

REPORT ON THE SURGICAL REMOVAL OF 4 EGGS FROM A *LAMPROPELTIS GETULUS CALIFORNIAE* (ALBINO)

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Contents: Introduction - Inspection of the animal - Post-operative report.

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INTRODUCTION

The snake which was treated in this report is a five and a half years old *Lampropeltis getulus californiae*. In the preceding years this snake has had no problems with the laying of her eggs. Copulation was observed on January 21st, 24th and 30th 1993. On March 8th the snake sloughed. The temperature in the terrarium was 28.5°C. On March 21st she laid 6 eggs: the last of these was of an abnormal size. Four more eggs were retained inside the snake. During the course of one week the animal constantly displayed contractions in an attempt to lay the remaining eggs, but this did not succeed spontaneously, and manual massage and assistance also failed to help. The animal became exhausted in the end. The decision was made to intervene surgically.

INSPECTION OF THE ANIMAL

The snake had a length of about 120 cm. It was a rather slim and somewhat thin snake, but it was otherwise in good health. The four eggs that remained behind were clearly visible as large bumps which were clearly spread over the snake's body. A last attempt to manipulate the eggs towards the cloaca did not succeed and was evidently painful for the snake. On March 25th the decision was made to perform a Caesarian section under local anaesthetic.

OPERATIVE REPORT

The snake was attached to a lath with her belly up by means of tape on different parts of her body. The head and neck were kept free and held by the owner. Due to this the female behaved very calmly. Close to the most posterior egg the belly was locally anaesthetised with an injection of Xylocaine 0.5%. An incision of about 3 cm in length was made in the middle and longitudinally through the ventral scales. The right uterus (a snake has two normally), in which the lowest egg was present, was found easily and longitudinally cut on the lowest part of the protuberant egg. Through this incision the egg was carefully removed. We noticed that the wall of the uterus was very thin at the side of the egg, but beneath it the mucous membrane was swollen by oedema. The second egg could be removed through the same incision, but was even larger than the first one. The two other eggs were in the left uterus, so this had to be incised also. In this way the third egg could be removed. The fourth could not be reached or moved and it was therefore necessary to make a second

incision higher up in the left uterus, some centimeters above the other incision. This was done after having mobilised the uterus and the egg to below. After removal of the last egg the uterus was placed back with a small instrument. There was only minimal bleeding. Suturing of the uterus was not necessary, because the incisions in the smooth, muscular tissue closed spontaneously. The wound of the belly wall was sutured with two layers of dissolving thread; Vicryl 3/0 S for the muscular layer and Vicryl 4/0 S for the intercutane sutures. Externally there were no sutures made.

After spraying the wound with Nobecutane (plastic skin) steristrips were placed transversely over the wound.

POST-OPERATIVE REPORT

The snake was immediately taken home by her owner. The next day the snake eagerly ate a mouse, but by way of precaution it was advised to wait at least a week before feeding the snake again. Drinking was allowed. The wound healed without problems. At present the snake is in good condition and has a good appetite. Between the gestation and May 1st the snake ate 21 mice. The first slough after the operation on April 4th went without problems. The slough however tore at the operative scar and a small piece of slough was removed with a pair of tweezers. On May 31st the slough went normally and in one piece.

The eggs were, considering the size of the snake, fairly large to very large. They looked normal externally but were not saved for further incubation.

Translation: Fons Sleijpen.