For many producers, lambing season is not far away. When a ewe begins labor, the moment of truth has arrived. If that ewe doesn’t give birth to one or more live lambs, our entire investment in that ewe is lost for one year. If we have managed properly to prevent lamb losses due to pregnancy toxemia and infections that cause abortions in our pregnant ewes, getting live lambs on the ground is generally taken care of by the ewe and mother nature. Unfortunately, however, we all have a number of ewes that mother nature has overlooked during her busy schedule and we are forced to assume the role of obstetrician or midwife.

Difficult birth, or dystocia, is a problem that should be expected, since it occurs rather frequently. Therefore, we should be properly equipped to handle the problem effectively when it does occur. Most difficult births can be corrected by the shepherd, if he or she has a reasonable understanding of why there is a problem and what must be done to correct the problem. I have seen people “assist” ewes in some terrible ways. The theory seems to be “if I can get hold of anything and pull hard enough, something has got to give.” That theory is sometimes correct, but also results in dead lambs or damaged ewes. The art of obstetrics is the combined application of knowledge, cleanliness, gentleness, patience, and interest.

Generally speaking, dystocia is the result of abnormal position of the unborn lamb in the uterus or birth canal. Normal positioning is either the head and two front feet (Fig. 1), or a backward presentation with the two rear feet coming first (Fig. 2). Although the backward presentation might very well be considered an abnormal position, either of these two positions are considered normal from the standpoint of delivering the lamb.
by assisting the ewe. The following discussion of abnormal fetal positions and their correction is intended to familiarize you with the most common problems and, hopefully, correcting the problem will be easier.

Locked Elbows--When there is not enough room in the birth canal (pelvic canal) to allow passage of the normal positioned head and front feet birth, a common form of dystocia results wherein the head is forced into the canal and the elbows are forced downward (Fig. 3). In effect, the elbows are essentially locked behind the pelvis and the more forceful the ewe’s labor, the tighter the lamb becomes locked. This situation occurs more frequently in ewe lambs bred to lambs as yearlings, but also in mature ewes giving birth to a large single lamb. The condition is diagnosed simply.

After half an hour, only the tip of the lamb’s nose and its toes are seen protruding through the birth canal. Prolonged, excessive pressure from a laboring ewe can cause death in this type of lamb, so don’t hesitate to assist her. With one hand we gently push the lamb’s head back into the birth canal (just enough to relieve the pressure against the legs) and, at the same time and with the other hand, pull on one front foot until we feel the elbow pop out of its locked position and slide smoothly into the canal. Grasp the other foot and pull gently, unlocking the other elbow, and the lamb is in the normal position, ready for delivery. This is accomplished by sliding the fingers of one hand over the back of the head of the lamb, grasping the two front legs with the other hand, and exerting a gentle pull with both hands simultaneously.

Front Leg Back--Lambs are frequently positioned with one front leg back (Fig. 4). Although many of these lambs can be delivered in this position, particularly if the lamb is small, I prefer to go ahead and get the malpositioned leg out and in normal position. The manipulation is easily accomplished by entering the birth canal with one hand, proceeding back along the shoulder until the foot of the turned back front leg is located. Grasp the foot with cupped hand to avoid lacerating the uterus as the foot is drawn up and into the birth canal until it is in a normal position (Fig. 1). Occasionally the lamb will be jammed into the pelvic canal which may require pushing the entire lamb back into the uterus to allow room to accomplish the manipulation.
Head Back—Another common position causing dystocia is when the lamb begins its way through the birth canal, both front feet and nose together, but because of either a small birth canal or the large size of the lamb, the head is forced back and to one side (Fig. 5). This is one situation when the novice is tempted to grab those two front feet and start pulling. Don’t do it! Gently insert one hand through the birth canal, proceed back along the lamb until the head is located, grasp the head, and withdraw it until the lamb is in the normal lambing position (Fig. 1). Now, with one hand cupped over the top of the lamb’s head and the other hand pulling gently on the two front legs, the lamb is delivered. Note, don’t be surprised if you find yourself up to your shoulder in a ewe before you can locate the lamb’s head. They can be a long way down in there. Just be sure and keep the toe of one boot hooked through a panel for safety!

Front Legs Back—This is another very common form of dystocia but, generally, one that is easily corrected. By referring to Figure 6, correction of the problem is simply a matter of entering the birth canal with one hand, sliding down the lamb’s neck, and across the shoulder to the foot. The foot is grasped in cupped hand, flexed and drawn through the birth canal. Repeat this procedure with the other foot and deliver the lamb. Note—in attempting to withdraw either foot, the lamb may have to be pushed back into the uterus (slightly) to allow room to withdraw the foot.

No Legs or Head—The first time you enter the birth canal of a ewe with this type of malpositioned lamb (Fig. 7), I would predict that you will react in one of the following ways: (1) groan, (2) curse,
(3) attempt to appear calm, especially if someone is watching you, or (4) faint I have experienced the first three, but as yet have never passed out. Back to Figure 7, we can see that there are two alternatives: (1) position the lamb for a backward delivery, or (2) position the lamb for a normal two front legs and head delivery. The initial challenge, however, will be to diagnose the problem. After entering the birth canal and locating the lamb, move your hand up, down, and across the lamb until you can decide what’s what. Then determine the most logical course of action. If you pull back on the lamb’s rump, it is likely that the lamb will either be upside down or on its side. Before the backward delivery can be made, both back feet must be withdrawn, one at a time, and the hind legs crossed. By grasping one hind foot in each hand and twisting while the lamb is pulled, the lamb will be rotated into an upright position. Don’t attempt to pull the lamb upside down! When delivering a lamb backward or hind feet first, the lamb must be delivered rather rapidly.

As soon as the umbilical cord breaks, the lamb will take its first breath. In the case of the backward delivery, this invariably occurs while the lamb’s head is still in the uterus where inhalation of uterine fluid is likely to occur. This will result in actual drowning of the lamb, so proceed with some haste.

**Breech Presentation**--The breech lamb (Fig. 8) is easily diagnosed after entering the birth canal. Momentary confusion is followed by discovery of the lamb’s tail, which signifies that “Ah, this is going to be an easy one.” Slide one hand, palm up, under and forward until a hind foot can be grasped in cupped hand. Flex the foot and withdraw it into the birth canal. Repeat the procedure with the other rear leg.

With both hind feet in the birth canal, simply grasp them both and deliver the lamb, forthwith.

![Figure 8](image)

**Figure 8**
*(Breech Presentation)*

**Four Feet, Single Lamb**--The lamb shown in Figure 9 presents an advanced lesson in figuring out what’s what.

Obviously, we cannot deliver the lamb by pulling on one rear leg and one front leg simultaneously. Therefore, the lamb, and legs, must be examined and either the two rear legs or two front legs identified. In order to simplify the procedure, I would probably grasp the lamb’s head and draw it back toward the birth canal. This gets the lamb somewhat straightened out, making the task

![Figure 9](image)

**Figure 9**
*(Four Feet, Single Lamb)*
of front leg identification and withdrawal a simple matter.

**Figure 10**
(Twins, Front & Back)

Twins, Front and Back—If all twin lamb dystocias were positioned as shown in Figure 10, delivering lambs would be nothing short of total pleasure. After entering the birth canal and finding paws protruding, just take an extra deep breath and proceed very slowly. Enter the birth canal with one hand and locate the head in the normal position. Slide your hand down the lamb’s shoulders and locate the legs that go with that head. Sounds simple enough but, for some reason, the procedure doesn’t always work out that way in practice.

I have encountered this situation on several occasions and have momentarily concluded that this isn’t a lamb at all, but a bloomin’ octopus. However, after re-gathering my calm, getting the right legs and head under tow, that first lamb can be delivered. It is generally necessary to push the second lamb back into the uterus before the first lamb can be delivered. Then it’s back in again, grasp the front legs of the second lamb, and draw them into the birth canal and hang on. The lamb’s head is located with the other hand, brought into normal position, and the lamb delivered with both hands.

**Figure 11**
(Four Legs, One Head)

Conclusion—After reading these articles on sheep obstetrics, and if you have never assisted a ewe during difficult birth, you may conclude (erroneously) that delivering these lambs is going to be a piece of cake. On the other hand, if you’re an experienced lamber, you will recognize my over-simplification of lambing problems. I do think, however, that the graphic illustrations will enhance your ability to diagnose the problems. Some people enjoy obstetrics while others shudder at the thought of it. If you have the interest and enjoy the terrible mess, you are likely to be a very good lamber. Otherwise, call your vet, as you may do more harm than good.