

## **Body wall tear in a Standardbred mare with live foal outcome**

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Body wall tears, such as prepubic tendon rupture in late term pregnant mares, are life threatening conditions; however some cases have been successfully managed until foaling. A ten-year-old multiparous Standardbred mare at 336 days in gestation was presented with a chief complaint of colic and elevated serum amyloid A (SAA). The mare was tachycardic, tachypnic, and had marked ventral edema that extended caudally. She had elevated creatinine kinase, aspartate aminotransferase, and SAA, and a mild neutrophilia with left shift. Reproductive examination revealed an active fetus with normal heart rate, combined thickness of the uterus and placenta of 13.4 mm and abnormal echogenicity of allantoic fluid which may be caused by placentitis. Gastrointestinal colic and uterine torsions were ruled out. Treatment with systemic broad-spectrum antimicrobials, anti-inflammatory drugs and pain management was instituted. The following day, ultrasonographic examination of the ventral body wall revealed the caudal portion of the rectus abdominal muscle to have a superficial partial tear bilaterally. Medical management of abdominal wall disease was elected in attempt to save both foal and mare. An abdominal support bandage was applied and the mare was monitored hourly. The mare developed bloody mammary secretions on day 4 and foaled on day 5 after presentation. The foal was in dorsosacral position which was corrected and a large filly was delivered alive per vagina. The filly became septic but was successfully treated and then grafted onto a nurse mare before being discharged. Ultrasonography after foaling showed the mare to have a complete bilateral prepubic tendon rupture. A year following discharge, both the filly and mare are alive. The mare is being used as an embryo transfer donor.