمكن بالتدخل الجراحي اخراج قطعة سلك بطول حوالي ٢ سم كانت محاطة بنسيج ليفي أسفل العظمة السمسانية اليمنى العليا . وما تقدم يجدر الإشارة أن العرج المحروب بورم في منطقة العظام السمسانية العليا ممكن أن يكون بسبب أجسام غريبة قد التأمت عليها أنسجة الجسم ، كذلك يجب تفرقة الأجسام الغريبة التي على هيئة خط من عيوب التصوير الأشعاعي .

A 5-years-old mule was presented to the clinic with a history of slight degree of lameness in the right forelimb. Sometimes the animal stands bearing weight on the toe of the lame limb.

Clinical examination revealed a painful swollen area on the palmar aspect of the limb at the level of the distal margin of the medial proximal sesamoid bone. Pain was produced when the limb was lifted and the fetlock joint was passively extended.

Radiographic examination showed an artifact-like white line on the lateral projection (Fig. 1) and white dot superimposed by the distal extremity of the large metacarpal bone on the antero-posterior projection (Fig. 2).

Surgery was performed under chloral hydrate narcosis and local infiltration analgesia. The operative site was aseptically prepared. A sign of healed small wound was noticed, from which a fibrous cord extended dorsomedially. About 4 cm longitudinal incision was done to explore that fibrous cord. A piece of wire about 2 cm long

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was enclosed within that fibrous cord. The wire piece and the surrounding fibrous cord was excised. The area was radiographed to ensure total excision of the foreign body (Fig. 3). The wound was closed as usual. The animal was given the prophylactic dose of anti-tetanic serum and postoperative course of antibiotics. The skin sutures were removed 10 days postoperatively.

COMMENT:

Although the painful swelling at the palmar aspect of the fetlock is a sign for sesamoid lameness (ADAMS, 1974 and DIETZ & WIESNER, 1984), sharp foreign bodies may produce similar symptoms.

Many radiographic artifacts (DOUGLAS and WILLIAMSON, 1970; ADAMS, 1974 and TICER, 1984) have to be differentiated from foreign bodies on the X-ray film. Therefore it is absolutely imperative to make more than one projection for the area to be radiographed.

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LEGENDS:

- Fig. 1: The foreign body appears as a radiographic white line artifact below the level of the proximal sesamoid bones.
- Fig. 2: The foreign body appears as a dot superimposed by the distal extremity of the metacarpal bone.
- Fig. 3: The operation site after excision of the foreign body.

