Management of the Expectant Foaling Mare

Through her pregnancy your mare will continue to require the same care and attention as a ridden horse – suitable exercise, proper nutrition, deworming and vaccinations will help ensure a healthy pregnancy enabling you to look forward to the birth of your foal with greater confidence.
When should a veterinary surgeon examine my mare to confirm pregnancy?
An ultrasound examination may be able to detect the presence of an embryo as early as day 12 after conception. We would encourage this early examination to identify twin pregnancies before the embryos fix to the uterine wall (at approximately days 15/16) as equines can rarely maintain twin pregnancies, resulting in abortion. Early recognition of twins will mean we can try to remove one of the embryos during the ultrasound examination thus allowing the remaining to develop normally. However, owners should be warned this may result in the loss of both early embryos. We would normally do 2 further ultrasound examinations at 21 days, and then at 28 days to confirm continued pregnancy in these twin embryo cases. If there has been only one embryo present at the early scan we would normally re-ultrasound at 28 days.

How should I manage my mare during the first 7 months of her pregnancy?
During this initial period most mares can be treated normally with moderate exercise and normal nutrition. It is only during the last 3 months of pregnancy that if her body condition score drops she may need an increased calorie intake – which is usually made up using forage.
It is important that during pregnancy the mare’s feet are regularly trimmed, her routine dentistry is maintained and her faecal worm egg count is assessed and treatment ensued as necessary.

Vaccinations - Brood mares should be up to date with tetanus and equine influenza vaccinations prior to conceiving. A booster is then given during the last 3 months of pregnancy which will result in antibodies being transferred to the foal via the colostrum that it drinks during the first few hours of life. Equine herpes virus can cause many different types of disease (respiratory infections, neurological symptoms and abortions). Pregnant mares are therefore usually vaccinated for equine herpes at 5, 7, and 9 months of gestation.

Deworming – not all drugs are safe to use in pregnant mares so check the packet carefully or contact your vet for advice. It is important that near to the time of foaling faeces are regularly picked up and that within the last few weeks of pregnancy the mare is dewormed as she will be the main source of worms to the foal.

How long is equine gestation?
The average length of pregnancy in the mare is 338 to 343 days. If your mare still hasn’t foaled by 360 days we would suggest a veterinary examination to confirm that she is still pregnant.

What should I do if I suspect my mare has aborted?
Sadly abortions do occur. If you notice a vaginal discharge, or the mare drips milk during pregnancy she should be examined by your vet. If you find the remains of a placenta or foetus these should be saved for further laboratory analysis.
Where should my mare foal?
Ideally your mare will deliver her foal in an environment that she is used to that is clean and safe. If she is to be stabled we suggest it is at least 14foot x 14foot, with plenty of straw bedding (shavings tend to stick to newborn foals!) and a floor that can be disinfected just prior to expected delivery, or in-between different mares foaling. Most mares will deliver their foals without any complications but we advise that foaling is observed so that you can contact us if you have any concerns. Foaling alarms, or video cameras can be used to help you monitor the mares activity as most tend to foal at night.

Preparing for the birth
Being well prepared and having a good knowledge of what to expect during a normal birth will mean you can remain calm and enjoy the experience. Suggestions for preparation include:

- Save our emergency number on your mobile phone and write it next to the landline in case you need to contact us
- A clock, pen and paper near the stable if she is to deliver inside is useful to time the stages of labour as you can lose perception of time in times of stress
- When the first stage of labour is suspected the mare’s tail should be wrapped with a clean tail bandage (ensure it is not too tight nor left on too long)
- Wash the mare’s udder, vulva and hindquarters with water if she has faecal material present
- Ensure there is sufficient straw bedding if she is to foal in a stable

How will I know when birth is impending?
Maiden mares (those that have not had a foal before) tend to be more difficult to assess, while those who have had previous foals often follow a similar pattern of presentation in the days leading up to delivery. Subtle signs that delivery is imminent are softening and flattening of the muscles in the croup, relaxation of the vulva, the tailhead appearing more prominent and visible changes in the position of the foal. The most obvious and reliable signs are:

- The mare’s udder may begin to fill up with milk 2-4 weeks before foaling
- Distension of the teats – this tends to happen in the later stages and most mares will foal during the following week
- Waxing of the teats – this discoloured, waxy discharge is normally noticeable during 1-4 days prior to delivery
- Dripping of milk
- Mares will often become anxious and restless, even appearing colicky – kicking at her tummy, pacing, lying down and getting up, frequently urinating and passing droppings, flank watching and sweating for an hour or so before delivery. This is most likely to be the first stage of labour, but if it is violent or continues for more than an hour you should contact your vet as it may be due to another cause
The 3 stages of labour:

Stage one begins when uterine contractions start and usually lasts 1-2 hours. This often involves restlessness, lying down, getting up and even rolling. During this stage the foal is moved through the cervix and into position in the birth canal – you may be able to see some foetal membranes at the vulva. This stage ends when the foetal membranes break, signalled by a rush of fluid, but this can be difficult to differentiate from urination.

Stage two is the actual delivery of the foal and can happen quite quickly, usually lasting no more than 30 minutes. If you think this stage has been ongoing for more than half an hour, or if there is no significant progress within 15 minutes of the membranes rupturing, you should contact us immediately. Normal presentation of foals is in a diving position with front feet coming first, one slightly ahead of the other (like superman), hooves pointing down and followed by the nose, head, neck, shoulders and hindquarters. If you notice that the hoof soles are pointing up the foal maybe backwards or upside down, or if the foal is in any position other than the diving position, you should contact us immediately.

If at any time during stage 2 you see a red/maroon membrane covering the foal as it emerges you must act immediately as you may need to tear the membrane if it is a “red bag delivery”. You should CALL THE VET STRAIGHT AWAY for advice, as the red membrane may be the mare’s inverted bladder – if you push the bag firmly and feel the foal’s bones inside the membrane you must immediately tear/cut through the membrane as the foal becomes detached from its blood and oxygen supply. By tearing the membranes you expose the foal’s head to the air so that it can breathe. You should also assist the delivery by pulling the foal out as soon as possible. The normal membranes that cover foals is a white, yellow or translucent colour.

Stage 3 involves the expulsion of the placenta. This usually happens within the first few hours. If the membranes have not been passed in 4 hours you should contact us immediately as a retained placenta can cause serious problems including infection and laminitis.

Knowing what to expect during a normal delivery is the key to staying calm during this exciting period, but we would encourage you to contact us sooner rather than later if you have any concerns.

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