



Weak Kid Syndrome

It is important to distinguish between Weak Starving Kid and Floppy Kid Syndrome.

Floppy Kid Syndrome

Have you ever had a kid that is perfectly normal at birth and then at 7-10 days suddenly appears floppy with profound muscular weakness, anorexia, cannot use their tongue to suckle but no sign of diarrhoea, respiratory distress or dehydration? The kid may have what is called 'Floppy Kid Syndrome' (FKS) which is a metabolic acidosis. The condition does appear to happen more commonly in kids that are bottle fed but it can still occur in those kids feeding off their dam. FKS commonly occurs when a kid has overfed on milk and it is unable to digest the contents of its stomach quickly enough before the next milk feed goes in. This produces a toxic situation in the kid's stomach.

There are other conditions that can cause profound muscular weakness or an acidotic kid and these include; White muscle disease (Selenium/Vitamin E deficiency), Botulism, Colibacillosis, Septicaemia and Enterotoxaemia (Clostridial).



Treatment of the condition must be swift in order to save the kid; some kids will spontaneously recover but most get progressively weaker and die. Early detection of the condition makes treatment much more effective. Correction of the acidosis can be done with sodium bicarbonate or a liquid antacid. Some kids respond well to one treatment and others require repeated treatments and supportive care.

Take the kid off milk for approximately 36 hours and substitute electrolytes+ sodium bicarbonate (baking soda) in place of milk. 1 teaspoon of baking soda + 240ml electrolytes warmed and mixed thoroughly. If the kid is not suckling a stomach tube would be required. Give the kid 30-60ml of electrolyte/baking soda mix every 2 hours. Antibiotics are usually warranted which you would need to discuss with your private veterinarian. If the kid is severely affected, then Intravenous fluids may be necessary to save the kid's life. It is recommended that the

kid returns to milk when the faeces have returned to normal and the kid is able to stand and nurse again.

Weak Kid

A weak kid can be due to a number of reasons; hypothermia, a stressful birth, insufficient milk from the mother, bullying from siblings, malnutrition of the dam or the doe infected with a disease that can cause abortion and cut off placental food supply leading to production of weak kids. Treatment of these weak kids depends on their age since birth, their temperature and their ability to hold themselves up.

Kids that are less than 5 hours old with a temperature <37C, need to be dried thoroughly and warmed to >37C over 30-60 minutes. This can be done with a hot air box or fan heater. Ensure the kid is then given colostrum either by bottle or stomach tube. Kids require 50ml/kg bodyweight of colostrum.

Kids greater than 5 hours of age, with a temperature < 37C that are able to hold up their head; needs to be dried thoroughly, warmed up over 30-60mins to >37C and then given 10ml/kg bodyweight of 20% glucose solution via stomach tube. Glucose is usually bought as a 40% solution so it would need to be diluted 1:1 with sterile water. These are good to have in your medical kits at home ready in case of an emergency.

Kids that are greater than 5 hours old that have a temperature <37C and unable to hold up their heads are hypoglycaemic and hypothermic. These kids require a 20% glucose injection into their abdominal cavity (Peritoneal cavity) before the kid is warmed up. Initially dry the kid thoroughly then give 10ml/kg bodyweight of 20% glucose into the peritoneal cavity. These kids need the hypoglycaemia reversed before

warming otherwise the kid will convulse and die. Once the hypoglycaemia is reversed the kid can be warmed up over 30-60minutes. Once the suckle reflex returns, the kid can have warmed colostrum fed via a stomach tube.

What do I need in my 'Kid Kit'?

- Rectal thermometer
- Frozen colostrum to have on hand (Thaw frozen colostrum in warm water bath, do not microwave it!)
- Kid stomach tube and feeding syringe
- Warming box or fan heater
- Glucose solution
- Sterile water
- 60ml syringe and 20 gauge needle

How to administer abdominal cavity injection

- Have your 20% glucose solution ready (10ml/kg body weight) in a syringe
- Hold the kid up under the forelimbs
- Injection site is 1cm to side and 2cm behind umbilicus towards the anus. Place the needle in at a 45 degree angle towards the rump
- Place the needle in first and ensure nothing appears in the hub of the needle (blood or milk) If something appears in the needle you need to change the position and the needle



If you have any further questions please send me an email at kylie.greentree@lls.nsw.gov.au

Warning Goat Spam: The photo below just shows some of the cute little kids I get to hang out with on my property visits!



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