

We usually check the mare and foal on the first day of the foal's life. This gives us an opportunity to discuss management of the foal, give the foal a thorough examination and give injections of tetanus anti-toxin.

We will also examine the mare to ensure there is no damage to the uterus, that she has cleansed properly and has sufficient milk. It is important that we check the placenta as well, not only to check it is complete but it also gives clues to the health status of the mare and foal.

The first few weeks following birth are probably the most critical of a horse's life.

A new-born foal is more susceptible to a range of diseases and injuries than older foals and adult horses: many of these problems are serious or potentially fatal.



During the first few days and weeks of life one should adapt to a routine of watching the foal's behaviour carefully. Look for signs of not sucking, respiratory difficulty and acute diarrhoea. If in doubt check the foal's temperature. Up to 38.0 C (or just over) is usually normal for a foal but anything higher than 38.5 C should alert suspicion.

Joint-III

Watch for signs of lameness and always take note of acute lameness. "Joint-III", where a joint is infected via the bloodstream is relatively common in foals. Prompt treatment will alleviate the condition completely but if it is left for more than a few hours and certainly more than a day or so permanent damage may result.

Angular Limb Deformities

Foals are frequently born with "bent" legs. Excessively "bent" foals may have difficulty in standing and here assistance (hopefully short term) may be required to allow normal feeding. Many angular limb deformities self correct within the first 2 weeks but others require corrective trimming/shoeing or surgery. If these not corrected early in the foal's life when it is still growing, they can result in a permanent conformational abnormality, so always ask us for advice.