Gynecological examination of mare IV.

Equine Clinic
Department of Reproduction
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Gynecological examination of the mare IV.

- Reproductive history of mare
- General health
- Perineal area assessment

- Rectal examination
- Rectal USG examination

- Vaginal examination

- Pathology - basic problems from gynecology and reproduction of mares
Pathology of the genital tract
- Cyclic abnormalities

**Acyclic**
- small inactive ovaries
- winter anestrus x season
- prolonged anestrus x sudden onset of the season
- poor condition, old age, pain, stress, systemic diseases, metabolic disorders

**Management:**
- addressing the primary cause (if resolvable)
- stimulation of sexual activity
  - photoperiod, nutrition, presence of stallion
  - hCG, progesterone (Altrenogest) - use limited
Pathology of the genital tract
- cyclic abnormalities

Persistent non-ovulatory follicle

- it is normal in transition period
- in older mares, end of season, chronic infection, prostaglandin use, hCG
- there is no answer to LH
- normal heat behavior, longer heat, follicle continues to grow

Management:
- hCG, deslorelin (not very successful), prostaglandins, risk of recurrence
Pathology of the genital tract  
- cyclic abnormalities

Persistent corpus luteum

- failure of prostaglandin secretion (chronic endometritis, pyometra)
- (not to be mistaken for CL from diestral ovulation)
- early embryonic loss - retention of endometrial cups

Management:
- combination of eFSH and hCG (not very successful), alternative methods: chiropractic, acupuncture, light mode
Pathology of the genital tract - endometritis

- infections penetrating the non-closed cervix (low level of hygiene in breeding, pneumovagina, puerperal complications)
- more often in older mares
- acute inflammation - shortening the cycle
- chronic inflammations - prolongation of the cycle

Clinical sings
- discharge
- content in the uterus (displayed by rectal USG examination)

Management:
- Flushing
- ATB
Uterine flusing

- fixation of mare, tying tail
- desinfection of external genital organs
- use of sterile sleeves + sterile irrigator
- introducing the irrigator into the uterus
- rinse with sterile saline
- the principle of connected vessels

**Purpose:**
- diagnostics
  (small wash volume - sampling bacteriology, cytology)
- therapy
  (large volume of irrigation – rinsing infectious agents and debris, application of ATB...)

Application of oxytocin-contractions will help eject the contents from the uterus
Video: Uterine flusing
Pathology of the genital tract
- pneumovagina

- aspiration of air into the vagina, irritation of the mucous membrane
- the cause is bad shaped perineum and rectum retraction
- seat bones less than 4 cm below the dorsal commissure

**Therapy:**
- Caslick’s operation
Caslick’s operation

Technique:
- introducing the mare into the examination cage
- sedation mares
- tail bandage
- washing and disinfection of the perineal area
- application of local anesthetic to mucocutaneous connection of labia
- cut about 0.5 cm wide layer in mucocutaneous connection to the bleeding substrate
- stitching from the dorsal commissary towards the ventral
- single nodal or simple follow-up stitch
- pulling out stitches in 10-14 days
- open before parturition
Video: Caslick’s operation
Literature

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