

THE FIRST 48 HOURS

YOU WILL LEARN

The normal foal milestones

The importance of colostrum intake

Why mare care is vital post-foaling

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THE FIRST 48 HOURS

The new bundle of joy has arrived and the most stressful part, the labour, is over. But, now there are more things to worry about.

Firstly, has your new foal been able to stand within an hour of birth and, secondly, has your new foal been able to nurse within two hours of birth?

These are the ideal time frames for the most important milestones in the first 24 hours. The third most important is the passing of the meconium, followed by urination. This is the first manure passed by foal. Its usually firm, black to mustard in colour, and can be up to 50cm in length.

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WHEN SOMETHING'S NOT RIGHT

Things that can prevent these milestones are very important to identify early, so they can be corrected, if possible.

STANDING

The first milestone of standing can be inhibited if the foal has contracted tendons, which prevent the legs from fully extending. This can range from mild to severe where the foal can't extend the legs at all.

Other problems that prevent the foal from standing can be prematurity of the foal and joints aren't properly formed, or a stressful labour with the foal being exhausted or starved of oxygen during birth.



THE FIRST MEAL

The foal's first meal from the mare is colostrum, usually a sticky creamy/yellow/white milk, which gives the foal immunity until its own immune system starts to function at around three months of age.

If the foal does not receive a good quality or amount of colostrum, the foal is considered to have a naïve immune system. This is called 'Failure of Passive Transfer', or FPT.

FPT is very serious to the foal and requires the administration of plasma, along with oxygen and antibiotic therapy, depending on the foal. Other problems that prevent the foal from receiving the colostrum can include the foal having a cleft palate or the mare not allowing the foal to nurse.

MECONIUM

Meconium is normally quite dry and hard but, in some cases, this can cause an impaction within the intestines. The foal can become quite uncomfortable and show signs of colic.

Colts are more prone to this condition and often need intervention by way of an enema or other treatment to help them pass their meconium.

NEONATAL ISOERYTHROLYSIS

There is a condition that can be fatal to foals if they drink colostrum from their mother. This condition is called Neonatal Isoerythrolysis, and it occurs when the mare's antibodies in the colostrum destroy the foal's red blood cells when ingested.

Foals are born healthy, and usually begin to develop signs of the condition at around 24-36 hours of age after suckling and ingestion of colostrum. Lethargy and weakness are the early signs, and they can develop into jaundice and rapid, shallow breathing, which can cause death.

Foals deteriorate rapidly when ill. They have no acquired immunity and rely entirely on maternal antibodies through colostrum.

URINATION

Urination should occur not long after the foal has its first drink. If urine seems to dribble or drip from the umbilical stump, this would indicate a patent urachus. The urachus should seal up once the umbilicus is ruptured when the foal stands.

The urachus is the tube that removes waste from the foal when it is inside the mare. This is also a common site for an ascending infection to enter the foal, and cause septicaemia or infection within the foal's joints.

EARLY INTERVENTION

Foals deteriorate rapidly when ill and they are very sensitive to temperature changes, due to their large surface area. They have no acquired immunity and rely entirely on maternal antibodies through colostrum. They dehydrate quickly and are quite fragile, so the key with any condition is don't delay treatment. Never hesitate to call your vet for advice!

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MARE CARE

The mare also needs to be monitored after foaling for several conditions. The most important thing post-foaling is the third stage of labour, which is the expulsion of the placenta. This process should be completed within 2-3 hours post foaling.

Always examine the placenta to make sure the uterine horns are both present as this is the most common part of the placenta to tear and remain in the mare.

If there is part of the placenta left, the mare can get an infection, and inflammation and toxins are released into her system. While checking for retained membranes, it is possible to check the mare has not torn her vulval lips while foaling.

This can sometimes require stitches to allow proper healing. The mare may show signs of abdominal pain or colic, due to the involution of the uterus.

First, you need to rule out some more serious conditions, such as a recto-vaginal fistulus, which involves the foal putting a foot through the vagina during foaling and also rupturing through to the bowel, or rupturing of a major blood vessel and the mare is bleeding out internally.

Mares also have a higher risk of more serious colic, such as a twisted bowel, due to the increased space once the foal has been removed from the abdomen. Close monitoring of both mare and foal is essential, especially during the first 48 hours.

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Having spent most of her childhood in the saddle, it was a natural transition into equine veterinary medicine for Louise, founder of Exclusively Equine Veterinary Services and HorseBarn Education. A practicing equine vet, Louise is passionate about empowering horse owners, like you, with a deeper understanding of horse health, so you can give your horse a longer, healthier future.

If you have any questions regarding your horse, you're welcome to contact me personally.

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