

Premature Birth

Premature birth is not unique to Friesians. Yet it is clear that Friesian owners will go to great measures, where possible, to save the lives of their newborn foals. The outcome can be either heartbreaking or heartwarming. The reality of every situation differs, but join us in celebrating some success stories!

Premature and Dysmature Foals

By Carina Jefferson

A premature foal is described as a foal born prior to 320 days gestation, whereas a dysmature foal is a foal that is born small or immature for its gestational age (dysmature foals are often deemed 'overdue'). Both premature and dysmature foals are usually the result of problems or infections in the placenta, such as placentitis. Both types of foals require the same care and will generally suffer the same problems.

Generally, Friesian mares foal 10 days earlier (on average) than other breeds, so a foal at 320 days or less may be within the normal range for a Friesian. Assessment of whether the foal is premature is based on the behaviour and condition of the foal at birth, as well as the mare's normal foaling pattern (if it is known). For example, a mare that usually foals at 310 days will have normal healthy foals, as this is 'normal' for that mare and the foal is not in any way premature. A mare that normally foals at 330 days, but foals at 310 days due to placentitis will have a premature foal with all the associated problems, because this early foaling is not 'normal' for her.

Signs that a foal is premature or dysmature include:

- Weakness
- Delay in standing or inability to stand
- Low birth weight (some appear emaciated)
- Little or no suck reflex
- Wandering/dummy behaviour

Nursing of these foals will be intensive and time consuming. Treatment will depend on the symptoms present. All will need fluid therapy and nutritional support and some foals may also need oxygen, antibiotics and/or a plasma transfer. Your first priority should be to get the foal onto fluids (all fluids should be warmed prior to going onto the drip), getting nutrition into the foal, and getting it warm. Some may be able to stand and nurse, especially if supported while doing so, however most will be recumbent and weak and will need to be fed through a naso-gastric tube. If the dam is unable to be milked for her colostrum, then another source needs to be found as soon as possible. Recumbent foals need to be placed so that they are sitting up on their chest; use of pillows and other props will help with this. The foal must be turned regularly to prevent lung congestion, pneumonia and bedsores. Many foals seem to do well for the first day or so, and then crash hard and go downhill quickly, but with intensive nursing, they will often make a good recovery and bounce back quickly.

Many premature or dysmature foals have under-developed tarsal bones in the hocks and some may even have the bones missing all together. X-rays of the joints will determine the developmental stage of the bones. If the bones are missing completely,





Premature Foals, cont...

then sadly the foal will need to be euthanized. If the bones are present, but are under-developed, the foal needs to be kept recumbent for as long as possible to allow these bones to strengthen. However, even very weak foals will keep making attempts to stand and keeping these foals down can be hard. When they are attempting to stand up, you can assist by supporting their weight as much as possible and by providing very deep, soft bedding to reduce any impact on the joints. As the foal grows there is a risk of these under-developed bones "crushing" under the foal's weight. If the legs remain relatively straight while this is happening, then the crushing of these small bones may actually not have any long-term effects. Once the crushing has stopped and the bones begin to fuse, many horses can, and do, go on to live sound useful lives.

As a vet nurse, I have seen many foals that have been very weak and sick bounce back to being up and drinking from their dam a week later, but I have also seen many lose the battle and die. It's very heartbreaking and is very exhausting nursing these foals, but also very rewarding when the results are good. Having nursed my own premature foal, I know how emotionally draining it is on the owner too. My 5 week premature Friesian foal sired by Remmelt 323 is now a 6 year old stallion. At birth he was tiny and a bag of bones, and barely able to lift his head. It was a hard fight to save him, but to see the magnificent stallion he is today makes the fight all worthwhile. The crushing of his tarsal bones resulted in him looking slightly cow hocked, but other than that he is sound and healthy and has no problems with being ridden or with breeding mares.



Carina Jefferson is an Equine Vet Nurse and an AI Technician. She worked at the Werribee Vet Hospital in Melbourne, Australia. Werribee Vet Hospital saw a lot of colic surgery and leg surgeries, not a large number of foals. The photographs that accompany the article are from Scone Equine Hospital in New South Wales where Carina was doing on the job training while obtaining the nursing certificate. Scone is the biggest foal hospital in Australia and see's, on average, 200 plus foals during foaling season. Often these foals are Dummy foals, premature foals, foals needing surgery, foals with leg problems and so on. Carina has been breeding Friesians for 20 years, since she bought her stallion, Othello, as a 4 year old.

