

How do I know if my mare is going to foal?

Most mares foal late at night or early in the morning and will normally foal without any assistance 90% of the time. A small proportion of mares may have trouble delivering and require human intervention to ensure the health of both mare and foal. It is best to be present at time of foaling to reduce risk of complications during delivery and call a veterinarian to assist ASAP if required. A foaling alarm is a good investment and can be hired from some vet clinics or foaling alarm companies.

It is important to know an approximate date of foaling as mares can go into labour earlier than expected and you need to be ready for the foaling. The normal gestation (pregnancy period) for a mare is about 340 days, give or take 30 days. An easy way to work out the due date is to take your mares' ovulation or last service date, subtract a month and then add 5-7 days. This will give a good approximation. Foals born greater than 10 days premature are more susceptible to disease and infection, and they may be unable to stand and nurse without assistance. Furthermore, the mare may not have produced enough colostrum at this stage so it is important that veterinary advice is sought for any premature foal.

"BAGGING UP"

Mares generally begin "bagging up" (filling of the udders), two weeks prior to foaling` and become engorged and tight close to foaling, however, there is individual variation and some mares (especially maidens) may 'bag up' closer to time of foaling. We recommend checking your mare's udders daily in the last month of gestation. Any changes should be noted and will give an idea of how close your mare is to foaling.

"WAXING UP"

A wax like secretion can be seen on the ends of mare's teats up to three days prior to foaling. This "waxing up" is a sign that the mare is very close to foaling. We recommend more regular checks (day and night) at this stage. Remember, there are exceptions to the rules, and not all mares will wax up.

WHAT IF MY MARE IS "RUNNING MILK"?

Some mares will drip milk or develop a stream of milk from their udder close to foaling. The colostrum is the first part of the milk and is a thick, creamy, yellow colour containing vital antibodies from the mare for the foal's immunity. If the colostrum leaks prior to foaling the foal may not receive enough antibodies leaving it more vulnerable to infection or disease and veterinary attention should be sought. Additionally, if your mare appears to be running milk for greater than 24 hours and she is not due to foal please call your veterinarian for advice or assistance.

Other signs of foaling to look for:

- **SHAPE OF ABDOMEN:** closer to the time of foaling your mare's abdomen will drop as ligaments relax. She may also develop ventral oedema (fluid at bottom of her belly).

- **SHAPE OF VULVA:** the vulva will relax and become longer close to foaling. Check her vulva daily.
- **TAIL TONE:** as everything in the hindend relaxes in preparation for foaling your mare's tail tone will change. Initially when checking her vulva daily she may resist you, but closer to foaling there may be less or no resistance.
- **BEHAVIOUR:** your mare's behaviour will change from 'normal' prior to foaling. Behavioural signs close to foaling to look for include:
 - Taking herself away from the herd
 - Resting for longer periods (lying down)
 - Pacing or restlessness
 - Profuse sweating
 - Wax on teats or running of milk
 - Increased breathing rate and effort
 - Kicking at abdomen
 - Flank watching
 - Tail swishing
 - Intensive grazing

These signs may look like colic, but if your mare is eating, drinking, defecating and urinating as normal then the first stage of labour may be in progress.

If you notice the above signs please move your mare to a clean grassy area, well fenced area separate to the herd (although still allows visualisation of paddock mates). Regular checks should be performed and a foaling alarm placed at this time if not already fitted.

Stages of Labour

FIRST STAGE (up to 24 hours):

- Your mare may get up and down several times to help reposition the foal, she may paw at the ground, bite at her flanks, urinate frequently and break out into a sweat. This stage can take several hours, so monitoring is recommended and call your veterinarian if you have any concerns. This stage ends when the mare's "water breaks".
- Within 20 minutes of the water breaking (release of allantoic fluid), the white amniotic membrane should appear. If this amniotic membrane is red it is considered a "red bag" delivery and is a sign that the placenta is separating too early. The foal needs the placenta to still be attached to the mare's uterus at this time for blood supply and oxygen (it needs the placenta to "breathe"). If you think your mare is having a red bag delivery please call your veterinarian immediately as this is an emergency and the foal needs to be delivered ASAP.
- You may wish to wrap the mare's tail and wash the mare's udders and vulva in preparation for foaling.

SECOND STAGE (10-30 minutes):

- This stage of labour occurs very quickly. The mare usually positions herself on her side with her legs fully extended whilst pushing. She may still get up and down several times to help position the foal to assist delivery.
- Within the white membrane you should see two feet (one foot is usually positioned slightly in front of the other to help reduce the circumference of the foal's shoulder and chest) and then the nose tucked between the front legs. Both feet need to be present with the soles

facing the ground and the nose on top of the legs. If you are unsure and cannot easily determine the position of the foal then please call your veterinarian.

- Once the front feet, head, neck and shoulders have passed through the birth canal the rest of the foal will come out with relative ease. Your mare may take a moment of rest after passing the shoulders with the hindlegs still in the birth canal. **DO NOT INTERRUPT.**
- Once the foal is out, if the membranes have not yet broken then manual rupture should be performed to clear the nasal passage and allow the foal to breathe. **OTHERWISE LEAVE MARE AND FOAL ALONE.**
- Other than to break the membranes it is important to not disturb your mare and foal to encourage bonding and allow the foal to continue receiving blood from the placenta via the umbilical cord after birth. Allow the cord to rupture naturally as studies have shown that this last few minutes of blood from within the umbilicus and placenta can improve foal health.
- The umbilical cord generally breaks when either the mare or foal stand up.
- Premature rupture of the umbilicus results in blood loss which can be life threatening.

Call your veterinarian if:

- **Your mare is straining but nothing appears.**
- **The membrane at the vulva is red rather than white/grey.**
- **The white membrane has appeared but no foot is present within 20 minutes**
- **A foot and no second foot or nose are seen within 15 minutes.**

If any of the above occur then you may have a dystocia/malpresentation and it is imperative that the foal be delivered as soon as possible to achieve the best outcome for both your mare and foal. Observe mare and foal from a distance and ensure they are both displaying normal behaviour post foaling (see '*Caring for your mare and newborn foal*' handout)

THIRD STAGE (1-4 hours):

- Passage of the placenta (afterbirth) is the final stage of labour. These membranes should be expelled 1-4 hours after delivery. If they are not expelled by 3 hours we recommend calling your veterinarian.
- The foal's nursing will cause oxytocin to be released which increases placental contractions and assists in placental release. The mare may become uncomfortable during this time and veterinary attention should be sought if discomfort persists for greater than an hour.
- When the mare stands, the placenta should be tied into a ball so she does not stand on it. This will also add weight and passive traction via gravity allowing for slow separation from the mare's uterus.
- **NEVER PULL THE PLACENTA YOURSELF** as this can lead to retained placenta, tearing of the placenta, prolapse of the uterus and increased risk of infection.
- It is important to examine the placenta to determine if placenta is intact or any portions have been retained.
- Retained placenta is considered an emergency as it can lead to uterine infection (endometritis), toxemia, laminitis and death of the mare. Veterinary attention should be sought and generally requires careful removal of the placenta, uterine infusions and antibiotics may be required.
- Mares that retained their placenta are poor candidates to be bred at foal heat.

- A reddish-brown discharge may be present in the first week post foaling, this can be normal. If white discharge develops this is indicative of a uterine infection and veterinary attention is required.

Call your veterinarian if:

- **The mare shows signs of pain or colic post foaling. Some mares may have mild to moderate colic signs as the uterus contracts and heals. We recommend examination by a veterinarian in all mares post foaling and routine administer pain relief at this time.**
- **The placenta has not passed within 3 hours.**
- **You suspect your mare has retained some placenta.**
- **You are unsure how to check your placenta is entire.**