Management Of Retained Placenta In Large Southern California Dairy Herds

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Retention of the fetal membranes after twenty-four hours post partum is a condition that leads to the most confusing array of treatments known to many large animal veterinarians. Our practice in Chino, California has developed a protocal for the management of placental retention that at least the majority of veterinarians in our practice agree upon.

One of the major factors behind the development of this protocol is our large average herd size, approximately four hundred cows milking. This leads to a generally more sophisticated clientele capable of handling the majority of routine problems encountered on the dairy.

Prevention

Basically we approach retained placentas as a normal occurrence in approximately ten percent of all calvings. Should the incidence rise dramatically we begin to re-evaluate the management practices that could contribute to the problem.

The whole herd vaccination program should be reviewed if a problem is suspected. Any abortion causing diseases such as brucellosis, vibriosis and leptospirosis could be related to the problem. Herd vaccinal history should also include such viral antigens as IBR, BVD, and PI3. Many of these diseases can cause placental retention even if they are not quite severe enough to cause abortions. Any deficiencies are noted and corrected if necessary.

The dry cow period is an important time for prenatal care to prevent retained placentas. The nutrition of the dry cow is very important, in the prevention of excess fattening and also in maintaining calcium: phosphorus homeostasis for the periparturient period. Should any problems be noted here, we advise nutritional consultation as the next step. In our area, Vitamin A and Selenium are not known to be deficiency problems and although both are used occasionally, they are not a necessity.

The calving area is the next important aspect in the prevention of retained placentas. An ideal calving area should be clean and comfortable, not crowded, and well supervised by a responsible person. Any cow needing assistance should be examined and assisted at the proper time by qualified persons. Any cow requiring calcium therapy for milk fever should be treated as soon as possible.

The most common problems encountered with high population calving areas are linked to the maintenance of a "chain of infection" from one animal to the next . . .Ideally calving areas should include some idle time in the rotation or else provisions must be made to disinfect the premises at regular intervals.

Lay Treatment

Any cow retaining the fetal membranes after twenty-four hours post partum is classified as a "retained placenta" and entered as such on reproductive records for future reference. The herdsman/dairyman then begins the treatment program of placing two to three gelatin capsules filled with tetracycline hydrochloride powder (approximately one and a half to two grams per capsule or three to five grams total) into the uterus, being sure to place the capsules anterior to the cervix. This procedure must only be done after cleaning the perineal area with a good surgical soap and tying the cow's tail out of the way. This procedure is repeated daily or at least every other day until the placenta falls away on its own. It is inadvisable to attempt manual "cleaning" of the cow, by veterinarian or layman due to possible complications of septic metritis and impaired future fertility. The dairyman is instructed that if a cow becomes sick (febrile or off feed) that he begin parenteral antibiotic therapy and that if the cow does not respond rapidly, professional assistance should be requested.

Professional Treatment

If the cow has a fetid reddish discharge, often the uterus must be gently flushed and drained using a small stomach tube and an antiseptic solution such as Betadine or Zepharin in hot water. After pumping the fluid into the uterus, the exterior hose end is lowered and a siphon created, thus draining the fluid from the uterus. This may be repeated one or two times. Follow up treatment with from one to three mg of Ergonovine Maleate intramuscularly for one to two days often assists in expelling the fluid contents of the uterus.

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Follow-up

Cows that have had a severe metritis should be re-examined one or two times weekly and treated accordingly, either with a tetracycline or penicillin uterine infusion. For our regularly scheduled clients, routine post partum examinations include **all** cows at least three weeks post partum, **plus** more recently fresh cows recorded as retained placenta (R.P.) in the records. This assures the dairyman that all cows are ready to breed as soon as possible and helps prevent the development of pyometra and its obvious complications.

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