



Sheep Management — Lambing Time

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A 1971 Idaho Sheep Commission survey found that 31 to 42 percent of lamb deaths occurred within the first 2 days after birth. Many of these losses can be prevented by proper care and management at lambing time.

• **Attending the Flock at Lambing Time.** Competent, experienced and conscientious help can make the difference between a successful lamb crop and high mortality. Ewes prefer to lamb alone and will often go off by themselves to lamb. As long as all goes well, leave them alone.

Signs of lambing include restlessness, raising the dock (tail), stretching, lying down with the head extended and obvious straining. A strong ewe will get up and down fairly often immediately preceding and often during delivery. It is nothing unusual.

Help only those ewes that really need it. Watch for a ewe in trouble, and act promptly before she gets into extended labor.

• **Recognizing Normal Presentation and Normal Delivery.** Deciding when to help and how to help a ewe with a difficult presentation comes with experience. The big problem in normal delivery is a tendency to help too soon. It is hard to tell whether a ewe is delivering normally or is in difficulty.

The total time span of a normal delivery is about 5 hours — 4 hours for dilation of the cervix and 1 hour for delivery of the lamb. After a ewe is in hard labor from 5 to 15 minutes, the front feet and nose of the lamb should appear. If not, make a careful examination for cervix dilation and completely relaxed muscles in the pelvic area. Normal birth should occur within one-half hour after hard labor starts (rupture of the water bag).

• **Watching for Abnormal Delivery.** Signs that a ewe's delivery is not progressing normally include:

- Continued straining but no sign of water bag.



- Continued straining for an hour after rupture of the first waterbag but without the appearance of the lamb at the vulva.

- Partial expulsion of the lamb.

The lamb may be presented normally but apparently may be wedged in the ewe's birth canal. Or, the lamb may be abnormally presented (one front leg and head or hind legs appearing at the vulva).

• **Preparing for Internal Examination.** Once it becomes apparent that there is a delay in the normal course of delivery, you may have to examine the ewe internally. The ewe should be brought inside for proper examination. If you or your attendant do not have knowledge of the lambing process and are not experienced in performing an internal examination, you must decide whether or not to call for assistance from an experienced shepherd or a veterinarian.

Cleanliness is important in order to prevent infecting the ewe. Wash the area around the ewe's vulva with soap and a mild disinfectant. Be sure to remove any dirt or manure. Hands and arms should be scrubbed clean with soap, rinsed with a mild disinfectant and lubricated with soap or an obstetrical cream. Plastic throw-away gloves are recommended.

• **Normal Presentation, Abnormal Delivery.** Insert the hand carefully through the vulva, and slide it up the vagina. In a case of pelvic impaction, the lamb will be presented normally with the head between the forelegs and the lamb's nose will be at the level of its knees.

Assistance may be required if it is a large lamb or if the ewe's pelvic canal is too small for normal delivery. Place the noose of an obstetrical strap over each of the legs of the lamb above the ankle. **Do not jerk!** Give a firm, steady pull, down slightly towards the hocks. Synchronize the pulling with the ewe's straining. Lubricate between the vaginal wall and

the lamb if the water bags have ruptured some time previously and the vagina is not adequately lubricated by natural fluids.

- **Abnormal Presentation, Abnormal Delivery.**

Internal examination of the ewe may indicate that the lamb is in an abnormal position such as:

- Head retracted — both legs and the side of the head can be felt.

- One of the front legs retracted — only the head and one leg can be felt.

- The hind legs presented instead of the normal front legs and head first.

- One hind leg retracted — the tail, rump and one hind leg can be felt.

- The rump and tail can be felt but no hind legs because they are retracted forward.

This is called a breech presentation, and such malpresentation must be corrected. Other malpresentations are possible. Twins may be presented with both heads present in the birth canal, or their legs may be intertwined. Malformed lambs may also cause complications necessitating assistance.

- **Providing Aftercare.** Be sure the lamb starts breathing soon after it has been born by cleaning the nostrils of mucus and uterine membranes. The ewe usually starts to lick the lamb soon after it has been expelled. This is natural and should be allowed to occur. Some ewes may eat the uterine membranes (afterbirth), but this should be prevented by providing fresh water and removing afterbirth immediately.

Good practice is to inject oxytocin (POP) immediately after delivery to stimulate uterine contractions, to reduce the uterus, to speed closure of the cervix and to stimulate milk flow. Keep hands out of uterus after delivery to prevent further uterine contamination. Inject a therapeutic dose of antibiotic to prevent uterine infection.

The lamb is now born, alive and should be breathing. If the lamb is alive and having breathing difficulties, you can use a veterinary aspirator to stimulate normal breathing.

To help keep newborn lambs alive if you are lambing outside in the "drop pen," use a low-wheeled cart to move them to a lambing shed rather than carrying them any great distance. Put the lambs in the cart, and the ewes will usually follow. Large operators usually have a maternity cart, trailer or sled to haul both ewes and lambs from the drop pen to the jugs.

- **Applying Tincture of Iodine.** Iodine should be applied to the navel as soon after birth as possible. Navel infection can result if treatment is delayed or not done. A wide-mouth (size of a silver dollar) container of iodine and scissors are helpful in applying iodine properly.

After the lamb has been checked and the navel disinfected, a good practice is to strip both of the ewe's teats to break the wax. This is also a good time to check the ewe for udder problems.

- **Suckling Process and Colostrum.** A healthy lamb struggles to its feet soon after birth and starts to nurse its mother. Weak lambs should be helped to nurse. The first milk (colostrum) is important to the lamb because it has a laxative effect and contains antibodies providing immediate protection against many diseases.

- **Chilled Lambs.** If you find a lamb that is chilled, weak and refuses to nurse, several methods can be used to revive it. A chilled lamb should be administered colostrum milk, rubbed until dry and warmed under a heat lamp, but not overheated. Another method to warm a chilled lamb is immersing its entire body, except the head, in warm water (100° to 120° F). If all goes well, the lamb should soon be nursing its mother.

- **Preventing Baby Lamb Starvation.** Lamb death losses are especially high at birth and within the first days after birth. In many cases, the cause is starvation. If the lamb cannot nurse by itself or with help, you still may be able to save its life by placing colostrum milk or other fluid directly into the rumen with a baby lamb (ovine esophageal) probe. This instrument, a stainless steel ball probe attached to a 50 cc pistol-grip syringe or a 2-ounce dose gun, is designed to prevent entry into the trachea, thus protecting against forcing fluids into the lungs. Use of the baby lamb probe is more fully explained in University of Idaho Current Information Series 339, *Prevent Baby Lamb Starvation*, available at your Extension county office.

- **Preventing White Muscle (Stiff Lamb) Disease.** White Muscle Disease can cause heavy mortality within a few days, several days or even 2 or 3 weeks after birth. In severe cases, the lamb may die immediately after birth. When skeletal muscles are affected, lambs show muscular weakness and unsteadiness. Heart muscle involvement results in rapid breathing, edema of the lungs and death.

You can prevent White Muscle Disease by providing selenium in the feed or salt. Ewes can be injected with selenium tocophoral 3 weeks before lambing. When White Muscle is diagnosed in a flock, inject all lambs at birth with a selenium-vitamin E preparation according to manufacturer's directions printed on the label.

- **Preventing Enterotoxemia (Overeating Disease).** This common but complex disease problem can be found in sheep of all ages but is a frequent cause of sudden death among thrifty, well-nourished lambs. It can occur among lambs of all ages, from birth to slaughter. Clostridium organisms are

present in sheep's intestines and in the soil. When digestion is disturbed, as with overeating, these bacteria grow rapidly and produce a deadly toxin. This poison is absorbed through the wall of the gut and causes death in a few hours.

Since no satisfactory treatment exists for the problem, prevention by vaccination is the only practical solution. Commercial clostridium vaccines are available that contain all of the necessary strains or types of clostridium. You can immunize simultaneously with one toxoid injection. Losses in young lambs up to 6 weeks old may be prevented by vaccinating pregnant ewes.

Ewes that have not been vaccinated previously should be vaccinated at 6 weeks and again 3 weeks before lambing. An annual booster vaccination 3 weeks before lambing is advisable. The lamb will be protected by colostral antibody until it is 5 or 6 weeks old, by which time the lamb itself should have been vaccinated. See University of Idaho CIS 525, *Enterotoxemia in Suckling Lambs* for a more complete explanation and recommendations concerning enterotoxemia.

Trade names are presented for information only. Neither endorsement is implied of those cited nor criticism intended of other products not named.

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• **Preventing Tetanus (Lockjaw).** Tetanus can be a problem and seems to be most common when using elastrator rubber bands for docking and castrating. However, the causative organism, commonly found in soil, may gain entrance to the body through wounds from docking, castration and vaccination. Elastrator bands are not recommended where tetanus is common to the area.

Immunization of the entire flock with the toxoid will give the best protection where tetanus is an annual problem. Ewes can be immunized with 2 injections 30 to 60 days apart. An annual booster is then given just before lambing.

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This publication is one of three written on sheep management. Other numbers and titles are University of Idaho Current Information Series No. 618, *Sheep Management — Prelambing*, and CIS 620, *Sheep Management — Postlambing*.

University of Idaho and Pacific Northwest researchers have authored several other publications on sheep. For a complete list of these numbers and titles, refer to University of Idaho Bulletin No. 401, *List of Available Publications*, which is in county offices of the UI Cooperative Extension Service.