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**CASE REPORT: MANUAL REPOSITIONING MANAGEMENT OF UTERINE PROLAPSE IN CATTLE AT SMALLHOLDER FARMS IN LIMAPULUH KOTA REGENCY**

**Laporan Kasus: Penanganan Prolapsus Uteri dengan Reposisi Manual pada Sapi di Peternakan Rakyat Kabupaten Limapuluh Kota**

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**Abstract**

Uterine prolapse is a reproductive disorder in cattle that requires prompt and effective management to ensure survival, recovery, and preservation of fertility. Uterine prolapse is defined as the protrusion of the uterus through the vulva, exposing the mucosal surface. This case report describes the occurrence of uterine prolapse in a cow and its therapeutic management. Clinical examination revealed that the uterus was protruding outside the pelvic cavity, accompanied by weakness and anorexia. The patient was diagnosed with a uterine prolapse. The treatment consisted of manual uterine repositioning, followed by vulvar suturing. Supportive therapy, including antibiotics, multivitamins, calcium supplementation, and topical antiseptics, was administered for seven days. The cow showed favorable recovery and complete resolution of the uterine prolapse. The prevention of recurrent uterine prolapse in cattle includes adequate uterine repositioning, temporary vulvar suturing, correction of postpartum metabolic disorders, appropriate nutritional management, and close postpartum monitoring.

Keywords: Cow, Prolapse, Repositioning, Uterus

**Abstrak**

Prolapsus uteri salah satu gangguan pada reproduksi sapi yang memerlukan penanganan cepat dan efektif guna memastikan kelangsungan hidup, pemulihan dan kesuburan sapi yang

mengalaminya. Prolapsus uteri merupakan penonjolan uterus dari vulva dengan permukaan mukosa terbuka. Laporan kasus ini bertujuan untuk melaporkan kejadian kasus prolapsus uteri pada sapi dan terapinya. Berdasarkan gejala klinis diketahui uterus sudah keluar dari rongga, lemas dan anoreksia. Hasil diagnosa pasien mengalami prolapsus uteri. Penanganan yang dilakukan yaitu dengan reposisi uterus dilanjutkan penjahitan pada bagian vulva. Terapi yang diberikan yaitu antibiotik, multivitamin, kalsium dan antiseptik selama 7 hari dan sapi didapatkan sembuh dari prolapsus uteri. Pencegahan prolapsus uteri berulang pada sapi meliputi reposisi uterus yang adekuat, pemasangan jahitan vulva sementara, koreksi gangguan metabolik pascapartus, serta manajemen nutrisi dan pemantauan intensif pascamelahirkan.

Kata kunci: Prolapsus, Reposisi, Sapi, Uteri, Sapi

## INTRODUCTION

Uterine prolapse is a change in the position of the uterus, which protrudes through the vagina and hangs in the vulva. Uterine prolapse is usually caused by prolonged dystocia, excessive fetal size, fetal traction, retained fetal membranes (placental retention), chronic disease, and paresis. According to Mudji and Siswanto (2014), uterine prolapse refers to a condition in which the uterus protrudes from the vulva, with the mucosa on the outside of the uterine wall and the serosa on the inside. This condition typically occurs after normal delivery. Uterine prolapse is a reproductive disorder that can lead to reduced fertility, infertility, reproductive tract infections, anemia due to excessive blood loss, and even death if not treated promptly, thereby causing significant losses for livestock farmers.

The prevalence of uterine prolapse in Indonesia averages 4.3% of the population of female cows that have given birth, and occurs more frequently in beef cattle than in dairy cattle. The incidence rate of uterine prolapse in cattle farms is 0.5-1% and commonly occurs after calving, specifically in the third stage (Luthfi, 2018). Cases of uterine prolapse must be treated immediately because if left untreated, it will worsen damage to the reproductive tract organs and can cause death in the animal. The recovery rate for this condition is very high if treated promptly, exceeding 64.7%, with a conception rate after therapy exceeding 80.5% (Prayoga *et al.*, 2023). This article aims to report on the management of uterine prolapse cases and the appropriate therapy.

## RESEARCH METHODS

### Animal Case

The animal in this case was a female cow (*Bos taurus*). On October 3, 2025, the cow gave birth. However, during the postpartum period, uterine prolapse was observed, characterized by the protrusion of the uterus through the vaginal canal. The uterine prolapse was a recurrence in the same patient. The treatment involved manual uterine repositioning by reinserting the uterus into the pelvic cavity through the vagina.

### Physical Examination

Based on the physical examination results, severe uterine prolapse was identified. The uterus was edematous and hyperemic, and its surface was contaminated with feces.

### Supporting Examination

Based on the physical examination, the case of uterine prolapse was categorized as an emergency; therefore, no additional supporting examinations were performed, and immediate treatment was performed.

## Diagnosis and Management

Based on the results of the anamnesis and clinical examination, the cow was diagnosed with uterine prolapse. The initial management focused on ensuring that the cow had ceased to strain and was calm. The prolapsed uterus was thoroughly cleaned using clean running water and 0.9% NaCl solution, and ice packs were applied around the anus and vulva to reduce the edema. The uterus was then manually repositioned into the abdominal cavity and secured with simple sutures on the vulva using silk sutures.

Following repositioning, the cow was administered Vet-Oxy LA (10 mL/kg body weight), Vigantol E (5 mL/kg body weight), and Injectamin (5 mL/kg body weight) via intramuscular injection. Calcidex Plus was administered subcutaneously at a dose of 15 mL/kg body weight, and Limoxin spray and vaseline gel were applied topically. Antibiotics and vitamins were administered for seven days, and the animals were observed twice daily to ensure that the sutures remained intact and to monitor for recurrent straining. Seven days post-treatment, the vulvar sutures were dry, and the cows no longer exhibited straining.

## RESULTS AND DISCUSSION

### Results

Based on the medical history, the cow was diagnosed with postpartum uterine prolapse, characterized by the protrusion of the uterus through the vagina. This was a recurring event in the same patient. Physical examination revealed severe uterine prolapse, with the uterus appearing edematous, hyperemic, and contaminated with feces on its surface (Figure 1). The cow was diagnosed with a uterine prolapse.

### Discussion

Uterine prolapse is a condition in which the uterus protrudes through the vagina and hangs in the vulva (Patil, 2014). Factors that contribute to uterine prolapse in cows include dystocia or difficulty in calving, which causes injury or irritation to the external reproductive tract, excessive straining during calving, and excessive pressure when pulling the fetus out. Other factors that can cause uterine prolapse include insufficient nutrition during pregnancy, which causes the uterine ligaments to become loose and weak and unable to quickly return to their pre-pregnancy position. Other predisposing factors for uterine prolapse include a weak uterus and excessive relaxation of the pelvic area (Ward & Powell, 2008).

The clinical symptoms observed in this case were uterine prolapse, edema, and hyperemia. Uterine prolapse is a recurrent event in the same individual. This is consistent with the statement by Al-Hamedawi Talib *et al.* (2014), that the clinical symptoms when livestock experience uterine prolapse are that the livestock usually lie down but can also stand with the uterus hanging on their hind legs. The fetal membrane or uterine mucosa is open and can be contaminated with feces, straw, dirt or blood clots. The uterus can enlarge, especially if this condition has lasted for 4-6 hours or more. Cows that have previously experienced uterine prolapse are at a high risk of recurrent prolapse; therefore, selective culling is often recommended in recurrent cases.

The management of uterine prolapse in this case involved thorough washing of the protruding uterus with clean water to remove adherent contaminants. Subsequently, a 0.9% NaCl solution was applied and ice packs were placed on the exposed mucosa to reduce uterine edema. Once the swelling subsided, manual repositioning was performed by gently opening the vulva and gradually returning the uterus from the base to the cervical region closest to the vulva.

After complete repositioning of the uterine mucosa, simple sutures were placed on the vulva using silk sutures. The cow was administered the antibiotic Vet-Oxy LA at a dose of 10 mL/kg body weight to prevent infection at the prolapsed site. Supportive therapy included vitamin E (Vigantol® E) at a dose of 5 mL/kg body weight to promote uterine tissue healing, reduce oxidative stress, and enhance the immune response after uterine repositioning. Injectamin® was also administered intramuscularly at a dose of 5 mL/kg body weight as supportive therapy to improve energy metabolism, restore postpartum systemic condition, and assist in the recovery of uterine muscle tone after repositioning.

Additionally, Calcidex Plus was administered subcutaneously at a dose of 15 mL/kg body weight to correct postpartum hypocalcemia, enhance myometrial contractility, and prevent recurrent uterine prolapse following repositioning. Limoxin® spray and Vaseline® gel were applied topically; Limoxin® spray was used as a local therapy to suppress bacterial contamination, prevent secondary infection, and support tissue healing, while Vaseline® gel served as a topical lubricant to reduce friction, prevent mucosal trauma, and maintain uterine tissue moisture during the manual repositioning process. Seven days post-treatment, the vulvar sutures were dry, and the cow no longer exhibited any straining (Figure 2).

## CONCLUSION AND SUGGESTIONS

### Conclusion

Based on the results of the anamnesis and physical examination, it can be concluded that the cow was diagnosed with uterine prolapse. After manual repositioning and administration of antibiotics, multivitamins, calcium, and antiseptics for seven days, the cow recovered from uterine prolapse.

### Suggestions

The prevention of recurrent uterine prolapse in cows includes adequate uterine repositioning, temporary vulvar suturing, correction of postpartum metabolic disorders, nutritional management, and intensive postpartum monitoring.

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### Figures



Figure 1. Prolapsed uterus hanging between the hind limbs of the cow

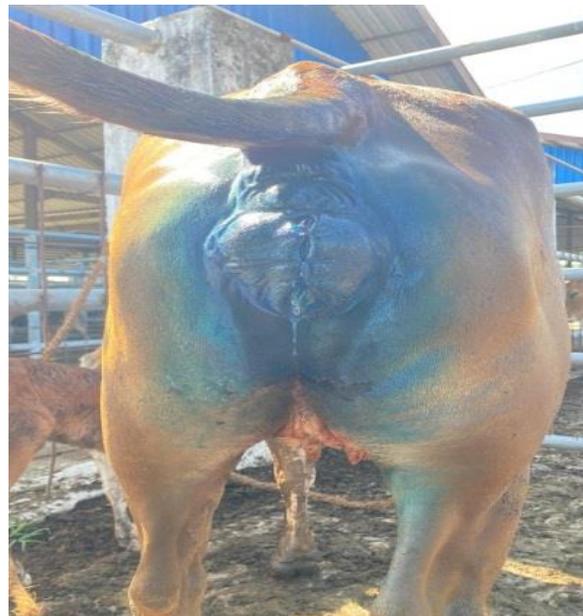


Figure 2. Condition of the cow after treatment