Association between endometrial cytology and uterine ultrasound findings in postpartum dairy cows M. Colazo, A. Dourey, P. Ponce-Barajas and D. Ambrose.





 To investigate the association between endometrial cytology and uterine ultrasound findings, and their effect on pregnancy.

Approach

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- A cytological sample was obtained from the endometrium, using a modified cytobrush, smears prepared, stained and % of polymorphonuclear cells (PMN) assessed (Fig. 1). 75% of primiparous and 30% of multiparous cows classified as high PMN.
Cumulative pregnancy at 270 d tended to be higher in high PMN multiparous cows (80 vs 58%).



- Quantity of uterine fluid determined by transrectal ultrasound (U/S; Fig. 2).

- Interval from calving to first ovulation and pregnancy status was also determined by U/S.
- Cows were grouped as having low (<8%) or high (>8%) PMN count.





Fig. 3. Positive association between the amount of uterine fluid and percentage of polymorphonuclear cells (PMN). The regression line was y = 13.8 + 3.5x (r=0.41; P<0.01).



Fig. 2. Ultrasound images of the uterine lumen (black arrows)

endometrial cells and polymorphonuclear cells (PMN). Samples with, a single endometrial cell and several PMN (A), predominantly endometrial cells and no PMN (B), few endometrial cells surrounded by clusters of PMN (C) or PMN only (D). depicting the three categories of uterine fluid based on lumen diameter (dia): no fluid, dia < 1 mm (A); small volume of fluid, dia 1-5 mm (B); large volume of fluid, dia > 5 mm (C). Scale bar = 10 mm. Fig. 4. Interaction between parity and PMN on the interval to first ovulation. Primiparous cows of the high PMN group had a longer (P<0.01) mean interval to ovulation (48.6 ± 3.6 d) than those of the low PMN group (27.8 ± 1.8 d). The corresponding intervals for multiparous cows of high and low PMN groups were 39.0 ± 6.5 and 29.4 ± 3.2 d, respectively (P>0.05).

Take Home Message

• Combining transrectal ultrasonography with endometrial cytology in early postpartum has diagnostic valued in the assessment of uterine inflammation.

• Future studies should focus in the relationship between ultrasound findings, parity and fertility

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