sheep

Preventing prolapse in pregnant ewes

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aginal prolapse, the most common form of prolapse, usually occurs during the last month of pregnancy. The aim should be to try and keep the incidence to less than one ewe affected per hundred. It is not uncommon to see much higher incidences, so let's take a look at the management factors which predispose ewes to the condition.

Nutrition

In late pregnancy, ewes increase the speed and efficiency with which they ingest food. This enables them to eat more, as their nutritional requirements increase when their lambs are growing fast. Factors which slow down digestion or cause digestive upsets can predispose pregnant ewes to vaginal prolapse. Factors that can influence this include:

- ·Long periods where sheep do not have access to feed.
- · Sudden changes to the ewe's diet.
- · Availability of concentrates. When feeding concentrates, start at max 200g per head per day and build up gradually.
- •Once concentrate feed level exceeds ½ kg per head per day, split the feed into two equal feeds at least eight hours apart.
- Sudden changes in concentrate ingredients. Introduce new ingredients/concentrates gradually.
- · Access to feed. Ensure all animals have good access to forage and concentrate feed.

Housing

As pregnancy progresses, ewes get bigger, and so too does their requirement for space. The recommended trough space allowances are often not met on sheep farms. For terminal breeds (Suffolk, Texel, Charollais etc.), sheep need 0.6m (or 2ft) of trough space per ewe. This equates to eight sheep per standard bay. For maternal breeds, the requirement is for 0.5m or 1'8" of trough space, allowing nine ewes per standard bay.

Providing extra trough space by adding in walkthrough feeders or placing additional feed troughs around the pen will make feeding concentrates a little more labour intensive, but will pay dividends by reducing pressure on heavily pregnant ewes. Remember when calculating trough space to allow extra space at each corner. There is approximately 0.6m trough space lost at each corner where sheep are feeding at barriers placed at 90°

Lying space is also something that needs to be considered. Mature ewes need between 1.2m2 and 1.4m2, depending on their size in straw-bedded houses.

Exercise

Exercise is also thought to be a contributory factor that predisposes ewes to prolapse. Too much is bad and so is too little. In particular, avoid feeding heavily pregnant sheep on steep slopes or in large fields, where they will gallop to the troughs at feeding

Health, genetics and other Issues

Health issues such as prolonged lying down due to lameness, sub-clinical hypocalcaemia and acidosis are also cited as risk factors. Treating underlying conditions in addition to identifying and removing lame or shy feeders (for preferential treatment) from pens where there is a lot of competition for feed space will help reduce the risk of these sheep suffering vaginal prolapse.

Once a ewe suffers a vaginal prolapse, she is very likely to prolapse again in future years. So it is not a good idea to retain ewes that have prolapsed in the breeding flock. Ewe lambs should not be retained from ewes which have prolapsed, as there



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may be a genetic link.

Take care when tail docking potential ewe replacements. Ensure that you leave enough of the tail to fully cover the anus and vulva of the lamb. Very short tail docking is also cited as a predisposing factor in vaginal prolapse.

Replacement of prolapse

Speed and good levels of hygiene are critical when it comes to replacing vaginal prolapse. The length of time between the prolapse and the intervention to replace it will directly af-



fect the degree of contamination (e.g. faeces, bedding material, soil etc.) and any potential damage to the vaginal tissue.

Significant delays can result in the vaginal wall becoming swollen and friable, which greatly increases the risk of tears or rupture during replacement. In severe cases, veterinary assistance may be required to administer an epidural to prevent forcing and allow for the replacement. Prior to replacement, the prolapse should be thoroughly cleaned and, under veterinary advice, pain relief and antibiotics administered.

Mild cases can be simply re-inserted and retained using plastic retaining spoons, or using a rope or ready made harness. Where a ewe is continually forcing stitching, an epidural and pain relief will be required. This is a job for a veterinary surgeon.

Summary

If the number of vaginal prolapses exceeds 1% (one ewe in every 100) in your flock, you need to look at management factors which may be predisposing your flock to prolapse. The following is a useful checklist:

- Trough space allowance Allow 60cm for terminal-sired ewes, 50cm for maternal breeds. There should be free space at the trough during feeding.
- •Lying space Allow 1.2m² 1.4m² per lowland ewe.
- •Meal feeding Introduce gradually and feed twice per day once the level of concentrate feed exceeds 1/2kg per head per day.
- Cull sheep that prolapse and where possible, do not keep replacement

females from ewes that prolapse.

- When tail docking replacement ewe lambs, ensure that you leave enough tail to cover the anus and vulva.
- Avoid feeding heavily pregnant ewes on steep ground or in large fields.
- Treat any health issues such as lameness and hypocalcaemia as soon as they are detected, to prevent ewes being compromised nutritionally.
- Uterine prolapse post-lambing should not be viewed as the same condition. It occurs much less frequently (0.1% - one in 1,000 lambings) and unlike vaginal prolapse, the sheep in question are unlikely to prolapse the following year and should not necessarily be culled.