

Tube Feeding Kids

By Maggie Leman

The REAL first step to tube feeding is to bank colostrum for emergencies. I freeze my banked colostrum in 20 cc syringes, capping them with a clean needle, putting them in a gallon Ziploc and labeling them with the donor doe's name and date of collection. Store your banked colostrum in a deep freeze, not a frost-free freezer if at all possible. A frost-free freezer goes through a brief warming and drying cycle daily, shortening the shelf life of the colostrum. Having the colostrum in syringes makes it a breeze to thaw and warm one for each kid in a big insulated mug of hot tap water. The best colostrum comes from 3 to 6 year old does, they will have been exposed to more of the farm's germs and build up more antibodies. Colostrum collected about 8 hours after birth is more pure, not yet diluted by milk. And don't let stillborn kids be a total tragedy, bank that doe's wonderful bounty of colostrum to save another kid's life!

If you are going to breed goats and have kids you need to learn to tube feed. This simple procedure saves lives and takes only minutes. It reduces the stress for newborns and owners alike. Tube feeding insures the kid gets a *good* meal, they need *ounces* not a drops for survival. You KNOW for sure they are getting what they need when they need it. It prevents aspiration pneumonia from dribbling milk or colostrum into the mouth of an uncooperative, crying and weak kid. An ounce or so of warm colostrum and a good warming up will often save a nearly frozen kid, putting them back by their dam's side in no time. I feed 20 cc at a time waiting 30 to 45 minutes between feedings if multiple feedings are necessary.

When tube feeding the colostrum doesn't have to be very warm either, like it would have to be for a kid to willingly take it from a bottle. Over warming colostrum destroys the antibodies and can turn the liquid gold into rubbery goop. I just get it to about warm room temperature to avoid shocking the kid's system.

I even use it for perfectly healthy newborns, especially those born in the wee hours, when I don't want to feel obliged to wait around to see them nurse. Usually they are bumping around doing all the right stuff, but maybe haven't gotten hooked up quite yet. This way if mom is a bit slow getting up, and who wouldn't be after birthing twins, the kids are already fed a bit and have time to wait on mom. I can tube them and go lay on the couch in comfort and watch the new family bond on my barn cam. I use it as a way to give BoSe, CD antitoxin and a "jumpstart". Our area is very deficient in selenium and we have had some issues with enterotoxemia killing newborns and I hate sticking a needle into a newborn kid. I draw up their meds in another syringe tube it in first and follow it with 20 cc of warm colostrum and leave them with mom to figure out where the next meal comes from. I usually tube feed any bottle babies with all the colostrum they require, 10 percent of their body weight or about 90 cc for the average pygmy kid. Then I teach them to take a bottle of milk.

The first step is to have the proper equipment. You need a catheter, sized 18 french, and a 20 to 60 cc syringe. The weak kid feeding tube and syringe sold by most livestock supply companies is a bit too big for pygmies. Ask your vet to get you one.

It is easier to tube feed if you have someone to help hold the kid, but I have done it by myself. Measure the catheter along the kid's body from the lips to just past the last rib, following the curve of the neck and lower chest. Mark the top end for the depth of insertion. I like to soak the catheter in very warm water (along with the thawing colostrum) to make it even softer. Lube it with water, milk, vegetable oil or even a bit of lube. Open the kid's mouth slightly by inserting your thumb in the gap between the front teeth and molars and insert the tube going over the back of the tongue and down the throat. You should be able to feel the tip of the tube go by your fingers if you firmly press around the trachea, but I usually keep my finger in the kid's mouth until I have finished inserting the tube. The kid will usually swallow while chewing on the tube. Insert it to the mark, this way you KNOW you have gone into the stomach not into the lungs. The passageway into the lungs gets narrow and branches making it impossible to pass the tube into the lungs to the insertion mark. It is also nearly impossible to insert a tube such as this into a conscious kid. Now attach the syringe full of colostrum or milk and very slowly inject it. Detach the syringe draw up a bit of air, about 3 cc, and reattach it and inject that, clearing the tube of most of the liquid. Fold or pinch the tube off and gently withdraw the tube. You're done; the kid is fed!