

## **Vaginal Prolapse in Ewes**

Vaginal prolapses are a frustrating problem and a welfare concern. The average incidence is reported to be 0.5 to 1%, however this can be much higher in individual flocks and vary considerably from year to year. Most cases occur in the three weeks prior to lambing and can lead to ewe and lamb losses. Many predisposing factors have been suggested with stronger evidence available for some more than others.

Ewes carrying twin or triplet lambs are more likely to prolapse than ewes carrying singles. Increased litter size will also contribute to the greater susceptibility of older ewes, and lowland compared to hill breeds. It is accepted that ewes that have prolapsed once are at higher risk of doing so again and should be culled.

Abdominal pressure increases when ewes sit facing uphill and can heighten the risk ofprolapse. As lambing approaches the birth canal widens and the tissues stretch more easily. Feeds that are potentially oestrogenic (e.g. red clover) may augment this effect. Evidence for the role of this and other nutritional factors is mixed and sometimes contradictory. Ewes that spend a lot of time sitting down tend to have full bladders. This will contribute to abdominal pressure and may be a factor when prolapses occur in ewes fed swedes in late pregnancy, due to their high water content +/- bulk. Low dry matter silage could have a similar effect as ewes have to eat a larger quantity to try and meet their energy needs. Increased rumen fill will increase abdominal pressure. Water intakes will also be greater in ewes with access to salt pre-lambing. It would be expected that over fit ewes with increased amounts of fat within the abdomen will be at increased risk of prolapse, however not all studies have confirmed this to be the case.

Pregnant ewes should have *ad-lib* access to forage around the clock and concentrate feed provided at the same time each day to reduce the likelihood of gorging. There should be no abrupt changes to the ration and where possible they should be grouped based on litter size and body condition to avoid overfeeding. If housed, trough space needs to be adequate to allow all ewes to feed at the same time (50-60cm/head). A degree of rumen acidosis could increase prolapse risk if the ewe spends more time lying down. Ewes that are lame may be predisposed for the same reason. The stocking density should allow for 1.2-1.4m² lying space/ewe. A 2020 New Zealand study suggested that injecting ewes with vitamins A, D and E in the last month of pregnancy can decrease prolapse risk, but more research is required to confirm this. Low blood calcium levels in ewes that have prolapsed is likely to be a consequence of reduced feed intake following prolapse rather than the cause.



It has been proposed that docking tails too short can alter the nerve supply to structures below the tail, reducing feeling and tone. This has not been shown to increase prolapse risk in all cases. However, if docking is necessary, it is a legal requirement that tails should be left sufficiently long to cover the vulva, eliminating short tails as a risk factor. A final suggestion from an older New Zealand study was that shearing in the second half of pregnancy appeared to lower the risk of prolapse.

In many cases it is likely that development of a prolapse is multifactorial. The early warning signs are similar to those shown by ewes in first stage labour. A small project using activity loggers designed to detect signs of impending lambing showed that ewe behaviour was altered for five days prior to a prolapse occurring. Any ewe that becomes restless with behaviour suggestive of imminent lambing on consecutive days should ideally be placed in a small group to allow close monitoring and reduce the stress of having to compete for food. An injection of painkiller at an early stage may help to reduce any inflammation and avert the problem.

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