

SHIRE HORSE SOCIETY



CARING FOR YOUR BROOD MARE

GENERAL CARE

- Keep brood mare(s) in a quiet environment to reduce the risk of stress.
- Keep mares in long term residence, away from visiting mares to reduce the risk of disease.
- Regular light exercise is beneficial, mares can be ridden/driven lightly in the first half of pregnancy. If not in light work, turn out at least 5 or 6 hours per day, longer if possible.
- Keep feet trimmed and in good order. Neglected and/or unbalanced feet can increase the risk of laminitis as the mare gains weight and undergoes hormonal changes.
- As the foaling date approaches:
 - Check the mare's udder daily for signs of bagging up and waxing.
 - Observe the mare's behaviour, significant changes can indicate impending foaling.
 - Make sure everything is ready for the foaling (see SHS foaling notes). If the mare is to foal at stud, make sure she is there a few weeks before hand to settle.



FEEDING

- **Keep your mare in moderate condition – excess weight can lead to health problems, particularly laminitis, hyperlipaemia and difficulty foaling. Monitor condition throughout and adjust diet accordingly.**
- **Normal diet of grass and good quality forage with addition of nuts/mixes/grains according to the mares body condition, time of year and amount/quality of grazing. The mare's nutritional needs do not change very much in the first 9 months.**
- **Slight increase in feeding in last 3 months.**
- **Diet in last 3 months should be 8 to 12 % protein supplemented with calcium, phosphorus, zinc, manganese and copper - stud nuts/mixes are balanced to provide these – consult manufacturer's guidelines for products and feeding amounts.**
- **Vitamin E supplements from 30 days before foaling can aid transfer of antibodies to the foal.**
- **Maintain feeding levels during lactation with gradual decrease before weaning to assist with drying up.**

SCANNING

Post Service Scans

These are likely to be done while the mare is still at stud.

14-16 days after service to confirm pregnancy and identify and correct twins.

21 days after service – optional scan to confirm that the embryo has implanted and is developing properly.

30 days after service to confirm there is a heart beat.

Additional scans are not normally needed but can be carried out if required or if any problems are suspected.



HEALTH CARE

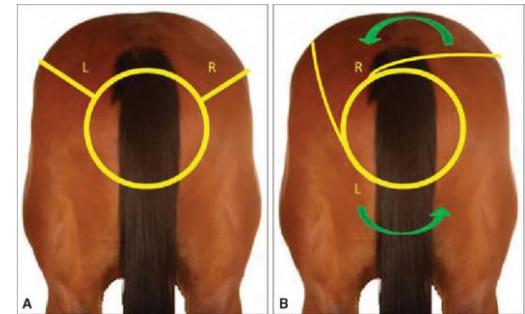
- **Worm regularly – ensure the wormer used is licensed for use in pregnant mares.**
- **Normal vaccinations for flu & tetanus – but avoid vaccinating in the first 60 days as this is the most likely time for abortion to occur.**
- **Equine Herpes Virus (EHV) vaccination at 5th, 7th & 9th months is recommended to avoid EHV related abortion.**
- **Check regularly for any discharge from the vulva that could indicate an infection or other problem – it could lead to abortion – consult your vet if unsure.**
- **Consult your vet if you have any concerns.**



HEALTH PROBLEMS

These conditions are considered to be EMERGENCIES and a vet should be called immediately:

- **Hyperlipaemia** – potentially fatal metabolic disorder usually occurring in the last 3 months of pregnancy. Caused by a negative energy imbalance that is associated with insulin resistance. Not a common problem but the prognosis is poor with up to 70% mortality.
- **Uterine Torsion** – Excessive movement of the foal can cause the uterus to twist over itself. Sometimes the mare's intestine can be involved. May be correctible but usually requires surgery, prognosis poor.



- **Abdominal Rupture** - Separation of the abdominal musculature resulting in swelling of the abdomen, “dropped” abdomen and “sawing horse” stance. Abdominal support depending on severity can assist long enough to enable the foal to survive induced delivery. Prognosis very poor.



(Photograph: Dr. Jonathan F Pycock)

- **Laminitis** –Inflammation of the sensitive laminae in the foot resulting in extreme pain and eventual break down of the internal hoof structures. Generally associated with ponies but can affect any horse. Commonly occurs after foaling

FOLLOWING FOALING

- **Severe Bleeding** – potentially fatal particularly if the uterine artery is involved.
- **Retained Placenta** – a portion of the placenta remains in the uterus following foaling. Can result in life threatening secondary infections. Ensure the placenta is examined after foaling and is intact. (See SHS foaling notes).
- **Prolapsed Uterus** – the uterus may be partially or totally prolapsed and is seen as a red mass hanging from the vulva. Rare in mares but dangerous.



ABORTION

Though sad and distressing abortions do occur and should not be taken lightly. Abortions occur for many reasons but until the reason is confirmed it MUST BE TREATED AS INFECTIOUS.

- **Do not touch any part of the foetus and associated tissues without wearing disposable gloves and protective clothing.**
- **Keep the mare away from other horses especially in foal mares until the cause of the abortion is identified as not infectious.**
- **Call your vet to:**
 - a) Check the mare is clean with no ongoing/additional problems or infections and to provide treatment as necessary.**
 - b) Check the foetus and tissues to identify the reason the abortion has occurred.**
 - c) Send tissue samples to a laboratory for analysis.**
- **Disinfect all areas that the aborted tissues have come into contact with.**
- **Treat the mare as instructed by your vet. Do not attempt breeding again until the mare is declared “sound”. Mares can remain infertile for several months following abortion.**

**BUT ALL BEING WELL
YOUR MARE WILL GO TO TERM
AND PRODUCE A FINE HEALTHY FOAL**

