

CANBERRA Equine HOSPITAL

The Expectant Mare and Foaling



The expected birth of a foal from a favourite mare is an exciting but worrying time for many horse owners. Ideally, help and advice should be sought from your veterinarian or someone with experience in foaling mares, in good time before the event. It is most important to know what is 'normal' both in terms of the foaling process and how to expect the foal to behave once born.

BASICS

Mares tend to prefer foaling at night in privacy and seem to have some control over the timing of their foaling. Being able to observe from afar or discretely is the best way to make her at ease. Have your veterinarian's number nearby in case a problem arises or if you have concerns or questions.

ENVIRONMENT: A SAFE PLACE TO FOAL

Mares should be foaled where they can be discretely observed and where help can be easily given if problems arise.

Paddock: A good foaling pasture ideally needs to be clean and free from obstacles. A grass paddock or large yard is ideal for your mare to foal in, horses have been giving birth on the open ranges for many years, and this is still an acceptable choice. There should be no dams as newborn foals have been reported to have drowned.

The fencing of this paddock or yard should have a mesh, like chicken wire, around it as young, uncoordinated foals easily 'slip' through plain wire or post and rail fencing. Ideally the foaling paddock will have been spelled for a minimum of several weeks to reduce worm contamination and to allow a good clean grass cover.

Stabling: If stabling your mare for foaling down, the stable needs to be large with good quality deep straw. Shavings are not good for foaling as they stick to birth fluids and get into the foals nose and other unwanted places. It is best to remove manure and soiled bedding promptly and disinfect between birthing.

PADDOCK MATES

Your mare can run with other horses for most of her gestation provided that her paddock mates are not nasty. Horses are social, herd animals and depend on others for companionship. You do not want to stress her out by completely isolating her so keep other reliable mares with her if possible. Ideally for the last month of gestation your mare should be paddocked with the same horses that she will be paddocked with after foaling. This allows all social hierarchy to be established prior to a vulnerable foal being in the mix. In ideal circumstances paddock companions will be mares rather than geldings and young stock other than foals. When your mare starts showing signs of foaling, then her paddock mate should be moved out to allow her bonding time with the new foal, but kept in a paddock next to her to avoid stress.

GESTATION

The average gestation of mares is 340 days. It is very important to know when your mare is due so that you can be ready for the foaling to occur. Mares, like people, can go into labour earlier than this. Foals that are born more than 10 days earlier than they are due are more vulnerable to disease and infection. They also may lack the development to stand and nurse properly as a normal foal would without assistance. The mare also may have not produced any or enough colostrum (“first milk”) by this stage and therefore it is imperative that you seek veterinary advice or assistance, particularly if the mare has been observed to run any milk from her udder prior to foaling. The same also applies to foals that are delivered after their due date.

THE COUNTDOWN

Mares provide clues that they will soon give birth, this rings true for many cases but please remain flexible and expect surprises.

- 4-6 weeks prior to foaling the mare should be up to date with vaccinations and worm control.
- 2-4 weeks prior to foaling the mares udder begins filling with milk. When your mare is due to foal, her udder will become engorged and very tight. Constant checking of the udder daily is necessary for the last month of gestation. This is best done by the same person as it will give a good indication of any changes and therefore of how far away the mare is to foaling.
- If your mare has a caslick it should be removed 2-4 weeks before her due date, or when she starts exhibiting any of these signs.
- A few days prior to foaling the mares muscles of the vulva and croup relax. The tail head may become more prominent over this time.
- There can be some abdominal swelling/oedema along the midline in the weeks prior to foaling.
- 4-6 days prior to foaling the teats become engorged.
- 1-4 days prior to foaling the mare produces a wax like secretion on her teats, ‘waxing up’. At this stage she should be checked more regularly as she is close to foaling. This occurs commonly, however there are some mares that will not wax up at all.
- The first stage of labour is where the mare becomes anxious and restless, pacing, sweating, kicking at belly, some of these resemble colic and it is still possible for your mare to be experiencing colic. If this behaviour is prolonged for more than an hour or two without progress towards foaling, contact your veterinarian.

SUPERVISION OF MARES

We advise supervising the mare closely during foaling, whilst maintaining enough distance to avoid disturbing the natural foaling process. Ideally mares require checks at least every ½ hour from when she starts displaying early signs of foaling. Do not be afraid to approach the mare more closely if you have any concerns as to her well-being during foaling - she is unlikely to be disturbed by this and it is vital that the foaling is progressing without problems.

You should be prepared, have a first aid kit containing scissors, disinfectant, string, dilute iodine and towels on hand. It is also a good idea to have a torch.

We highly suggest you have your veterinarians number with you when you check your mare. Do not be afraid to call if you have any concerns day or night – a false alarm is far better than delaying a call for assistance.

MONITORING YOUR MARES BEHAVIOUR

The mares behaviour will often dramatically change prior to foaling. Your usually sweet mare may become aggressive towards other horses or even people. The mare should be in a clean grassy area, alone and with a mate nearby.

- They will remain solitary in a herd situation
- The mare will rest for longer periods lying down
- If you notice the mare becoming restless monitor closely

What to look out for:

- Pacing aimlessly back and forth.
- Profuse sweating even if it is not warm weather
- Milk running out from the udder and wax on teats
- Increased respiration
- Returning to the same spot, sometimes lying down
- Looking at the abdomen
- Tail swishing or tail held up
- Intensive grazing

These are all normal indications of a mare getting ready to foal.

COLOSTRUM AND YOUR FOAL

Mares will often drip milk or even a constant stream from their udder close to foaling. If the mare is running milk for more than 24 hours and she is not ready to foal call your veterinarian for advice immediately.

We highly recommend that all foals have a IgG test done by a veterinarian before 24 hours of age. This is an inexpensive, non invasive procedure that is essential to your foals wellbeing.

Colostrum is a thick creamy yellow colour milk compared to the white appearance of normal milk. A newborn foal is entirely dependent on maternal antibodies absorbed following ingestion of colostrum from the mare in the first few hours of life. This provides the best immune protection for any newborn foal. If the colostrum leaks from the udder prior to the foal being born the foal may not receive sufficient colostrum to provide maternal antibodies.

Failure of the passive transfer of maternal antibodies puts the foal at significant risk of infectious diseases. Monitoring the success of passive transfer by measuring levels of IgG (*Immuno gamma globulin*) in the blood of neonatal foals is critical if early intervention and treatment is required

CASLICKS, WHAT ARE THEY?

Caslick is a procedure performed by a veterinarian that involves suturing closed the upper part of the vulva. This is most commonly practiced on mares with undesirable conformation of the genital area. It is believed that this practice prevents manure and air being 'sucked in' to the vagina which in turn may compromise the foal's healthy development. If you purchased your mare in foal it is a good idea to have a veterinarian check for a caslick as this can be disastrous for a foaling mare, due to the foal tearing through the smaller opening.

Stages of a mare foaling

First Stage Labour:

- During the early stages of labour, it is not unusual for the mare to get up and down several times. She is typically repositioning the foal in the birth canal, or may just be plain uncomfortable!



- Foaling can be a test of patience. Mares have even been known to remain in this stage for several hours. Monitoring is recommended, (keeping your distance) and if in doubt, consult your vet!
- This stage ends when the mare ‘breaks water’



- Biting at the flanks or looking at her abdomen can appear to be similar to the signs of colic. Mares will also urinate frequently during this stage as there is a huge pressure on the mares bladder.
- Here the mare is 'nesting'. She has returned to this place several times in the last few hours to lay down.



- Within 20 minutes of the passage of the allantoic fluid, the white amniotic membrane should become visible, it should be a white/ grey in colour. If at this stage you notice the bag to be red as opposed to white call a veterinarian immediately. This is called a 'red bag' delivery and is a sign that the normal site of rupture is too thick and the mare is separating her placenta to expel the foal. The foal needs the placenta to be attached to the mare's uterus at this time to allow oxygen to pass across from the mare's blood, i.e. it needs the placenta to 'breathe'.

Second Stage Labor

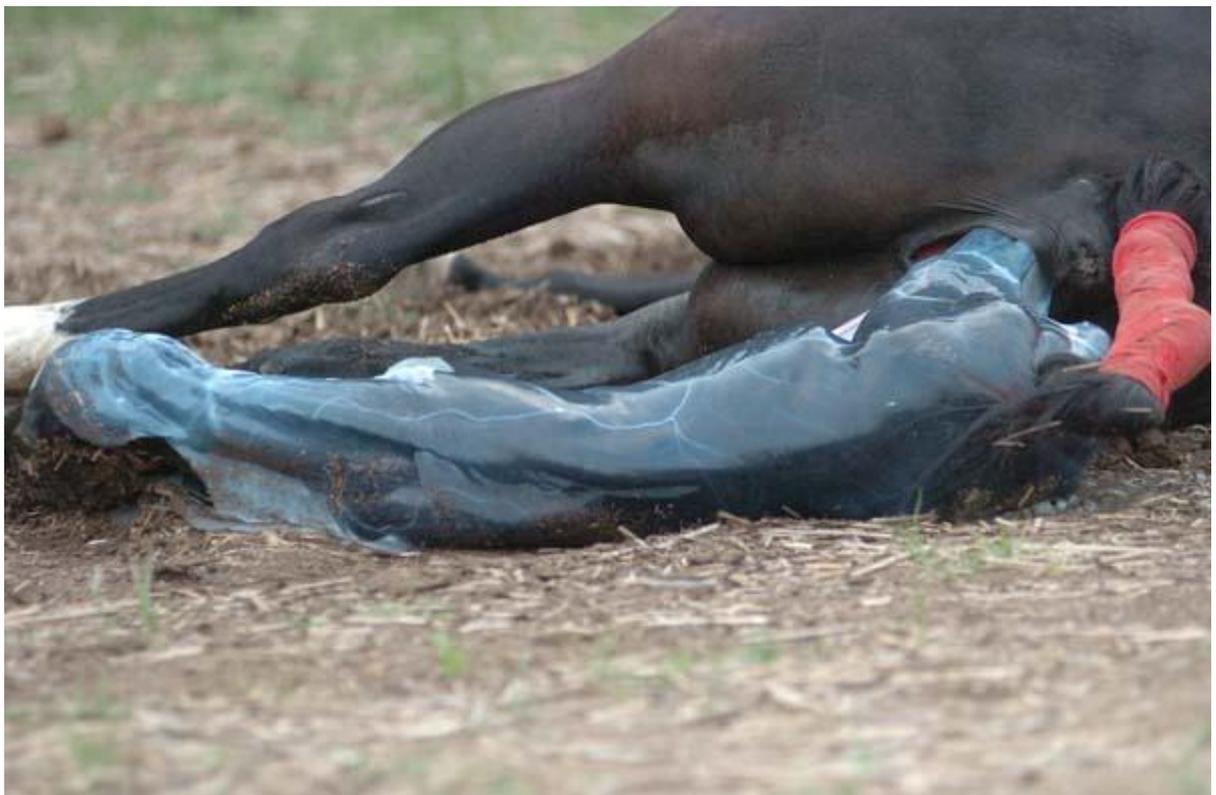


- Within the white membrane, you should now see the appearance of a foot, followed shortly by another foot, and then the nose. Imagining if the mare is standing upright, both feet need to be presented with the bottom of the soles facing the ground and the nose lying on top of the legs, under the mares tail.
- If you have seen the appearance of the white membrane, and no foot within 20 minutes, or a foot and no second foot or the nose within 15 minutes, you will need to call a veterinarian - you may be looking at a dystocia

(malpresentation) situation, and time is of the essence to achieve a healthy outcome for both mare & foal.



- Once the front feet, head and neck are presented in this manner the foaling should continue to progress. Once the mare has passed the foals shoulder the mare may rest for a few seconds before continuing to push the foal out.



- Notice the natural passage of the foal toward the hocks. Once the foal is out of the mare, manual rupture of the amniotic membrane should be performed if it has not naturally occurred otherwise the foal will suffocate. Apart from this

you should have no other interference with mare or foal and allow for bonding time.



- Allow for mare and foal bonding time. Observe from a distance ensuring both mare and foal display normal post foaling behaviours.



Third Stage Labour

- During this stage from after the birth of the foal, the uterus contracts, which can cause the mare discomfort until the placenta is passed. If pain persists for more than an hour or gets progressively worse, call your vet.
- When the mare stands, the placenta should be tied up into a ball so that it does not flap around the mare's hocks and frighten her and she does not walk on it and tear it. The extra weight will help its gradual separation from the mare's uterus.
- When it drops from the mare it should be checked carefully to make sure that it is complete – with only one hole and no obvious signs of breakage or tearing – and none has been retained inside the mare.
- The placenta is normally passed within 1 to 4 hours of foaling. If the placenta has not come away by 4 hours your veterinarian should be called.
- Retained placenta can result in infection of the uterus, toxæmia, laminitis and even death of the mare.

Once foal has been delivered

Do not disturb the mare or attempt to move the foal from back of mare. The foal will continue to receive blood from the mare via umbilicus for several minutes after birth until cord has ruptured.

Premature rupture of the umbilicus will result in blood loss. The mare will break the cord when she stands when she is ready. This may take 10 - 20 minutes.

Normal Parameters of a newborn foal:

1. Foal needs to be sitting up and shaking its head within 30 seconds to 1 minute.
 2. Suck reflex needs to be present by 20 minutes
 3. The foal needs to be attempting to stand by 20 minutes
 4. The foal should be standing and walking by 90 minutes
 5. The foal needs to be suckling from the mare before 150 minutes
 6. The mare should pass her placenta by 4 hours so that the mare is not at risk of infection. Keep the placenta in a bucket if possible for a veterinary examination the next day. This can be done at the clinic if you have any concerns of retained placenta.
- Never try and pull the placenta yourself as this can lead to pieces breaking off and being retained within the uterus leading to infection.
7. The foal needs to pass their first meconium (first black faeces) within 4 hours of birth. You may need to look around in the paddock if there is no evidence on the foal. More meconium should be past over the next 12-24 hours.
 8. The foal should urinate within 4-5 hours
 9. Dilute iodine needs to be applied onto the foals umbilicus (navel) shortly after birth. Repeat application is ideal daily for the following few days to reduce risk of infection.
 10. By 24 hours of age we recommend an assessment of the mare and foal by one of our veterinarians. It's recommended that all newborn foals receive a routine neonatal examination by a veterinarian within the first 24 hours. Early disease detection in both the newborn foal and postpartum mare can be life saving.

The veterinarian will conduct an IgG test on the foal; check the mares placenta as well as a thorough examination of the foal health in case of any potential problems.

At any stage if you are concerned about your mare or foal, please don't hesitate to call our veterinarians, any time, day or night!

Call a Veterinarian if . . .

1. If the mare is straining but nothing appears
2. If the first thing you see coming out of the mares vulva is red to dark red as opposed to grey / white
3. If the foals head and feet are not presented as previously described
4. If the foal is not out within ½ an hour of first appearance
5. If the foal is not breathing properly and sitting up within 30 seconds to 1 minute
6. If the foal is not standing within 90 minutes
7. If the foal appears to have leg issues that prevent it from standing normally
8. If the foal is not drinking from the mare within 150 minutes
9. If the mare shows any signs of pain or colic post foaling
10. If the placenta has not passed from the mare within 4 hours
11. If the foal has not passed any manure within 4 hours, urinated within 4 to 5 hours

Once the foal has stood and is drinking from the mare watch for . . .



12. The foal becoming listless, no longer suckling several times per hour
13. Milk running out of the foals nose
14. The foal having lots of milk on it's face
15. Any signs of leg swelling
16. If the foals bottom eyelashes appear to be turned inwards (so the eyelashes are rubbing at the eye, which can result in corneal ulcers).
17. The mares udder to become engorged indicating that the foal is not suckling adequately.