ABSTRACTS

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RESULTS: While all queens treated with ALI terminated pregnancy (6/6, 100%), only one treated with CLO (1/7, 14%) and none with PLA (0/6, 0%) terminated pregnancy (P<0.001). The interval from treatment to pregnancy termination was similar between ALI and CLO treated queens (4.4±1.6 d, P>0.39). The average days of gestation for queens with normal pregnancy were similar in PLA and CLO groups (65.1±0.3 d, P>0.54). The number of fetuses at the beginning of the study and the interval from parturition or termination of pregnancy to the next estrus were similar among queens in all treatment groups (3.4±0.5, P>0.74; 39.4±7.8 d, P>0.89; respectively). The vulvar discharge score was similar between queen that aborted in ALI and CLO groups (3.1±0.7, P=0.57). On the day of treatment initiation, there were no significant differences in gestational sac and fetal measurements between treatments (P>0.05). The gestational sac length, antero-posterior and width, the gestational sac volume and diameter, and the crown-rump length, biparietal and thoracic diameter; increased at a different rate between treatments across days of gestation (interaction of treatment by day of gestation; P<0.05). Additionally, PLA treated animals had a higher rate of increase of gestational sac and fetal measurements compared to ALI and CLO treated animals (P<0.05). Conversely, although in both groups, gestational sac and fetal measurements increased after treatment (P<0.05); there were no significant differences between gestational sac and fetal
measurements between ALI and CLO treated animals (P>0.05). Furthermore, in the PLA group, the gestational sac and fetal measurements increased at a higher rate compared to the CLO group (P<0.05). After CLO administration, animals showed vomiting and depression for 30 minutes. To the contrary, no side effects were observed in the animals in the ALI group.

Whereas aglepristone was effective to induce abortion, cloprostenol was not effective to induce abortion in queens at 35-38 d of pregnancy. These results are in agreement with previous studies that showed aglepristone effective to induce abortion in the queen (2); however, to our knowledge this is the first study to report the lack of efficacy of cloprostenol to induce abortion at 35-38 days of pregnancy. This lack of efficacy could be explained by having used a dose too low to induce luteolysis or by the role of the placenta to support the pregnancy (5)

CONCLUSION: The results from this study indicate that aglepristone is effective but cloprostenol is not effective to induce abortion in queens at 35-38 days of pregnancy. Whether an alternative treatment plan that includes lower and repeated daily and increasing doses of cloprostenol to reduce side effects is effective to terminate pregnancy in the queen needs further investigation.

(1) Erünal-Maral N, Aslan S, findik M, Yüksel N, Handler Johannes, Arbeiter K. Induction of abortion in queens by administration of cabergoline (Galastop™) solely or in combination with PGF2α analogue Alfaprostol (Gabbrostim™). Theriogenology 2004; 61:1471-1475.