

CLIENT EDUCATION HANDOUT

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DYSTOCIA:SMALL RUMINANTS

Overview

Dystocia or difficult birthing, is the abnormal progression of the birthing process. Birthing is generally divided into 3 stages: preparation stage, fetal expulsion stage and placenta expulsion stage. Birthing difficulties are generally characterized by an abnormal prolongation of the first or second stage of labor.

Species and Animal Groups Affected

Pregnant females, particularly maiden

Some breeds are more predisposed than other (pygmy goats, Dorset sheep, Texel sheep)

Signs

The first stage of labor, preparation for birthing, should not be longer than 6 to 12 hours in maiden and 4 to 8 hours in adults. Signs of difficulty at this stage include increasing efforts and straining, increased vocalization, and bloody vaginal discharge without progression to the second stage of labor.

The second stage of labor, starting with rupture of the first water bag and ending with birth of all lambs or kids should not take more than 4 hours in maidens and 1 hour in adults. Signs of difficulty at this stage include failure of appearance of any fetal parts at the vulva and increased abdominal efforts and contractions without progression.

Females with birthing difficulty are often stressed. In advanced cases the female will be depressed and dehydrated. The eyes are often injected and sometime sunken. The vulva and anal area may show excessive swelling.

Causes

Causes of birthing difficulty may be due to the female or fetus (or fetuses).

The primary causes associated with the female are breed (small or heavy breeds), poor body condition, metabolic disorders (pregnancy toxemia or hypocalcemia) and failure of cervical dilation (ringwomb). Very rarely a twist in the uterus (uterine torsion) may be the cause.

The most common fetal causes of dystocia are large single lamb or kid, or abnormal alignment with the birth canal (head deviation, retained legs, breech, two fetuses in the birth canal at the same time).

Risk Factors

The main risk factors are inadequate management during pregnancy (metabolic problems), genetics (ringwomb and large fetuses), small or abnormal birth canal.

Treatment

Dystocia treatment requires careful examination of the birth canal. Experienced owners can often identify some fetal causes of dystocia and correct easy situations such as a retained leg or deviated head. More complicated situations require veterinary intervention, placement of an epidural anesthesia for throughout evaluation and either a resolution by fetal manipulation or surgical intervention (cesarean section).

Management Considerations

Avoid breeding small ewe-lambs or doelings to large males.

Plan for a pregnancy diagnosis with fetal numbering and adjust nutrition of pregnant females according.

Have good records on breeding dates so the birthing dates can be anticipated and females are watched closely to detect any problem early.

Lambing/kidding area should provide ample space to observe and intervene if necessary.

Learn how to identify signs of normal labor.

Only intervene if necessary and minimize the manipulations particularly if not familiar with the process.

Have a lambing/kidding kit on hand.

Call the veterinarian if cannot identify the problem.

Expected Course and Prognosis

Survival of the dam and fetus (fetuses) is excellent if the problem is identified early even if surgical intervention is needed. Survival of the fetus(es) decreases rapidly the longer an intervention is delayed. Retained placenta is common after dystocia by most females will have normal fertility with proper care. Cases with underlying metabolic disorders or where the fetuses are in advanced stages of decomposition carry poorer prognosis. It is recommended to cull females with ringwomb.

Notes

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Blackwell's 5-Minute Veterinary Consult: Ruminant 2nd Ed.

Blackwell's Five-Minute Veterinary Consult: Ruminants, Second Edition, Christopher C.L. Chase, Kaitlyn A. Lutz, Erica C. McKenzie and Ahmed Tibary © 2017 John Wiley & Sons, Inc.