

Preparation for the Foaling Season

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Length of Gestation

The length of gestation ranges from 315-365 days. Each mare has an individual gestation period, depending on breed and season. Check her previous gestation length to get an idea of when she will foal this year.

Foaling Stages

While there are three stages of labour, the important point is to ensure rapid delivery of the foal after the water has broken. Once the water breaks, delivery of the foal should progress at a rapid rate; if after a few minutes no foal is seen or if the foal is stuck for more than 15 minutes in any one spot, CALL FOR HELP IMMEDIATELY.

The Mare

- Pregnant mares should be on a feed supplement made for broodmares during the last three months of gestation.
- If there is any question about whether a mare is in foal, now is the time to have her examined. If she is not in foal, she can be rebred early.
- Mares should be vaccinated with tetanus toxoid one month prior to foaling. This will boost the colostral antibodies and give the foal that successfully absorbs adequate colostrum, immunity from tetanus for up to 7 months. Strangles can also be included if the mare is going to a stud where there are mares coming from interstate.
- Do you know if your mare has a Caslick (sutured vulvar lips)? If she does, this will need to be opened 30 days prior to the due date, sooner if the mare exhibits signs of early foaling.
- It is advisable to deworm the mare within a few days either side of foaling, (usually the day of) to prevent transfer of worms via the colostrum and decrease the severity of foal heat diarrhoea. The product of choice is any of the ivermectins.
- Prior to foaling, the mare's udder should be washed and the dirt between the udders removed. A simple generic soap is advisable.
- Any mare showing a vaginal discharge should be examined. Mild uterine infections can be treated and some foals can be saved with appropriate therapy.
- Water hardness strips can be used to predict the time of birth.
- Handling a touchy mare can help with a maiden mare's first foal. However, do not strip colostrum before birth, unless it is prematurely dripping. If the mare has very little mammary development prior to foaling, it is advised that you call us so we can try to have colostrum on hand. Alternatively, you can administer a product to boost milk and colostrum production before or immediately after foaling.

Colostrum

In order to keep our colostrum supply adequate, if you have a mare that has a dead foal or aborts and she has colostrum, it is advisable to strip out the colostrum, filter it and then freeze it. We will be happy to do this for you and we also store the colostrum. We try to collect a small amount, approximately 100mls, from all mares that foal and "bank" it for mares that don't have adequate colostrum, or for mares that run their colostrum out prior to foaling. If your mare is dripping colostrum prior to birthing, you can strip the colostrum and refrigerate it. We can then administer the colostrum to the foal via a nasogastric tube shortly after foaling (within 12 hours post-foaling).

The Placenta

The placenta should be expelled in about 6 hours and it is important that the placenta is intact. If unsure, bag and refrigerate it and we can examine it during the post foaling exam. If it is retained, the mares can become quite ill from septicaemia. It can be advisable to tie the membranes in a knot, using the green glove, above the mare's hocks to prevent contamination from dirt and the birthing process in general. Do not leave loose ends that the foal can touch. It is important to remember that a retained placenta is an EMERGENCY if it is not expelled and intact, within 6 hours.

The Foal Is Born

If you are not present for the foaling, do not apply the umbilical clamp when you first see it as it is too late.

The healthy foal will nurse frequently, up to 7 times an hour. After nursing, they usually sleep, laying down, for an extended period. Monitor the times that the foal is born, placenta is passed, foal stands, nurses, urinates, and defecates. If the foal is not standing and drinking within 3-4 hours, it will need assistance. It is important that the foal receives an appropriate amount of colostrum, within 12 hours of delivery. It is most efficient to administer via a stomach tube, by a veterinarian, if the foal is not nursing adequately. It is also important to dip the umbilical stump in either chlorhexidine or Betadine solution when the cord is severed and then 3 or 4 more times during the day.

Observe the foal

It is important to observe your foal. Redness on the whites of the eye, or inside the ear can mean the foal is septic (sick). We have tried to describe a few problems that you may encounter with foals. Entropions are eye lids that roll in and can scratch the cornea. These need veterinary attention and are usually self limiting. As the foal is nursing, make sure it is actually attaching and getting milk. This is often misjudged. The foal should be observed for milk coming out the nose while feeding. This would indicate a cleft palate. At 12 hours or more, the foal can be tested for adequate colostrum absorption. This can be done in a routine post foaling examination. It is vital that all foals get adequate colostrum and if this has not occurred, the foal needs to have a plasma transfusion to avoid fatal infections.

Other common problems are limb related. The legs may be contracted, too relaxed or deviated. These should be dealt with soon, but often confinement will be indicated. Yellow gums may indicate neonatal isoerythrolysis in which there is an incompatibility between the red blood cells of the foal and the antibodies in the colostrum of the mare. This disease causes the foals RBCs to breakdown, leading to anaemia and jaundice. Teeth grinding is often a sign of gastric ulceration. Diarrhoea can cause the foal to become rapidly dehydrated. A large number of foals can develop diarrhoea within the first few months of life and it is still a potentially critical illness.

What to do

In the event your foal is showing any sort of abnormal behaviour, or is showing clinical signs of disease eg lameness, diarrhoea, **act sooner rather than later**. A foal, as any newborn, can become very sick very quickly. Close observation is the key in detecting any early subtle signs of disease or behavioural abnormalities.

Please call the morning after the foal is born, if everything is normal post-foaling, in order to schedule the post foaling exam and IgG collection. If there are any problems during or after the foaling, please call us for assistance.