

Metabolic diseases

Hypocalcaemia (Parturient Paresis)

Parturient paresis is caused by a decrease in calcium intake under conditions of increased calcium requirements, usually during late gestation. This results in a low serum calcium concentration, particularly in animals pregnant with multiple fetuses. Parturient paresis can occur at any time from 6 week before to 10 week after parturition. Low blood calcium concentration usually 3rd to 4th day after lambing → mobilization of stored calcium can be inadequate to meet the animal's needs, especially, in older ewes. Some cases are complicated by concurrent pregnancy toxemia.

ETIOLOGY: Reduced feed intake, Reduced intestinal motility, Vitamin D deficiency, which occurs in housed ruminants during winter months, also depresses calcium absorption from the GI tract. Low content of phosphorus in the ration, Incorrect Ca: P ratio.

CLINICAL SIGNS: the most commonly signs are stiff gait, ataxia, salivation, constipation, and depressed rumen motility, progressing to hyposensitivity, bloat, recumbency, loss of anal reflex and, if untreated, death. Tachycardia may be present. Often when recumbent, ewes are in a sternal frog-lying position, with the hindlegs extended behind.

DIAGNOSIS: based on the history and clinical signs, can be confirmed by testing serum calcium levels before treatment. Urine ketone or serum β -hydroxybutyrate levels should always be evaluated at the same time. The pH of urine >8.0 indication of alkalization.