

PHYSIOLOGICAL PREGNANCY IN A TIGER AFFECTED BY ENDOMETRITIS AND BENIGN MESENCHYMAL NEOPLASM

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In large felids, uncomplicated endometritis and benign mesenchymal uterine tumours usually represent post-mortem findings. These pathologies generally remain clinically asymptomatic, and their impact on reproductive outcome and maternal care is unknown.

A 13-year-old female tiger (*Panthera tigris*) was evaluated by a team of veterinarians from the University of Padova for abnormal behaviour after parturition. The animal spontaneously gave birth to a healthy male cub of 1.460 kg, but after three hours of normal parental care, she showed careless about the cub, occasional abdominal contractions, excessive self-licking and restlessness.

After 10 hours of continuous observation, the tiger was anaesthetised for a complete clinical evaluation. The physical examination was unremarkable, but a vaginal bloody/mucous discharge with no obstruction of the birth canal was noted. Abdominal ultrasound revealed an enlarged left uterine horn with heterogeneous echogenicity. Blood analysis showed moderate neutrophilia and leucocytosis. Differential diagnoses included placental retention, uterine inflammation/infection, neoplasia.

The tiger was transferred to the Veterinary Teaching Hospital where the explorative laparotomy and the ovario-hysterectomy were performed. The uterine horns appeared asymmetric and two nodular lesions of 1.5-cm-diameter were observed on the left horn. Histological assessment indicated the presence of a multifocal, subacute, moderate neutrophilic endometritis in both horns associated with diffuse, severe oedema. The nodules were consistent with a mesenchymal benign neoplasia.

No relevant complication was observed in the following postoperative period and the cub was successfully hand raised.

To the best of our knowledge, no report describes the birth of a healthy cub from a tiger affected by endometritis and neoplasia. Considering the normal maternal care observed in the previous twin-pregnancies in this animal, we cannot exclude that the uterine affection caused her abnormal behaviour in this case. Therefore, careful observation of the mother in the post-partum period is always strongly recommended.