

Castration Concerns for the Equine Owner

Why should I castrate?

Unless a male is to be used for breeding, he should be castrated for both his and your quality of life. As a male, the potential for a more aggressive personality should be expected, even if housed away from mares or jennies. Intact, his behavior will be less trustworthy and more dangerous, especially for anyone uncomfortable or less experienced with handling animals, especially equids presenting with problem behaviors.

Because of the unpredictability of intact males and the trust that children generally expect of animals, children are at greater risk to be injured. In addition, equines are very social animals and living in solitary confinement denies them the opportunity to experience the best quality of life. Solitary confinement is the unfortunate fate for society's most dangerous individuals, regardless of species.

Just because a stallion/jack has a history of breeding, whether young or old, doesn't mean that he needs to remain intact. Stallions/jacks over twenty years of age have been castrated without complications.

Anytime a mature animal is castrated, it will take him a considerable time for his behavior to mellow.

The length of time required for post-castration behavior modification is also affected by time of year. Males castrated in the fall and winter will likely behave more like a gelding by the next spring, while those castrated in the spring and summer may take until the next spring to fully modify their behavior.

It is important to realize that some of a male's behavior is learned and may not fully change, but aggression should be markedly reduced. He may still get excited and respond in the presence of a mare/jenny in heat and get an erection, but he will be much less likely to fight with other geldings.

Prior to castration

Check with your veterinarian to see if he/she has any pre-castration requirements. Some veterinarians may want food withheld for a number of hours prior to the castration, while others may not.

Some of these requirements are based on the anesthetics to be used, as well as the preferences of the veterinarian.

A very important requirement for castration is a current tetanus vaccination. If not recently vaccinated or if there is any doubt regarding vaccination status, a tetanus toxoid vaccine should be given, followed by a booster in 3-4 weeks. If equine owners have any health concerns about their stallion/jack, they should discuss these issues with their veterinarian.

At the time of the castration, it is very important that a complete physical examination is done. This allows the veterinarian to make sure that the heart and lungs are normal which is a very important requirement prior to anesthesia. A normal temperature gives some assurance that there are no major infectious problems brewing.

As a part of the physical examination, the weight of the stallion/jack may be determined in a number of ways: close estimates by individuals good at estimating weight, a weight tape, or actual weight determined on a scale. In most instances, prior experience or a weight tape is used.

Castration procedure

The castration procedure will vary depending upon whether a stallion or jack is to be castrated. Some veterinarians prefer to castrate stallions while they are standing up and others prefer the animal to be recumbent. However, if the animal is of small stature, such as a pony, miniature horse, or a donkey, they must be castrated laying down.

A down castration requires a clean, dry area of an appropriate size to allow the veterinarian to safely administer the anesthetic drugs and to allow the male to be laid down in the correct manner. An ideal location would be a nice grass lawn, but other alternatives would be a large straw-bedded stall, or the veterinarian's clinic. If available, the veterinarian may use his/her surgical (operating) room, but this is not a necessity for a routine castration.

When the castration is complete, the gelding is kept in a quiet circumstance until he is ready to stand to minimize injury. Until standing, the animal must be supervised by the veterinarian. Once standing, access to any feedstuffs should be restricted for at least 30-60 minutes in order to avoid the possibility of choke.

One advantage when castrating donkeys is that there are fewer concerns relative to their recovery from anesthesia. Unlike horses that often panic and try to stand prior to their being able to stand, donkeys, even when they are not handled very much, will not attempt to stand until capable of standing.

However, due to potential bleeding problems after castration in donkeys, especially in older jacks, it is common to ligate (tie) the spermatic cord prior to placing the emasculators.

Stallions that are castrated while standing require no special facilities. The scrotal area is washed if his temperament permits, prior to

anesthesia. The drugs used will allow the stallion to remain standing but will provide adequate pain relief. As with the down castration, access to any feedstuffs should be restricted for at least 30-60 minutes in order to avoid the possibility of choke.

Postoperative care:

There are two things that ensure a successful castration: long incisions for good drainage provided by the veterinarian, and plenty of exercise to prevent premature closure of incisions, provided by the owner.

After the castration is complete, swelling of the surgical site should be expected due to the trauma of surgery. The amount of swelling can be minimized by providing access to a dry pasture or turnout, and forcing exercise at a trot, twice a day for ten minutes minimum for the first 7 to 10 days post-castration.

It is important not to place the gelding in a muddy area, as he may kick up some mud into his incisions and get an infection. Also, if the incisions close prematurely before the internal healing has occurred, fluid can accumulate and an infection can result.

If the spermatic cords are tied, the foreign material (suture) may create conditions for an infection to occur. Therefore, the donkey may be placed on a 5-7 day course of antibiotics.

Some veterinarians also administer an anti-inflammatory drugs, such as phenylbutazone (bute) or flunixin meglumine, for a few days to reduce swelling and pain.

Complete healing of the incisions will take several weeks, but most of the swelling, infections, or other problems, will occur in the first 7-10 days.

Concerns and post-operative complications

The most common post-operative concern is excessive swelling of the area. This can usually be corrected by providing more forced exercise, if the incisions are still open and the new gelding is bright, alert and still eating well.

If the gelding is depressed, not eating well, or has a fever greater than 102° F, the owner needs to consult with their veterinarian. The gelding may need to be placed on antibiotics or the prescription changed, if he is already on antibiotics.

Additionally, the incisions may need to be reopened, anti-inflammatory drugs may need to be started, or other potential complications be ruled-out.

How much bleeding is too much? In the first 30-60 minutes after castration, bleeding may seem excessive to the owner, but remember that there are two 2-6" incisions that have been made in the scrotum, and some bleeding is to be expected. That bleeding still occurs, even with ligation of the spermatic cords.

In a normal individual, the clotting process takes a period of time. Individuals under 6-8 months of age will bleed less, regardless of the method used for castration. Mature males, with larger testicles or those that have been used for breeding in the past, will bleed more.

After the first few hours, there should be minimal drainage; however, some light-yellow to pinkish-red fluid may be seen dripping or be visible on the hind legs for several days post-castration, especially after exercise.

The veterinarian can provide some guidelines as to the amount of bleeding that may be a cause for concern for the particular animal. If at any point during the healing process the owner has any concerns, the veterinarian should be contacted.

Occasionally, the spermatic cord will develop a serious infection and an abscess may form. This condition is called scirrhus cord. These infections need to be aggressively treated by the veterinarian and often require long-term antibiotics, and subsequent surgery to remove the infected tissue.

Rarely, herniation post-castration may occur. At the time of birth, in the normal male, the testicles are supposed to be descended into the scrotum as there is communication between the abdomen and the scrotum.

Once testicles are removed (*open* castration) and if the inguinal ring(s) is sufficiently large, abdominal contents have the potential to descend through

the inguinal canal, resulting in herniation of abdominal contents, e.g. intestines may prolapse through the incisions. This is a life-threatening emergency and requires *immediate* veterinary care.

It is important to keep the recently castrated gelding separated from mares/jennies for at least 4 to 6 weeks. Viable sperm may be found in the ejaculate for up to three weeks after castration. These sperm have been located in the pelvic area of the gelding, in the area that was the sperm-storage area for the intact male (ampullae). While fertilization may be less likely, the possibility still exists.

Castration gives even the older male an opportunity for a loving home when otherwise no one may find him desirable. Now that the gelding is "new & improved" the owner can look forward to many years of use and companionship.

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