

Successful kidding



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Today's topics

- Breeding
- Nutrition
- Vaccinations
- Periparturient egg rise
- Normal kidding
- Kidding problems
- Newborn kid problems
- Colostrum
- Artificially rearing kids



Successful kidding starts at breeding

Does

- Healthy
- Sound
- Moderate body condition
- Productive

Bucks

- Healthy
- Sound
- Fertile
- Moderate body condition
- Productive
- Genetically-superior*



Feeding the pregnant and lactating doe

- Nutrient requirements are affected by stage and level of production.
- Energy (TDN) requirements increase throughout pregnancy and are highest during late gestation.
- Protein (CP) requirements increase throughout pregnancy and are highest during early lactation.
- Calcium (Ca) and phosphorus (P) requirements increase during pregnancy and are highest during lactation.



Nutrition basics

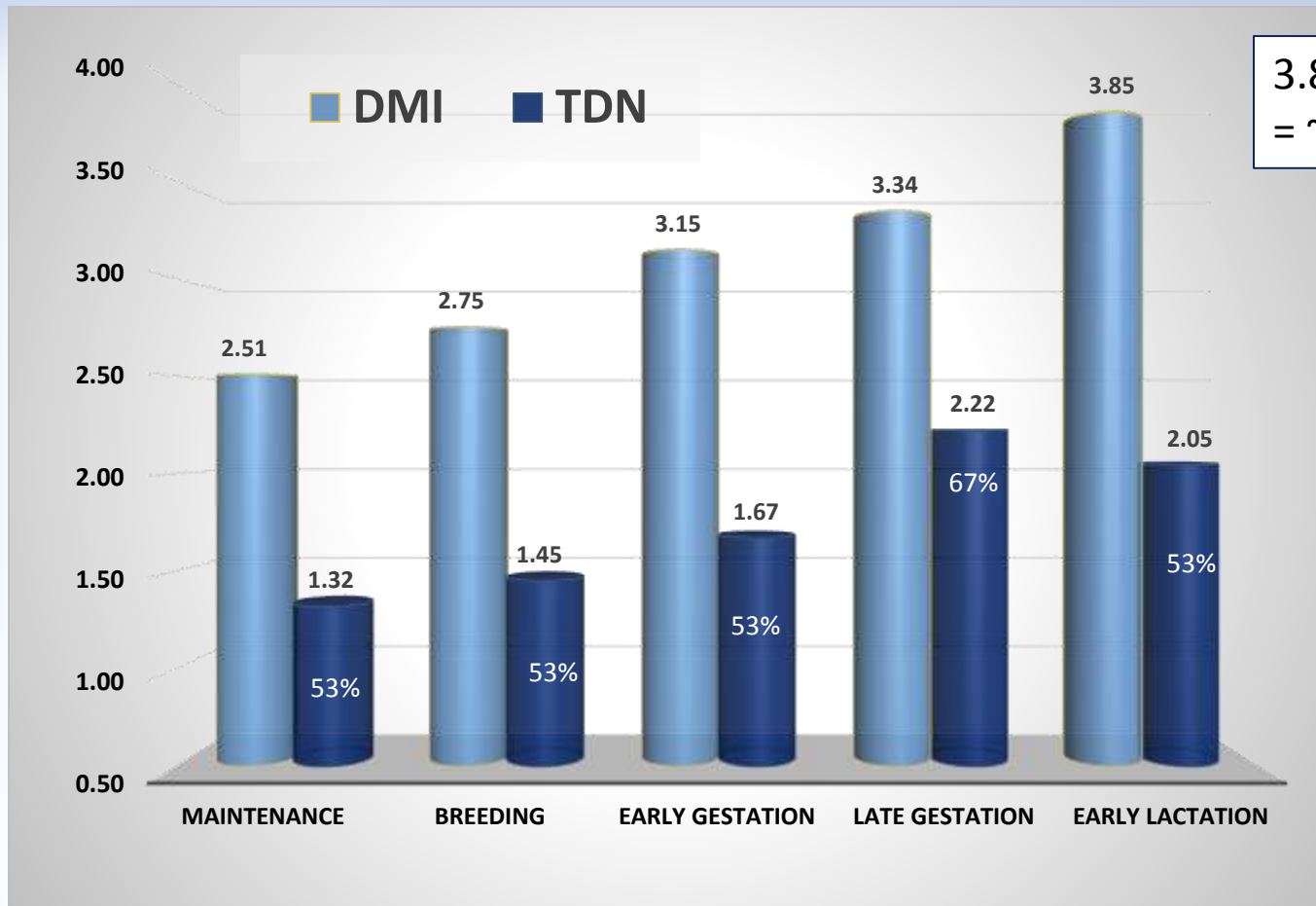
DRY MATTER (DM)

- Livestock nutrient requirements are based on dry matter.
- Nutrients are contained in the dry matter portion of the feed.
- All feeds contain water; dry matter is what's left after the water is removed.
- Feedstuffs vary in dry matter content, from < 10 to > 90 percent.
- Most common feedstuffs (hays and grain) are 88-90 percent DM.
- Feedstuffs must be compared on a dry matter (and weight) basis.
- An animal's nutrient requirements are based on its size (weight), along with other factors.
- Animals require certain amounts (lb, kg, oz, g, or mcal) of nutrients, not percentages.
- Percentage requirements are based on assumed dry matter intakes, e.g. 3 lbs. of hay + lb. of grain
- Percentages are used to describe the nutrient density of a feed and are a tool for balancing rations.

WEIGHT

Energy requirements of does

Energy requirements (TDN) of a 132-lb. non-dairy doe (twins).

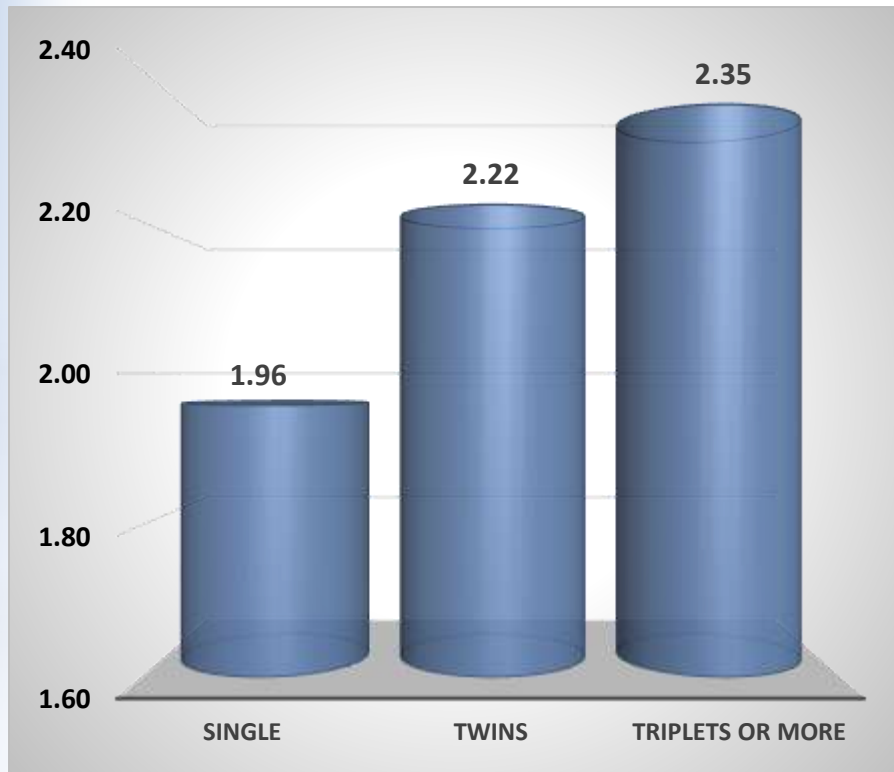


3.85 lbs. DM
= ~4.25 lbs. as-fed

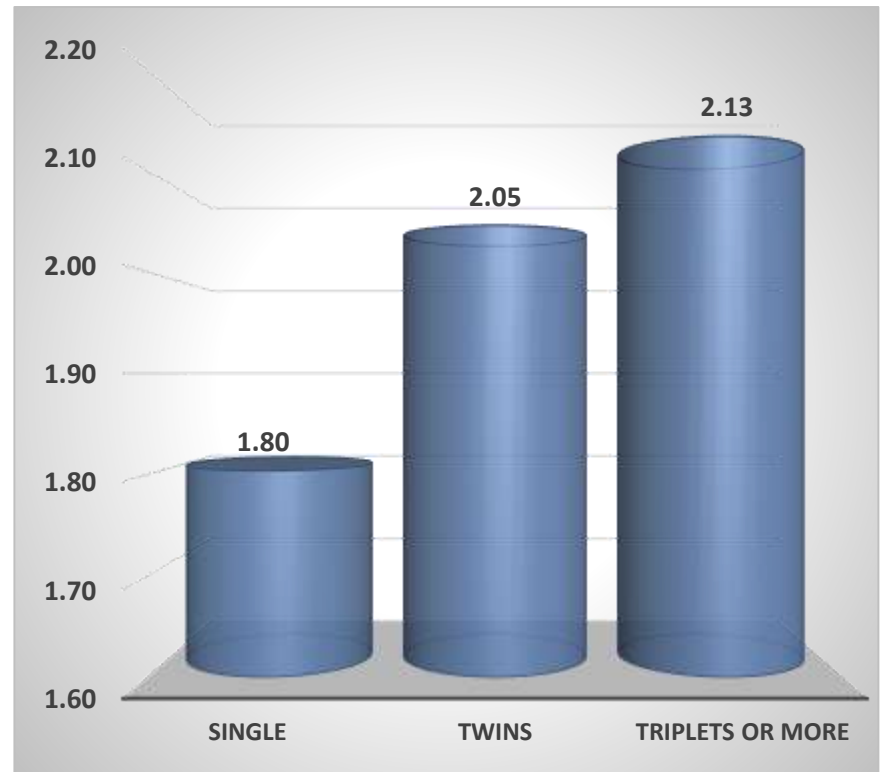
Percentage requirements are based on an assumed dry matter intake (DMI); if less dry matter is consumed, a higher energy (%) diet would be required.

The number of offspring affects nutrient requirements of pregnant does.

Late gestation (6-8 weeks)



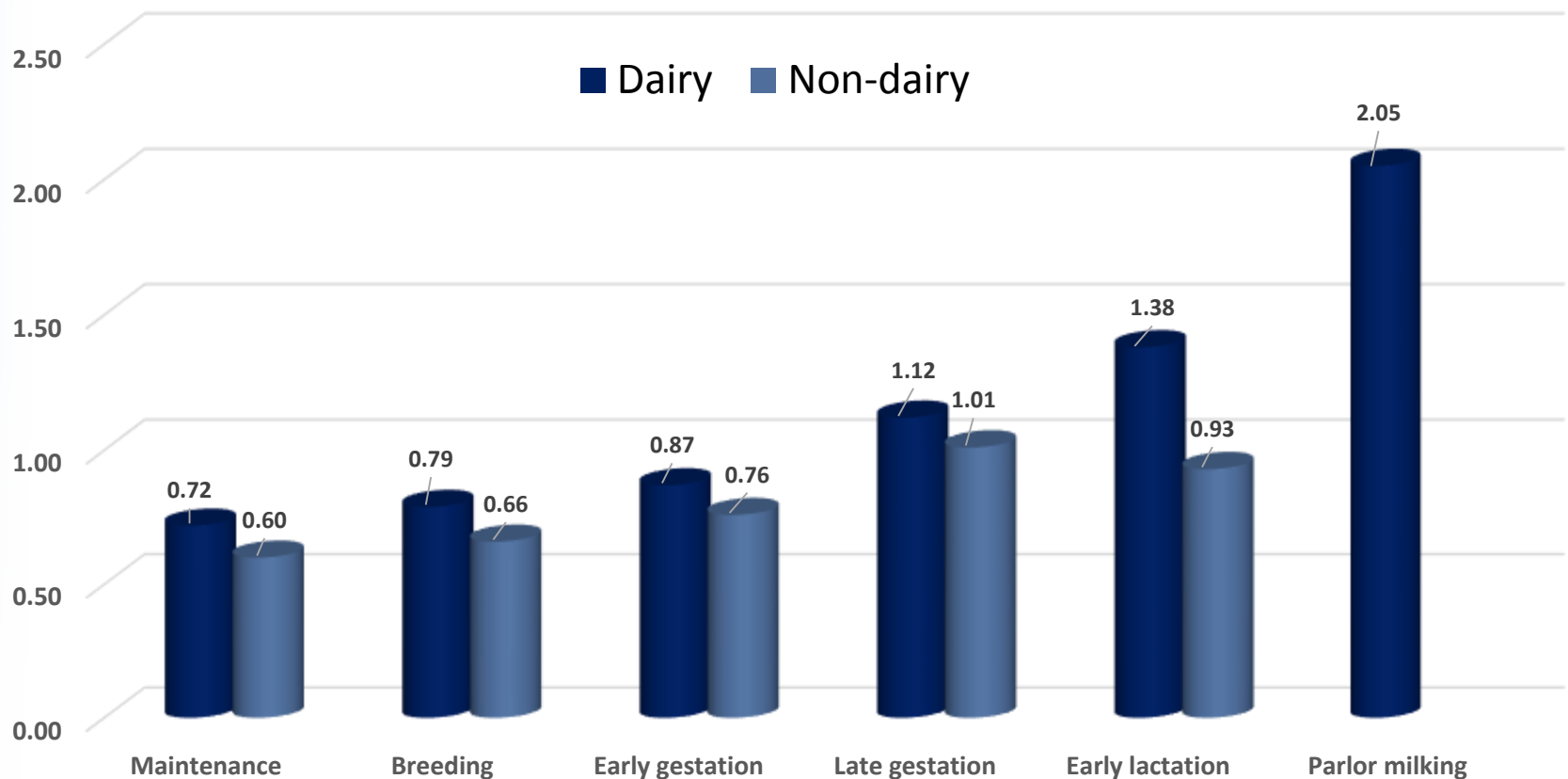
Early lactation (6-8 weeks)



Energy (TDN) requirements of a 132 lb. non-dairy doe, lbs./day

Dairy does have higher nutritional requirements than non-dairy does.

Energy (TDN) requirements of 132-lb does, lbs./day



Meeting energy requirements of 132-lb. non-dairy doe in late gestation

Requirements: 2.22 lbs. TDN per day

Orchardgrass hay

88% DM

59% TDN

Barley grain

89% DM

84% TDN

Feed 3 lbs. of orchardgrass hay per day

$3.0 \times 0.88 = 2.64$ lbs. DM

$2.64 \times 0.59 = 1.58$ lbs. TDN

$2.22 - 1.58 = 0.64$ lbs. difference

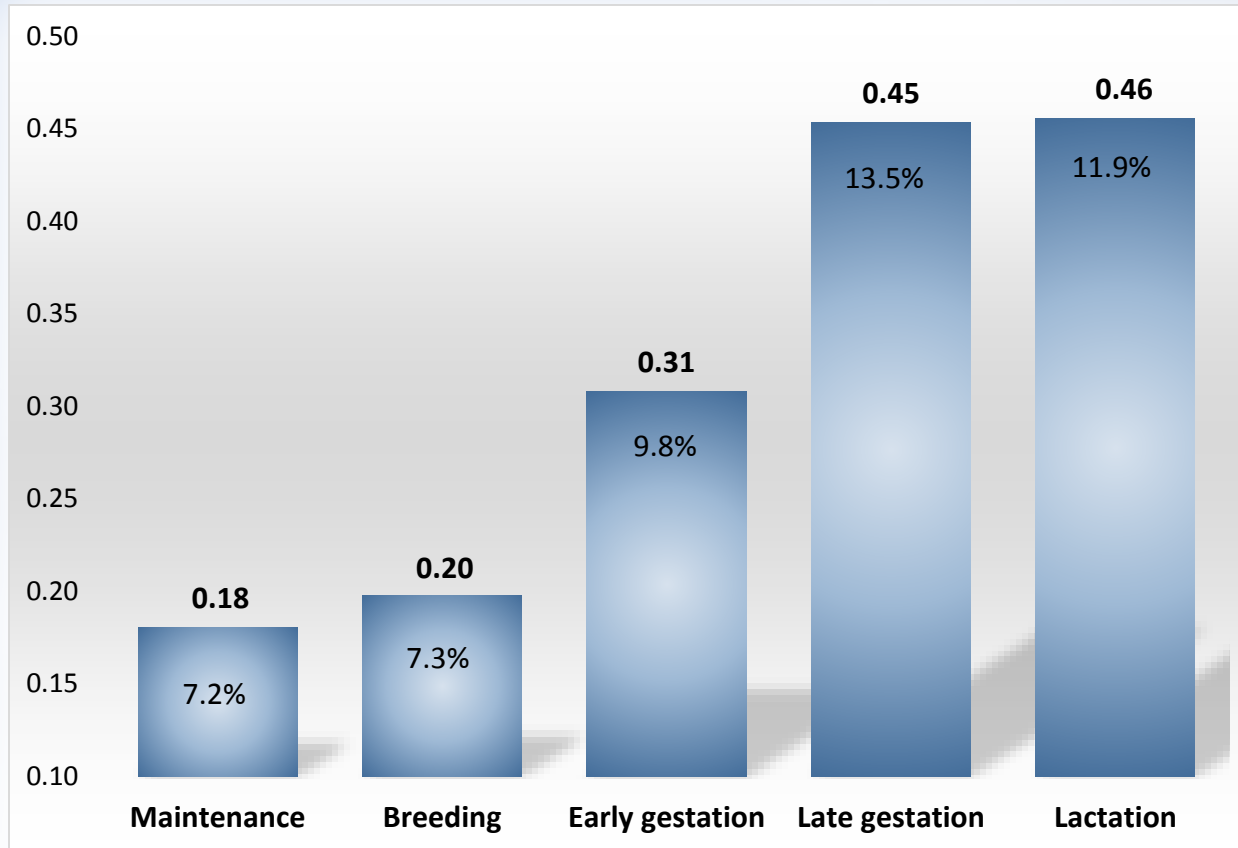
Feed barley to meet TDN requirements

$0.64 \div 0.84 = 0.73$ lbs. barley DM

$0.73 \div 0.89 = 0.82$ lbs. barley as-fed

Protein requirements of does

Protein requirements (CP) of a 132-lb. non-dairy doe (twins).



Percentage requirements are based on an assumed dry matter intake; if less dry matter is consumed, a higher protein (%) diet would be required.

Meeting protein requirements of 132-lb. non-dairy doe in late gestation

Requirements: 0.45 lbs. CP per day

Orchardgrass hay (3 lbs)

88% DM

10% CP

Barley grain (0.8 lbs)

89% DM

12% CP

Feed 3 lbs. of orchardgrass hay per day

$3.0 \div 0.88 = 2.64$ lbs. DM

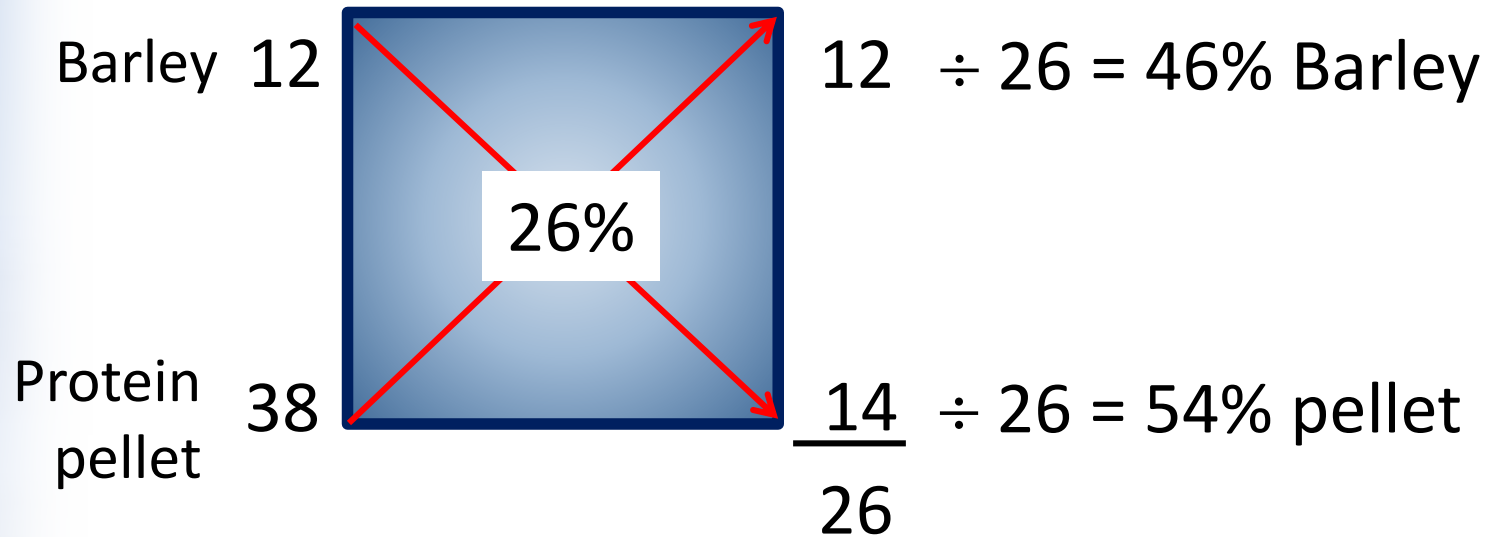
$2.64 \times 0.10 = 0.264$ lbs. CP

$0.45 - 0.26 = 0.19$ lb. difference

Concentrate portion of ration needs to contain 26% CP

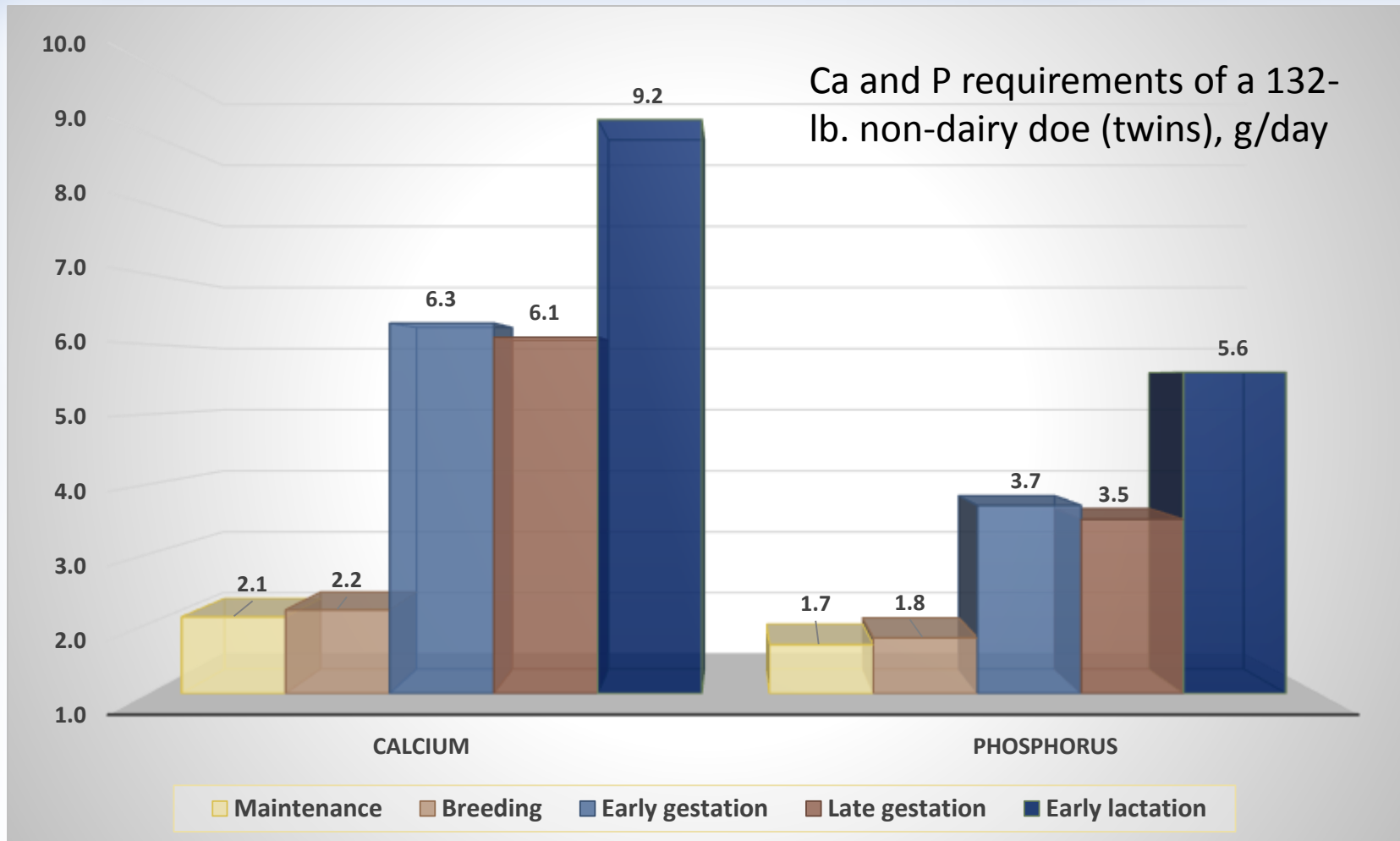
0.19 lb. DM \div 0.73 lb. DM

Pearson Square: a simple way to balance a ration for one nutrient, with two ingredients



~ 50:50 mix of barley to pellets

Calcium and phosphorus requirements of pregnant and lactating does



Two alternatives for feeding goats

✓ Feed balanced rations

- Balance rations by hand using simple math.
- Evaluate rations using a spreadsheet.
- Balance rations using Langston University's Online Nutrient Calculator.

- Weigh animals
- Weigh feed
- Test forages

Follow someone else's recommendations

Example: North Carolina State University

- Free choice trace minerals, w/Se
 - Free choice forage
 - When forage or browse is limited or of low quality (< 10% CP) feed 1 lb. of a 16% CP diet to pregnant and lactating does and developing bucks.
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- Use body condition scoring to monitor feeding program.

Poor nutrition during late gestation can have many negative consequences.

Underfeeding

- Inadequate energy intake can cause pregnancy toxemia (ketosis), birth of small/weak kids, higher kid mortality, and poor colostrum and milk production.
- Not enough calcium can cause milk fever in pregnant doe.
- Inadequate selenium in diet can cause white muscle disease in kids and other reproductive problems.

- Overfeeding can result in dystocia (difficult births), due to oversized fetuses and increased abdominal fat in does.
- Too much calcium can cause milk fever in lactating doe.
- Fat does are also more prone to pregnancy toxemia.
- Fat, lazy does
- Extra feed costs extra money!

Overfeeding

Metabolic problems of pregnant and lactating does

- Caused by insufficient consumption of energy during late gestation.
 - Old, fat does, carrying multiple fetuses are most prone.
 - Symptoms include off-feed, depression, lethargy, poor coordination, and recumbency.
 - Diagnosis based on lab tests and/or response to treatment.
 - Treat with glucose orally, subcutaneously, or intravenously, depending upon severity of symptoms.
 - Can induce labor or perform c-section in more advanced cases.
- Can be caused by not enough (gestational) or too much (lactational) calcium being consumed during late gestation.
 - Most common in heavy milking does and does carrying multiple fetuses.
 - Similar symptoms as pregnancy toxemia; often treated simultaneously.
 - Diagnosed with lab tests and/or response to treatment.
 - Treat with calcium orally, subcutaneously, or intravenously (slow), depending upon severity of symptoms.

Pregnancy toxemia (ketosis)

Low blood glucose

Milk fever (hypocalcemia)

Low blood calcium

Consider feeding a coccidiostat during late gestation to help prevent coccidiosis in new kid crop

Coccidiostats (Rx)

Feed/mineral

- Bovatec[®] (lasalocid)
- Rumensin[®] (monensin) ☠
- Deccox[®] (decoquinate)

Water

- Corid
- Sulfa drugs

- Do not treat coccidiosis; reduces shedding of oocytes into environment.
 - Must be fed several weeks ahead of risk period.
 - Reduces exposure of kids to coccidia organism.
-
- Coccidiostats (Rumensin[®] and Deccox[®]) may aid in the control of abortions caused by toxoplasmosis.

Clostridial vaccinations

- It is generally recommended that goats be vaccinated for certain clostridial diseases, especially enterotoxemia (overeating disease) and tetanus.
- There are several combination vaccines to choose from.
 1. CDT (most commonly used) provides protection against *clostridium perfringens* types C and D and tetanus.
 2. Covexin-8 provides protection against 8 clostridial bacteria, including CDT, black leg, and malignant edema.

Toxoid vs. Antitoxin

- Toxoids provide long term protection (immunity); however, immunity is not immediate and a series of shots is usually required.
- Toxoids are used to prevent disease.

- Antitoxins provide immediate short-term immunity.
- Antitoxins are used to prevent or treat disease.

Clostridial vaccinations: adults

- Vaccinate does during late pregnancy in order to transfer immunity to newborn kids via colostrum (first milk).
- If doe has never been vaccinated or vaccination status is unknown, give two vaccinations during late pregnancy, 3-4 weeks apart.
- Vaccinate bucks and wethers annually.
- Vaccines may not be as effective in goats as sheep; some producers booster every six months.



Clostridial vaccinations: kids

DAM VACCINATED

(and adequate colostrum consumption)

- Kids will acquire temporary, passive immunity when they consume their dam's colostrum.
- Vaccinate at approximately 6-8 weeks of age, when passive immunity wanes.
- Repeat in 3-4 weeks.

- Vaccinate feeder goats before putting them on feed.
- Make sure club goats have been vaccinated twice for CDT.

- Vaccinate at approximately 3-4 weeks of age.
- Earlier vaccinations may not be effective.
- Repeat in 3-4 weeks

- Can give antitoxins in event of disease outbreak or high risk.
- Can give tetanus antitoxin at the time of disbudding and/or castration.

DAM NOT VACCINATED

(or inadequate colostrum consumption)

Other vaccinations

What else can you (should you) vaccinate goats for?

- Abortion (ELDU, Rx)
Pre-breeding
- Caseous lymphadenitis
(goat, ~~sheep~~)
- Foot rot (ELDU)
(hard to find)
- Pneumonia
 - 1) *Pasteurella*
 - 2) Nasalgen
- Sore mouth (orf)
- Rabies (ELDU, Rx)



Sore mouth vaccination

Who?

- Kids in persistently infected herds
- Open herds that show a lot.
- Vaccinating a clean herd will introduce the virus to the farm.
- Can vaccinate does during late pregnancy.
- Kids shortly after birth or weaning
- Show goats at least 6 weeks before first show

When?

How?

- Scratch skin inside of ear, on under-side of tail, or on inside of thigh or flank (in non-lactating does).
- Wear gloves!
- 21-d withdrawal

To vaccinate or not to vaccinate

WHY?

- Manage disease risk.
- Prevent and control disease.
- Insurance against disease outbreak.
- Disease risk is high.
- Cost effective.
- Increase value of animals.
- Required by law (e.g. rabies).

WHY NOT?

- Disease risk is low.
- Not cost effective.
- Vaccine not effective.
- Too many side effects.
- No approved vaccine
- Withdrawal period too long
- It will introduce the disease to your farm, e.g. soremouth
- You're not going to do it right.

The periparturient egg rise (PPER)

- Does suffer a temporary loss of naturally-acquired immunity to parasites at the time of parturition.
- May start 2-4 weeks before kidding and last for up 6-8 weeks after; varies by breed, individual, and season.
- When kidding occurs in the spring, the eggs deposited during the PPER are largely responsible for the infections that kids acquire during summer grazing.
- The PPER is not as well documented in goats as sheep and is not well described for different kidding seasons.



Options for dealing with PPER

- Deworm does prior to breeding or after first killing frost to kill hypobiotic larvae.
- Deworm does prior to kidding (especially with late winter-spring kidding), with dewormer that is effective against hypobiotic larvae.
- Targeted selective treatment: only deworm those that require or would benefit from treatment, based on FAMACHA© score and 5 Point ✓©.
- Increase protein, especially by-pass protein, in late gestation ration.
- Keep does and kids indoors during risk period (late gestation-early lactation).



Other late gestation recommendations



- Remove bucks after desired breeding period.
- Feed and manage pregnant doelings separate from mature does until second breeding.
- Maintain stable groups; do not mix new animals together during late gestation.
- Provide plenty of feeder space.
- No abrupt changes in feed; gradually increase grain.
- Encourage exercise.
- Minimize stress.

Kidding time

- Most does kid on their own (and take care of their kids) without the need for assistance.
- If you did your job (management and nutrition), they can do their job.



Normal kidding

- ~ 5 month gestation period.
- Kidding usually occurs within 60 minutes of water bag breaking.
- Twins/triplets usually born within half hour of each other.
- Normal presentation is nose between two front feet (or backwards).
- Kids up in 15 minutes looking for teat.
- Afterbirth passed within hour or so of last birth.



Management of healthy newborn kids

Soon after birth

- Put in small pen (jug) for bonding and observation.
 - Indoor kidding
 - First-time moms
 - Multiple births
 - Mismatching
 - Crossfostering
- Clip - clip long navel cords
- Dip - disinfect navel cords
- Strip - remove wax plug from teat and check milk supply
- Sip - make sure kids nurse.

First day or two

- Make sure kids are getting enough to eat
 - Observe behavior of doe and kids
 - Check bellies for fullness
 - Check milk supply/udder health
- Record birthing event
- Identify kids, e.g. ear tags
- Weigh kids (for records)
- Bo-se injection, if advised by veterinarian (Rx).
- CDT vaccination may not be effective.

Care of doe after normal kidding

- Give plenty of water; some producers give warm water.
- Deworm, if you haven't done anything else to counter periparturient egg rise.
- Don't overfeed first few days after kidding; gradually increase ration.



Kidding-related problems

Before

- Pregnancy toxemia
- Milk fever
- Vaginal prolapse
- Dystocia (difficult birth)
 - Abortion
 - Malpresentation
 - Leg(s) back
 - Head back
 - Breech
 - Simultaneous births
 - Disproportionate size
 - Ringwomb
(failure of cervix to dilate)
- Injury or illness due to traumatic birth or disease
- Milk fever
- Uterine prolapse
- Retained placenta
- No milk
- Mastitis

After

Assisting with difficult births

- Check doe if she has not kidded within 60 minutes of water breaking.
- Use gloves or OB sleeves and plenty of lubricant when entering a doe.
- If no progress is made after 30 minutes of assistance, seek competent help from a veterinarian or more experienced producer.
- After assisting with a difficult birth, be sure to check for additional fetuses.
- After assisting with a difficult birth, give long-acting antibiotic to doe.



Colostrum: first milk

Colostrum is the best protection against so many things the kid may encounter in its young life.

Importance

- Newborn kids should consume approximately 10% of their body weight in colostrum during their first 18 hours (8 lb. kid = 12.8 oz).
- Colostrum only produced by doe for ~24 hours.
- Kid cannot absorb antibodies after first 24-36 hours.
- Important source of nutrients for newborn.

Options

- From dam*
 - From another doe in herd*
 - From another herd
 - Cow colostrum
 - Colostrum substitute (IgG) (e.g. Land O'Lakes)
-
- Colostrum supplement
 - Homemade colostrum
 - Milk replacer



Complications with newborn kids

Major causes of death

1. Starvation

- Difficult birth (dystocia)
- Inadequate intake of colostrum
- Competition from siblings
- Rejection by dam
- Inadequate milk production
- Udder/teat problems
- Disease or illness

• Bacterial scours (diarrhea)

- *E. coli*
- *Salmonella*
- *Clostridium perfringens* type C

• Pneumonia

- *Pasteurella*
- *Mycoplasma*

Other causes

2. Hypothermia

(Body temperature < 100 °F)

- Exposure
- Poor mothering
- Starvation

Artificially rearing kids

Milk options

- Goat milk
- Goat milk replacer
- Calf milk replacer
- Cow milk
- Waste milk

Feeding options

- Bottle-feeding
- Self-feed teat feeders (lamb bar, bucket)
- Open vessel



Tips for artificially rearing kids

- Opinions vary as to which kid(s) should be removed for artificial rearing.
- Feed in a clean, dry pen.
- Follow mixing directions on bag.
- If bottle feeding, follow feeding directions on bag.
- Feed cold milk to prevent overeating, scours, and abomasal bloat.
- Offer palatable feed (e.g. soybean meal, cracked corn) by 2 weeks of age.
- Opinions differ as to whether hay should be fed to artificially reared kids.
- Multiple vaccinations for CDT
- Wean early, 6-8 weeks of age, so long as kids are eating dry feed and weigh at least 20 lbs. (2.5 x birth weight).



Thank you for your attention. Questions? Comments?



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