Introduction

What will this book tell me?

This booklet offers a unique perspective on breastfeeding by covering information that supports parents’ wish for their babies to breastfeed and adapting it to the specific experience of breastfeeding multiples. It draws on the experiences of other parents of multiples and looks at a variety of approaches they have used. It also suggests sources of further information and support.

In addition to reading this booklet you may find it helpful to read a general book about breastfeeding and if possible attend an antenatal breastfeeding class. Even if the class is not specifically about breastfeeding multiples it will be helpful for you to understand more about breastfeeding. You may wish to research the support offered within your area from health professionals and other organisations (see the section on ‘Further Information’ at the back of the booklet).

In this booklet we use ‘him’ and ‘he’ for the babies to allow us to use ‘her’ and ‘she’ for the mother. All the information is relevant to feeding triplets and more with an additional section discussing their particular challenges. We also discuss the role of partners and supporters and the role they play in supporting the breastfeeding mother.

We’ve included lots of parents’ stories in this booklet both to give you ideas but also confidence that you can do it – after all they are proof it is not only possible but can be enjoyable too!

Breastfeeding my twins was one of the most rewarding things I’ve ever done. It was difficult in the beginning but I am so glad I persevered.

The first few months were a desperate race to get them to gain weight but now we feed for pleasure. I love looking into their little faces as they’re feeding, they look so ecstatically contented and they’re always a bit ‘drunk’ afterwards.

I found breastfeeding both to be very enjoyable and actually missed it when they stopped. Having that quiet time with them was a joy.

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I love looking into their little faces as they’re feeding, they look so ecstatically contented and they’re always a bit ‘drunk’ afterwards.
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Whilst every care is taken to provide information, Tamba does not undertake any liability for any error or omission. Readers should seek professional or expert advice as appropriate to specific circumstances. Tamba cannot be held responsible for the content of any external websites that are referenced.
‘WHY MIGHT I WANT TO CONSIDER BREASTFEEDING TWINS OR MORE? ’
Breastfeeding provides your babies with the optimum food for their growth and development.

In addition for parents of multiples:
• Breastfeeding is free and with all the financial demands of two or more babies this can be a real bonus.
• Breastfeeding cuts down on preparation time for feeding and getting out and about, which is particularly helpful as time is tight with multiples.
• Breastfeeding means multiples get close physical comfort, which soothes and comforts as well as being necessary for emotional well being and development.
• Many multiples are born prematurely and in response to this the breastmilk changes to provide more of the nutrients babies would have received in the womb.
• Breastfeeding provides some protection against infections including those to which premature babies are particularly susceptible.
• Your feelings about breastfeeding may change after the babies are born, and it is easier to stop breastfeeding than to try and start it a few days or weeks after they’re born.
• Breastfeeding can help with bonding, which can be important if for any reason you are separated from your babies in the early hours and days after birth. For example if they have to go to special care.

“I really enjoyed breastfeeding my twins for 10 months, mainly because for me it was easier than bottle feeding (no washing, sterilising, general faffing about); It helped keep my babies healthy (to this day neither of them has ever had an ear infection); and I enjoyed it (lots of sitting around and cuddling my babies while others did the ‘dogsbody’ jobs)”

IS IT POSSIBLE TO BREASTFEED TWINS OR MORE?
Yes it is! Understanding a few basic principles will help you achieve your goal:

HAVE CONFIDENCE
Believing that it is possible to feed two or more babies is an important starting point. It is often difficult for a mother with just one baby to have faith in the process of breastfeeding, so it is quite understandable if you have doubts about being able to feed two, especially if you have not breastfed before. Most babies have fractious spells from time to time, and it is easy to think that perhaps your milk supply is inadequate. This doubt may be reinforced by your partner or family if they feel unsure or anxious about feeding twins; even health professionals can be discouraging - some of them may never have seen twins breastfed before. It may help to understand women’s capacity to produce breastmilk; it really is the case of the more your babies feed, the more milk you make; research shows mothers of triplets can produce more than three litres a day.

One way to build up your confidence before the birth is to have contact with breastfeeding mothers; even better if you can contact a breastfeeding mother of multiples. There may be a Baby Café in your area or a breastfeeding support group at your local children’s centre. Here you will meet mothers who are breastfeeding and who will be happy to share their experiences with you. Tamba has a group of specially trained Breast Feeding Peer Supporters. They are all mothers of multiples who have breastfed their babies and been trained in breastfeeding peer support. They are able to offer you information and support about breastfeeding via email text or phone. To contact them please email tambabreastfeeding@gmail.com

PRODUCING ENOUGH MILK FOR TWO
“The thing that really sank in was supply would equal demand, not to top up if I wanted an adequate supply but to let the babies feed and get the latch right”

Women’s bodies are designed to produce breastmilk dependent on their babies’ needs. Most women after birth will have enough milk initially to breastfeed twins. After that the amount that women continue to produce is based on demand and supply –the more your babies breastfeed (demand), the more milk you produce (supply). Your babies will know how much breastmilk they need so in the early days if you feed them whenever they show signs of being hungry this will ensure that you have a sufficient supply for their growing needs. Even if you are planning to follow a routine, in order to ensure you have enough breastmilk it is helpful to follow a baby led approach in the early weeks. If your babies are not able to breastfeed to begin with, then expressing breastmilk as often as the babies would have been feeding will have the same result.

MILK-PRODUCTION
“No one warns you what it feels like when the milk comes in, I was really worried there was something wrong, my breasts felt so hard and so painful, it was only when I spoke to a friend who had breastfed that I realised it was normal”
The breasts start preparing for feeding during pregnancy and before the birth they begin producing colostrum, which is a creamy substance high in nutrients and antibodies. Babies only need small amounts when first born and it is easy to digest. After 3 - 4 days the milk changes and looks more watery but it still contains all that babies need. The breastmilk also changes throughout each feed, during the day and as babies grow. If a baby is born prematurely it will adapt to provide the baby with the nutrients they would have received in the womb. During each breastfeed the fat content will gradually increase until it reaches a level where the baby feels satisfied and full. He will then come off the breast. In order for this to happen the baby has to be taking the milk from the breast effectively to stimulate the breastmilk production.

When the milk changes from colostrum to mature breast milk (often referred to as the milk coming in) your breast can feel hot, heavy and uncomfortable. Feeding or expressing frequently, can help to relieve the discomfort. Massaging your breasts with clean, warm flannels before feeding can help as well as using cold gel pads after feeding can soothe the breasts.

The next section discusses how you can position your babies to feed effectively.

HOW WILL I KNOW MY BABIES ARE HUNGRY?

- Opening and closing their mouths
- Squirming and moving around
- Cycling movements of arms and legs
- Bobbing head up and down
- Rooting around the chest of whoever is holding them
- Sucking on clothes, hands, lips etc
- Hand massaging the breasts

Try to respond to these movements when you see them and before your babies start to cry as it can be more difficult for a crying baby to latch on and breastfeed.

HOW DO I GET STARTED WITH BREASTFEEDING MY BABIES?

IF YOUR BABIES ARE BORN FULL TERM AND WELL...

Once your babies are born they will need a short time to rest and get to know you before starting to think about breastfeeding. Research suggests that term babies who are left to recover undisturbed after birth, who have skin-to-skin contact with their mother or her partner, will start to show signs of wanting to breastfeed and then move towards breastfeeding within the first 50-60 minutes of life.

You may wish to breastfeed in the ‘Laid back’ position which encourages babies to use their innate abilities to start feeding (see ‘How will I know my babies are hungry?’). There is no need to sit up; provided you are lying back with the babies lying on you they can be moved towards the breast and they will latch themselves on. You can breastfeed your babies this way one at a time or both together.

If you prefer to breastfeed sitting up you may find it easier to breastfeed with one at a time at the beginning. See ‘Tips on latching on your babies’.

WHAT IF I HAVE A CAESAREAN?

You are just as able to breastfeed if you have a caesarean as a vaginal birth. Your partner can do skin-to-skin or you can have the babies with you when the operation is completed. You can feed your babies in a ‘Laid back’ position so you don’t have to sit up.

WHAT IF MY BABIES ARE NOT BORN FULL TERM OR NEED SOME MEDICAL ATTENTION WHEN BORN?

If you are unable to have your babies with you straight away it doesn’t mean you won’t be able to breastfeed. Whenever you are able to spend time with your babies, having them skin-to-skin with you or your partner can help babies to get going with breastfeeding. Let the midwives know that you are keen to do skin-to-skin and ask for their help. When caring for premature babies, holding them skin-to-skin is also referred to as ‘Kangaroo care’. See section on ‘Breastfeeding premature babies’ for more information.

TIPS ON LATCHING ON YOUR BABIES

- Hold your baby in close across your chest or under your arm
- Wait until he opens his mouth wide before bringing him onto the breast and in close to your body – move the baby to the breast, not the breast to the baby
- Support your baby with your hand on his shoulders not on his head with your arm along his back
- Keep him in close as he feeds though he needs to be able to move his head back
- Make sure his spine is in line with his head so he doesn’t have to turn his head to feed
- Make sure you are comfortable too - you may wish to pull in cushions or pillows to keep yourself supported
- If you feel in any pain when feeding you may want to take your baby off the breast and reattach him as this is generally a sign that he needs to take a bigger mouthful of breast

To watch a baby attaching effectively this way see chapter 5 of the video ‘From Bump to Breastfeeding’ www.bestbeginnings.org.uk (click on films)
There is no medical reason why having multiples should stop you being given the same opportunities to breastfeed as parents of singletons, even if your babies are born early. Let the staff know you wish to breastfeed and don’t be afraid to ask if you need extra help and support.

**HOW WILL I KNOW IF EACH ONE IS FEEDING EFFECTIVELY?**

- Your baby has a large mouthful of breast
- Your baby’s chin is firmly touching your breast
- It doesn’t hurt you when your baby feeds (although the first few sucks may feel strong)
- If you can see the dark skin around your nipple, you should see more dark skin above your baby’s top lip than below your baby’s bottom lip
- Your baby’s cheeks stay rounded during sucking
- Your baby rhythmically takes long sucks and swallows (it is normal for your baby to pause from time to time)
- Your baby finishes the feed and comes off the breast on his or her own

**NEW BORN BABIES WHO ARE GETTING ENOUGH MILK WILL:**

- Breastfeed at least 8 times in 24 hours (usually more)
- Have at least 4-6 wet nappies in each 24 hours with mustard coloured loose, curdled or grainy poo (after the first 4 days when poo is black like tar)
- Bring themselves off the breast when they have finished their feed
- Generally are content
- Be alert when awake and look healthy

**FREQUENCY OF FEEDS**

“There were certainly days in the early months when I felt I did nothing except breastfeed. That phase didn’t actually last that long but at the time it felt like forever”

“Feeding took me 10½ hours out of 24 on average in the first few months and I wasn’t prepared for that”

Newborn babies have a stomach approximately the size of a small marble: it is not, therefore, surprising if they ask for frequent feeds. If your babies appear to want to feed very frequently, remember they are used to being with you 24 hours a day and so feeding may be their way of staying close and feeling comforted in their new world full of strange sensations. Remind yourself that these frequent feeds are your babies’ way of ensuring you have a plentiful milk supply.

**HOW WILL I KNOW IF MY BABIES ARE GETTING ENOUGH MILK?**

Without the visible sign of an empty bottle you may feel unsure whether you are producing enough milk for your babies’ needs. The frequency with which babies feed can often surprise parents. This can lead to worries about breastmilk not being sufficient for their babies needs or not being of good enough quality. But there are some simple ways to help you judge whether your babies are well fed (see box). The important thing to remember is that if your babies are putting on weight with only breastmilk, then you have a good supply and they are getting all they need.

It is not unusual for the babies to lose a little weight in the first week of life. However, if they are feeding well they will usually have regained their birth weight by 14 days old. You may find that one puts on weight more quickly than the other(s) and it’s worth remembering that one baby may need to feed more frequently than the other(s).

**REMEMBER: all babies are different and what is normal for one baby is not necessarily normal for another. If your baby is feeding effectively and you are comfortable, try to accept that his frequency and length of feeds are his norm - a norm which will change as your baby changes.**

**THE IMPORTANT THING TO REMEMBER IS THAT IF YOUR BABIES ARE PUTTING ON WEIGHT WITH ONLY BREASTMILK THEN YOU HAVE A GOOD SUPPLY AND THEY ARE GETTING ALL THEY NEED.**
SECTION TWO: BREASTFEEDING TWO AT A TIME

BREASTFEEDING SEPARATELY OR TOGETHER?

“At home, I always fed the girls together, except for the odd occasion in the middle of the night when they woke individually and erratically, i.e. out of routine due to illness for example. This meant I could feed whilst lying in bed so got more rest. When out and about, we would take a bottle and I would breastfeed one while husband/friend fed the other and then swap babies”

“I breastfed both babies for over a year, but made a decision early on that tandem feeding was not for me (I found it too difficult to get both latched on together, and felt that it would be too hard to feed both in public that way, which was important with an older sibling as we would be out and about at toddler groups). So I fed one and then the other, which was actually a great way of getting to know each individually”

- Breastfeeding the babies one at a time gives you a chance to get to know each one as an individual and may be the easiest way to feed at first. It can be difficult to co-ordinate their feeding times to feed them together, especially if their needs are very different and one wants to feed more frequently.
- You may want to have the option of feeding them together in order to allow you to encourage similar feeding pattern and give yourself a bit of time to yourself.
- Remember the importance of latching on, so check each baby is feeding effectively.
- When feeding together to begin with you may need someone to be with you to help arrange the babies.
- Experiment with the positions below and find the most comfortable one for you.

WHICH BREAST?

There is no best way to do this... some mothers find it best to swap breasts at each feed, whilst some find it easier to

•   Breastfeeding the babies one at a time gives you a chance to get to know each one as an individual and may be the easiest way to feed at first. It can be difficult to co-ordinate their feeding times to feed them together, especially if their needs are very different and one wants to feed more frequently.
•   You may want to have the option of feeding them together in order to allow you to encourage similar feeding pattern and give yourself a bit of time to yourself.
•   Remember the importance of latching on, so check each baby is feeding effectively.
•   When feeding together to begin with you may need someone to be with you to help arrange the babies.
•   Experiment with the positions below and find the most comfortable one for you.

On the Tamba website https://www.tamba.org.uk/parenting/first-year/feeding there is a video clip available that shows a mother latching on her twin babies. More video clips of a mother talking about her experience of breastfeeding are available to Tamba members on the same page.

MOTHERS DEVELOP MANY DIFFERENT WAYS OF FEEDING THEIR BABIES TOGETHER

Tamba has a team of NCT accredited peer supporters who have all breastfed their multiples. They can offer mother-to-mother information and support to families who wish to breastfeed their twins, triplets or higher multiples.

Breastfeeding Peer Supporters

To contact the scheme, email: tambabreastfeeding@gmail.com
give each baby his own breast so each side produces the right amount of milk for that baby.

But... If one baby is very tiny and does not have a very strong sucking reflex, it may be helpful to swap the babies around in the beginning to make sure both breasts are sufficiently stimulated while your supply is building up. You may also want to feed them together so that the weaker baby can benefit from the stronger baby’s ability to encourage the milk to flow. You may want to bear in mind that breastmilk production can be different in each breast, so trying to feed a similar amount of time on both sides can help keep the supply equally stimulated.

**THE FOOTBALL OR RUGBY UNDERARM HOLD**
- Sit upright with your back well supported and with room for your babies’ legs to be tucked round behind you
- Position the babies under your arms supporting their necks and backs
- Wait for each baby to have a wide open mouth then bring them on to the breast
- Some mothers find special twins feeding cushions across their front useful but plenty of pillows will work as well
- If using pillows make sure they are at the right height for your babies to have easy access to the breast and be on a line with your nipples

In the beginning you may want to latch them on one at a time with the second baby being passed to you after you have latched on the first, but in time you will be able to latch on both at the same time.

“I needed to find a way to get the babies on without anyone else being there so I would put the twins on a chair that had arms, sit on my feeding chair and pull the chair in close facing me. I would then arrange all the pillows behind me with a V cushion on my lap then move both over onto the cushion into position and then latch them on”

**THE PARALLEL HOLD**
- Get comfortable upright with your back well supported
- Position both babies across the chest in the same direction
- As with the football hold wait for a wide open mouth then bring the baby on to the breast

“I would put one on across my chest and then if the other one woke up I could put him on in the same direction as the first tucked in under my arm”

**THE ‘LAID BACK’ POSITION**
- Lie back and have both babies lying on you so that you and they are comfortable
- Babies will start to move around bobbing their heads and if positioned by the breast will latch themselves
- Especially helpful for mothers post birth, those who are tired, have bad backs or are feeling tense and anxious
- Good for babies being more upright if mothers have a fast milk flow or if the babies are often sick after a feed
- It works with babies’ instincts so can help to stimulate babies to feed if they are having problems latching on

You can find out more about laid back nursing here www.biologicalnurturing.com

**REMEMBER:** whichever position you choose, your babies need to able to latch on so that you are comfortable and your babies can feed effectively. If you are sore when feeding or your babies are continuously feeding without coming off the breast themselves, then think about seeking skilled help from a breastfeeding counsellor, health visitor or baby café (see ‘Further Information’ for details).
SECTION THREE: BREASTFEEDING PREMATURE BABIES

WHAT IF MY BABIES NEED TO BE IN A NEONATAL UNIT?
Many twins and most triplets or more are born prematurely and may spend time in a Neonatal Unit or Special Care Baby Unit. This can be a very upsetting time for parents. Many mothers find it comforting to be able to produce breastmilk for their babies at their most vulnerable time and know that they are giving them protection against infection and helping them grow and develop.

WHAT CAN I DO TO HELP MY BABY BREASTFEED?
Don’t expect too much at an early stage; if your babies are born before about 32 weeks they may not have the maturity to breastfeed. You can start to express breastmilk as soon as possible, and then giving your babies lots of opportunities to feed as they develop, will ensure they will get there in their own time.

“Before we could bring the babies home they had to be demand feeding. There were times in the hospital when I thought that we would never get there. Learning to feed, for all of us, seemed to be such a slow process. In reality it took just under 3 weeks from starting to feed until we were allowed home. It felt a lot longer.”

IF YOUR BABIES ARE IN SPECIAL CARE
Make sure the unit staff are aware that you want to breastfeed and ask for their support working towards this.

• Ask for kangaroo (skin-to-skin) care as soon as the babies are stable. Have as much physical contact with your babies as possible; your skin against their skin is ideal. This will help you get to know each other, stabilise their temperature, stimulate your milk supply and allow your babies easy access to your breasts. Your babies will be able to lick your breasts and taste the milk or you may wish to express a little milk into your babies’ mouths. Research shows that babies who have kangaroo care are more likely to breastfeed and go home earlier than average.

• Unless medically required it may be better not to use bottles at this stage as the different sucking required may affect the babies developing their natural movements for breastfeeding. Small and sick babies are often fed breastmilk by a tube into their tummies but then will move on to taking breastmilk by mouth. Talk to the staff about cup feeding; this can be used after your baby’s tube is removed and requires similar movements to those required for breastfeeding.

• Breastfed babies feed little and often so once your baby has started breastfeeding you may want to increase the frequency of his feeds from that of the hospital’s regime. Look for signs of your baby wanting to feed, opening his mouth, moving his head out to the side and sticking out his tongue. Anytime your babies look like they are interested put them to the breast and give them the opportunity to feed.

• Ask for help when your babies start to feed from you in positioning them carefully at the breast to ensure you are comfortable and your babies can easily take the milk. (See How do I feed my Babies?).

“[One of the nurses] showed me how to use the ‘nurture’ [laidback] position to get William to open his mouth and feed. This involved placing him to the breast from the tummy in a vertical position, as he would have been placed at birth. This prompts him to suck. It is a natural instinct for babies that they sometimes need reminding of”
EXPRESSING BREASTMILK FOR PRE-TERM BABIES

If your babies are unable to feed directly from you it is important to express your milk as soon as you can in order to build up your milk supply. Then when each baby is ready to feed there will be breastmilk easily available. You need to express as often as you would be feeding; about 8-12 times over 24 hours, including during the night when your hormone levels for breastfeeding are at their highest. It is more important to express little and often, than to express less frequently and for longer as this more closely mimics a breastfed baby’s feeding pattern.

“When the girls arrived 11 weeks early I made it my mission to produce milk ...expressing every few hours... It was uncomfortable and tedious but the pleasure of seeing my girls receive droplets of the golden colostrum millimetre by millimetre kept my motivation up”

Most units have an expressing room providing electric pumps set up for mothers, so ask the staff for help to get started. If you have been discharged but your babies are still in hospital you may want to hire or buy a pump so that you can also express at home. Ask the staff for details of pump hire or contact the companies directly who can arrange pump hire for you (see ‘Further Information’ section for details).

Find out more at www.tamba.org.uk/parenting/under-1s/expressing-medela

TIPS FOR EXPRESSING

• If at home have an area set up with everything you need
• To express ‘hands free’ use an old bra with holes cut in them to keep the pump in place or purchase a ‘hands free’ top
• Use a pump which allows you to express from both breasts at the same time
• Try and have something of your babies to hand to stimulate the hormones which produce your milk like a picture or video of your babies, or a piece of their clothing that smells of them
• Expressing just after you have been cuddling them is especially helpful

REMEMBER: in order to get a good supply express as often as you would be feeding; about 8-12 times over 24 hours, including during the night

• Some mothers find that when they begin to express they are unable to produce a lot of milk and worry that this means they have a poor supply of breastmilk. However, it is more likely to be because the technique for expressing requires practice. If you express regularly you will find the amount you can express increases.

• Some mothers find that they are never able to express enough milk for their babies but once they are feeding directly from the breast they have plenty of milk. Remember, any milk you produce will be of benefit to your baby.

• If you are not producing enough breastmilk to meet your babies needs, ask the staff about the possibility of using donated breastmilk. There is a network of milk banks across the UK that screen and provide donated breastmilk. Premature and vulnerable babies are prioritised for receiving it (see ‘Further Information’ for details).

“What the expressing became the framework of my daily routine and everything worked around it. Being with other mothers who were living tethered to a breast pump helped. We moaned together. I wouldn’t say I enjoyed pumping but it didn’t hurt and I didn’t find it hard. My worst enemy was boredom and I went through several mountains of books during this time”

IF YOUR BABIES ARE UNABLE TO FEED DIRECTLY FROM YOU IT IS IMPORTANT TO EXPRESS YOUR MILK AS SOON AS YOU CAN IN ORDER TO BUILD UP YOUR MILK SUPPLY

WHAT IF I HAVE ONE BABY IN HOSPITAL AND ONE AT HOME?

If your baby in hospital is unable to feed then you can express breastmilk for him. To save time you may want to feed one baby and express on the other breast at the same time. If however the baby in hospital is able to feed, then you may want to see if you can stay near the unit so you can be available for both your babies. If this is not possible, then you may want to look at other possibilities such as cup feeding expressed breastmilk to the baby you can’t be with. When the second baby comes home you will be able to return to feeding both.

For more information see the booklet ‘The Best Start: A guide to expressing and breastfeeding your premature baby’ by BLISS and see ‘Breastfeeding your sick or pre-term baby’ one of the extra films on the video ‘From Bump to Breastfeeding’ www.bestbeginnings.org.uk
SECTION FOUR: BREASTFEEDING AT HOME

HOW CAN I MANAGE BREASTFEEDING MY BABIES AT HOME?

SUPPORT
If you’ve spent time with your babies in hospital it can be a little daunting when returning home and managing them without the nurses’ help. However, some mothers find that when they get home they feel more able to relax and breastfeed their babies in their familiar environment. However you feel, the support you have at home will play a big part in getting breastfeeding working for you and your babies. Your support may be your partner, friend or family member. You may feel able to get some paid support. Whatever you decide make sure that they understand the type of support you need.

If your partner is taking leave from work it might be a good idea to take it when the babies come out of hospital, rather than all immediately after their birth.

Some well-meaning friends and family might suggest giving some bottle feeds to your babies as a way of supporting you. You may wish to explain that in order for you to breastfeed, you’d like them to look after you rather than the babies; so making meals, bringing you drinks, tidying up the house and doing the laundry are all useful ways to offer support. Taking the babies out for a long walk after they’ve been fed will help them sleep better and give you an opportunity for some rest. Settling the babies after you’ve fed them will give those supporting you plenty of opportunities for cuddles.

You may feel able to pay for support at home, in which case think carefully about what help you will need which will support the breastfeeding. Rather than having help with the babies it may be better to have help to do all the other chores in the house. Knowing the house is tidy and the washing done, can help you relax and spend the time needed to get the breastfeeding working for you and your babies.

Think about who can give you emotional support – have their numbers in your phone ready to use. Or find like-minded people online. Keep a note of the local breastfeeding counsellor/peer supporter/ baby café and use them! They will be keen to offer you support. If you have a bad day remind yourself why it was you wanted to breastfeed and remember that tomorrow it might be all different again. Recognise the great job you’re doing and that the time with them as babies is very short.

“A routine or baby-led feeding?”

For other mothers baby-led feeding can feel as if there is no break from feeding, particularly if the babies’ needs are very different and so they are keen to move their babies into a more regular pattern. If the babies’ needs are not too different, you can start to do this by waking the second baby to breastfeed when the first one does - or if you prefer to feed separately, feed and settle the first before waking the second.

HERE ARE SOME IDEAS FOR MANAGING YOUR BABIES FEEDING AT HOME:

BABY LED FEEDING
Breastfeed each baby whenever they want to feed (baby-led feeding). For some mothers this can be the easiest option as it means going with the flow. You may want to put in place other markers for the day such as sleep times and bath times, whilst feeding your babies whenever they show an interest.

A ROUTINE OR BABY-LED FEEDING?

“If one woke up I would always wake up the other and they got into the same pattern”

Few new babies are born into a routine, but over time they may start to develop a pattern to their days. However you may find that you are just feeling as if you have established a routine, when they surprise you with a sudden change!
If your babies have very different patterns you might want to start with a routine at one time of the day e.g. breastfeeding your babies together just before doing something at a fixed time such as having a meal with your partner or picking up your older child from school. Once your babies are settled into a pattern at those times you may feel that is enough or you may wish to encourage a more predictable routine during the rest of the day and night.

SOME OTHER TIPS:
- For ideas about encouraging sleep see the Tamba website where you can download factsheets on sleep and watch video clips from sleep experts too. www.tamba.org.uk/Parenting/First-Year/Sleep
- You do not have to feed together or separately at every feed. Decide for yourself what suits you best and mix-and-match your options. Some women like to feed their babies at home together but when out and about to feed them separately. Others feed their babies together in the day, but separately at night, or vice versa.
- It may be helpful to develop a routine if you have an older child so that you can plan to spend some time with him after school or at bedtime.
- Be prepared for days when they are not willing to cooperate with the routine! Like all of us, babies have good and bad days and some days may be more unsettled than others. And some babies just seem to need to be held more than others.
- Babies can have periods in the day when they want to feed a lot (cluster feeding), or a couple of days when they seem to feed more than normal – this used to be described as growth spurts, but may just be they are feeling that they need a bit more comfort from their mother.

Which brings us to a very important section...

LOOKING AFTER YOURSELF
Like all mothers you are likely to have times when you feel tired and occasionally exhausted. Try to arrange your day so that there is some time when you and the babies sleep, or when someone else will take over the babies to give you a nap. Take up all useful offers of help with chores.

Breastfeeding twins or more will take a great deal of time in the early weeks, so if you expect that you are not going to do much else to begin with then anything else you manage will be a bonus.

Many mothers say that the first few weeks are the hardest work but that things get easier and that the benefits of breastfeeding begin to really be felt six weeks on. To see three mothers managing their breastfeeding at different stages see ‘Breastfeeding twins or more’ one of the extra films on the DVD ‘From Bump to Breastfeeding’ www.bestbeginnings.org.uk

Think about where your babies might sleep. The Department of Health recommend that babies sleep in the same room as their parent(s) for the first six months of their lives to reduce the risk of cot death. In addition, research suggests that mothers sleep better if their babies are nearby and that women are more likely to breastfeed longer if they have their babies close to them at night. The good news is that the hormones associated with breastfeeding help you fall back to sleep after you have breastfed. In fact research has shown that mothers who breastfeed are no more tired than women who do not breastfeed and get slightly more sleep!

“Nothing can prepare you for the exhaustion that you feel as a breastfeeding Mummy of twins. We had a Twin Co-Sleeper next to our bed and this made feeding so much easier as I could just reach over to get the baby and easily put them back”

“The boys tended to sleep quite well from 8-10.30 in the morning so there’d be no point me getting up for those 2½ hours. I stayed in bed with them, I decided we might as well sleep when we could so I basically wrote off the morning”

Look after yourself physically with a balanced diet and get out every day, even if it’s just around the block. Babies have been found to sleep better if they go out in the daylight and it may help you feel better too. Your breastmilk won’t be affected by your diet, but you’ll feel more able to cope with your babies if you are looking after your physical needs.

The good news is that you don’t have to limit your diet at all when breastfeeding, though too much caffeine may keep your babies awake. The British Nutrition Foundation says that on average women who are breastfeeding for 3-4 months need 500 extra calories per day. It is recommended by the Department of Health that you take a vitamin D supplement. Talk with your Health Visitor for more details. And for information on alcohol and medications when breastfeeding see www.breastfeedingnetwork.org.uk
HOW CAN I BALANCE BREASTFEEDING MY BABIES WITH THE NEEDS OF MY OTHER CHILDREN?

If you have had an experience of breastfeeding an older child this can be very helpful in finding the confidence to breastfeed your babies. In fact some mothers (though not all) find breastfeeding the second time round a lot easier even with twins! But there are other considerations with having an older sibling, including the amount of time you will spend breastfeeding in the early weeks. Some toddlers may feel a bit put out by the arrival of not one but two rivals for their parents time. Help him prepare by reading one of the children’s books available about having a new baby in the family.

“I hardly ever fed them together except when they were really newborn. Especially with an older sibling I found I could feed one and still be making the tea/on the phone/ cuddling my elder child whereas when I fed them both together I literally could hardly move even to change the channel on the TV remote“

“The twins’ feeding had to be fitted around the rest of the family. I would make sure I fed them before I picked up the older one from school so that I could spend some time with her”

“You need to psychologically prepare yourself for several months of sleep deprivation; small babies need very frequent feeding and if you have older children you don’t get to catch up”

IDEAS FOR YOUR TODDLER WHEN BREASTFEEDING YOUR BABIES

• Tell him stories about when he was born
• Show him pictures of when he was a baby or breastfeeding
• Have a surprise box of toys that only comes out when you really need your toddler to be distracted
• Have an area for daytime feeding with everything to hand; books, toys, nappies, snacks etc which is a safe environment for toddlers to roam
• Use spare hand to read, cuddle etc
• Put on a DVD or a story or song tape
• Call in favours from friends – most parents of multiples say they wished they’d asked for more help when their babies were little and people are usually pleased to be asked
• Prioritise: in the initial stages something’s got to give so think about cancelling some of your normal activities for a while

GETTING OUT AND ABOUT

Once established, breastfeeding allows mothers to go out and about more easily with their children as there is food ready when needed with no preparation required.

Many mothers find they prefer to breastfeed one at a time when out. However if you want to breastfeed them together there are breastfeeding covers that can be worn which offer privacy. Or wrap a light, wide scarf around you, making sure your babies’ faces are not covered.

Seek out shops and restaurants which have the breastfeeding welcome sign.

It is against the law to discriminate against women who are breastfeeding in public, so be confident that you have the right to breastfeed wherever you are. Most people would rather a baby was being breastfed than crying – and many won’t even notice that you are breastfeeding.

“Do not be afraid to feed in public. I have done it on the beach, in shopping centre, in the pub, in a field – anywhere. And never feel unable to feed in your own house, if people come to visit they should accept that this is what is going to happen, do not feel that you have to go off to another room if you do not want to”

EXPRESSING

There may be occasions when parents need to leave their children; maybe for work or just a night out. In Section 3 we discussed frequent expressing using electric pumps but for more occasional expressing there are cheaper options.

The cheapest one is hand expressing which many mothers find easy once they have learned the skill. Your midwife or health visitor will be able to teach you how to do this. For a leaflet on hand expressing breastmilk visit www.breastfeedingnetwork.org or for a demonstration see ‘From Bump to Breastfeeding’ DVD on www.bestbeginnings.org.uk

There are a variety of handheld pumps on the market. If you wish to purchase one ask amongst your friends and see which they recommend. If possible have a go with one before buying as different women find they prefer different pumps. Breastmilk can be stored in the fridge or freezer so nothing that you express needs to be wasted. Check the current guidelines for storing breastmilk (see box); you may be surprised about how long you can keep it. Visit www.kellymom.com and search for “How much expressed milk will my baby need?” for guidelines about quantities that babies need.

STORING BREASTMILK GUIDELINES

• Remember to use a sterilised container for storage
• You can store breastmilk: in the fridge for up to 5 days at 4°C or lower (at the back of the fridge, not the door)
• In the ice compartment of the fridge for 2 weeks
• In the freezer at -18 degrees Celsius or lower for 6 months
• Defrost the breastmilk in the fridge. Once thawed use it straight away.
WHAT ROLE DO I HAVE WITH BREASTFEEDING?
Some fathers fear that they are missing out if the mother breastfeeds and that there is no role for them in nurturing their babies. You may not be able to feed the babies, but being a parent of multiples means there are plenty of things you can do to spend time with your babies; cuddling and soothing your babies, playing with them, changing nappies or bathing the babies, taking them out for a walk or to the supermarket. If your partner is taking leave from work it might be a good idea to take it when the babies come out of hospital rather than all immediately after their birth.

Tamba has a factsheet for partners that can be downloaded from our website www.tamba.org.uk/support/partners-of-twins-triplets-or-more

“For me it was about making sure they had the best start in life. I was very proud that my wife could do it and that the children took to it so easily”

HOW CAN I SUPPORT MY PARTNER?
Mothers need to feel confident in their ability to breastfeed and your ability to support her as she develops that confidence can make all the difference.

• Be positive; encourage her when she needs it and help her recognise her achievements.
• Try and find out as much as you can about breastfeeding so that you can help her develop this new skill.
• Encourage her to seek help if she is having problems.
• Help out with the household chores and ask for help from others who visit; then your partner can relax and concentrate on the breastfeeding.
• Be involved in caring for your babies, there is always plenty to do.
• If your partner is worried about breastfeeding in public, position yourself so she feels that she is not in full view of others.
• Take the babies out for a walk when your partner needs a break or some time for herself.
• Make sure she has healthy food and drink easily available, perhaps making up sandwiches for her to eat during the day.
• If you have a toddler let him help you and give him time on his own too; many fathers find that their relationship with an older child changes and improves at this time.
• Take photographs, you’ll be surprised how quickly the babies change and you will enjoy looking back at your babies pictures once they are active toddlers.

“Bath time was my special time. When I got home I would bathe the babies one at a time and then hand them to my partner to feed. Then they’d go in their cots and we’d have a bit of time together”

“Sometimes the babies would only settle with me. I think they would smell the milk on my wife and fuss but with me they’d fall asleep”

“It was a heart-warming sight... I never thought I’d look at it that way... to see something so natural and to see how peaceful and happy the babies seemed”
SECTION SIX: BREASTFEEDING TRIPLETS AND MORE

The information that has been covered so far in this booklet applies to both breastfeeding twins and higher multiples. However, parents of triplets and more may face additional challenges in achieving their goal.

IS IT POSSIBLE TO FEED TRIPLETS AND MORE?
Many mothers of triplets and higher orders have been able to fully breastfeed their babies. It may be the case that your health professionals have not had any experience of this and may feel anxious about your decision, or doubt your ability to do so. Some may suggest that the most you can achieve is a mix of formula and breast. However this is not the case. The mechanism of supply and demand (see Getting Started) means that you can produce as much milk as your babies require.

Breastfeeding three or more will require you to spend a great deal of time breastfeeding but, as with twins, breastfeeding can also mean you save a great deal of time and money as well as having what can be a deeply rewarding experience of nurturing your babies with your own breastmilk.

• Try and talk to someone who has breastfed triplets or more. You can ask at your local Twins Clubs and also contact Tamba’s breastfeeding Peer Supporters. Just email them at tambabreastfeeding@gmail.com

• Identify people who are willing to support you. Have their numbers on your phone so that you can ring them if you feel you need some words of encouragement.

• Dealing with any problems that arise quickly and effectively is important so make sure you have the number of a local breastfeeding counsellor close to hand or the national breastfeeding helplines.

“I didn’t feel I was doing anything unusual. While I was pregnant I met two other mothers of triplets, both of whom had breastfed for a considerable period of time. So from the outset I assumed I would succeed”

HOW CAN I BREASTFEED THREE OR MORE?
Each mother who has fed three or more has found her own way to do it:

Some choose to fully breastfeed all babies from the breast

Some choose to feed two directly from the breast and give expressed breastmilk to the other/s by bottle

Some express all the breastmilk so that their babies’ feeds can be shared out

You may decide to start and feed in one way and then change as your babies’ needs change. Try and find someone who can help think through your situation and make changes as you develop your feeding. This might be a family member, a health professional or a breastfeeding counsellor.

“I loved breastfeeding each baby, it gave me the chance to have individual time with each of them. I hired a pump but I found expressing a chore; I would rather feed my babies directly. In the end the pump went back and I carried on myself”

“My schedule was not for the faint-hearted! I was producing pints and pints of milk a day and eating like a horse! I would breastfeed two together and give the third a bottle of previously expressed milk always feeding the babies at the same time”

As with twins some mothers choose baby-led breastfeeding, responding to each individual request for food; some plan a routine which involves feeding the babies together and some
SECTION SIX

FEEDING SEPARATELY OR APART?
Again there is a great variety of options on offer and each mother develops her own way of feeding. Options include:

- Each baby being fed individually on their nominated breast so two on one breast and one on the other. The first breast will produce approximately twice the amount than the second breast.
- Each baby being fed from the breast but the order rotates each feed.
- Two babies being fed on the mother’s breasts and the other/s being fed by expressed milk in the bottle; this can be fixed or rotated between babies.
- Feeding two together on individual breasts then one on both breasts and rotating each feed.
- One baby being fed from the breast and the others being fed expressed milk.

Whichever method you find works for you, your body will respond by producing the milk asked of it.

- If you decide to have a routine or decide to rotate your babies, then you will need an easy means to record your feeding or you may become confused. Some women keep a notebook; others have a board on the wall in the room where they usually feed, whilst others might print a form for each day to fill in and keep with them. There are even apps that can be downloaded onto smart phones and tablets that you can record this information onto.
- Take each day at a time. It is important to realise that breastfeeding will take time to establish especially if your babies are born early. Feel proud of what you achieve, and with determination on your part, emotional and practical support on the part of family and friends, plus skilled breastfeeding support you can feed your babies.

“It was hard work initially and I spent little time doing anything but breastfeed for the first few weeks but gradually it all fell into place and feeding the babies became second nature. When they started on solids and needed me less life became easier”
This booklet is aimed at offering mothers who want to breastfeed their twins or more information about how to achieve their goal. Some mothers plan to breastfeed but also want to have the option to use infant formula occasionally. For others because of ongoing difficulties with one or more babies, family demands or changing circumstances the decision is made to change to partial breastfeeding.

“... we decided to give them one bottle of formula a day and this was given by their dad in the evening. With my son I did express milk for bottle feeds. With twins, we decided it was not worth the effort and that I was tied to them for many hours of the day breastfeeding anyway without adding further hours chained to a breastpump!”

WHAT SHOULD I CONSIDER IN DECIDING WHETHER TO MOVE TO PARTIAL BREASTFEEDING?

- It may be worth considering whether more or different help could make the difference in the early stages of breastfeeding. Many parents of older multiples say they wish they had asked for more help when their babies were little, rather than struggling to cope with what can be a very challenging time.
- Are you changing to partial feeding because of difficulties that could be resolved? If feeding is painful or seems continuous read the section on positioning and seek help from a breastfeeding counsellor. It may be that the breastfeeding could be improved which may help you continue.
- Many women find it hard to feel confident in their milk production and worry if their babies are unsettled it means that they are not getting enough milk. Read the section ‘How do you know if your baby is getting enough’ and remember that it is not unusual for small babies to have unsettled periods during the day or night. Visit www.cry-sis.org.uk for ideas on soothing babies.

WHAT DO I NEED TO THINK ABOUT IF I WANT TO PARTIALLY BREASTFEED?

If you have thought about all the above issues and feel partial feeding is the right option for you, then it is worth considering the following:

- Think about first getting your milk supply, established so that you continue to have flexibility in offering breastfeeds. If you breastfeed or express 8-12 times in 24 hours in the first few weeks this will establish your breastmilk supply and you are more likely to continue partial breastfeeding as long as you wish. Remember any excess breastmilk can be frozen and used for supplementation at a later date.
- A general rule of thumb is that the more breastmilk you give your babies the more protection they will receive from illnesses such as asthma, diabetes, gastroenteritis, ear and respiratory infections. So consider how you might maximise the amount of breastmilk each baby receives. E.g. if one baby is not breastfeeding at all you might decide to give him some expressed breastmilk occasionally.
- It is generally better to substitute a single feed with formula than to supplement or ‘top-up’ breastfeeds. In the early days it is generally better for babies to be given infant formula in the daytime rather than at night, when the mother’s hormones are at a higher level for breastmilk production. Breastfeeding at night therefore helps you to maintain your supply.
- Some mothers of twins or more report that being able to use the occasional substitute feed has helped them through a bad patch and has allowed them to continue breastfeeding.
- When feeding your babies infant formula try and keep to the little and often feeding pattern of a breastfeeding baby. In this way babies don’t get used to larger volumes of milk at certain feeds, which can then lead to the need to ‘top up’ with infant formula at each breastfeed. This is especially important if you are giving more than the occasional feed of infant formula.
- If you sense your breastmilk supply has dropped too low for your babies needs, then cutting out the infant formula for a few days and breastfeeding more frequently can help to bring the supply back - often within 48 hours.
• Some mothers report that their babies go happily between breastfeeding and a bottle, from a very early stage. But some seem less happy to do this. Therefore you might want to wait until you feel the breastfeeding is going well before you start to introduce bottles.

• If you are thinking about introducing some infant formula at a later stage and are worried about your babies taking a bottle, some mothers say it is helpful to introduce an occasional bottle at around six weeks (of expressed breastmilk or infant formula) and continue to give them a bottle once or twice a week. However, there is no research to support this idea.

REMEmBER: however much breastfeeding you do there is no limit on the amount of time you can spend skin-to-skin or just cuddling with your babies. Keeping in tune with your babies needs and responding to their cues for food and comfort will help to keep that close bond with your babies.

“Positioning for feeding one by the breast and one by the bottle: sit on the floor with your back against the sofa and a bouncy chair between your legs or sit on the sofa with the bottle fed baby sitting square to you, propped up with cushions”
SECTION EIGHT: FREQUENTLY ASKED QUESTIONS

Some mothers find breastfeeding a straightforward business, whilst other mothers come up against difficulties and can need more help and support to get the breastfeeding back on track. Here are some ideas for challenges that can occur.

Q. Every time my babies breastfeed together I feel pain in my left breast and I have to watch TV to try and distract myself throughout the breastfeeding. It’s getting so bad I dread latching the babies on.

A. If you are experiencing pain when you latch your babies on together, you may want to try latching the babies on separately taking care to bring each baby to the breast when they have a wide open mouth and keeping them in close. Once you have managed to breastfeed comfortably on both breasts then you might want to try to breastfeed both together again.

Q. Breastfeeding is going well but I am exhausted and don’t know how long I can carry on doing it. I’m desperate for some sleep!

A. Here are some ideas to try:
• When one baby wakes to feed look for signs of shallow sleep and wake the other(s)
• Try breastfeeding both babies in the ‘laid back’ position
• Go to bed when the babies do and sleep
• Recruit extra help to do all the chores in the house and concentrate on breastfeeding and sleeping
• Express some breastmilk or use infant formula so another person can give your babies a feed occasionally so you can have a longer sleep to build up your reserves

Q. One of my babies does not like being put down. He has a feed and falls asleep but the minute I put him in his cot he wakes up and seems to want to go back on the breast. His sister is quite happy to be left in her cot.

A. Provided he is putting on weight and the breastfeeding is going well then you may want to consider:
• Try putting him to sleep with his sister in the same cot, following the safe sleeping guidelines. Some babies seem to sleep better with their co-multiple
• Some babies seem to need to be held more than others. Consider using a wraparound sling which will allow you have him with you whilst being hands free
• It is possible to carry two in slings if need be See www.youtube.com for mothers of twins demonstrating how to do it
• Consider using a baby bouncer chair to soothe him rather than putting him in the cot

Q. I have been partially breastfeeding my babies in hospital but I am really keen to fully breastfeed my babies now I have arrived home. How can I increase my breastmilk supply?

A. The most effective way to increase the amount of breastmilk you are producing is to increase the frequency that breastmilk is taken from the breast. In order to do this you might want to consider:
• Spending a few days doing lots of skin-to-skin and breastfeeding whenever the babies show any signs of wanting to breastfeed
• Expressing between breastfeeds and using any expressed breastmilk instead of infant formula for top ups
• Continuing to switch the babies between breasts until they are satisfied rather than giving top ups
• Having someone who can look after you while you concentrate on feeding your babies
• Discussing with your health professionals the use of medication (also called galactagogues) to temporarily boost your supply while you build it up through increased feeding and expressing
• Contacting a breastfeeding counsellor (see Further Information section) to discuss other options in this situation depending on your personal circumstances
• Visiting www.kellymom.com for more suggestions (search ‘Increasing low milk supply’)

Q. I’ve done all that I can but breastfeeding just isn’t working out. I feel really upset about it but I think I’m going to have to give up breastfeeding.

A. Mothers who wish to breastfeed their babies can experience distress when things outside their control mean the breastfeeding doesn’t go to plan. If you find yourself in this situation it may help to contact a breastfeeding counsellor and talk through all your options. A combination of factors could mean that full breastfeeding isn’t possible, but partial breastfeeding could be continued for some time. You don’t have to be breastfeeding to cuddle up with your babies, skin-to-skin, as much as you all like. Even if you are not able to fully breastfeed or not able to breastfeed for as long as you planned your babies will still benefit from any breast milk they have received.

REMEMBER: Consider seeking extra help from a breastfeeding counsellor, health visitor, breastfeeding café or peer supporter if the breastfeeding is not working for you and your babies. See ‘Further Information’ for details.
AND FINALLY:

REMEMBER: The most important thing is to have a happy and contented family. Read the information about breastfeeding and decide for yourself what will work for you and your family.

Your children are individuals; they will grow and change at their own rate, so try not to expect them to mirror each other's demands.

We hope, however long you breastfeed your babies, you will find it a rewarding and enjoyable experience.

‘My feelings about breastfeeding? Very hard work but oh so satisfying’

‘One thing other twin Mums and I agree on is that there is no right way to do things. You have to find out what works for you’

Jen’s story
My identical twin girls were born by emergency C-section at 34 weeks weighing just over 4lbs each. The girls were fed via nasogastric tube, and I began to hand express colostrum which was added to the formula feeds they were being given. I was shown how to use an electric breast pump which had a neonatal specific setting. This was invaluable in helping establish a good milk supply, although it was quite difficult to keep up a good pumping schedule when I was going between home and the hospital each day. It was much easier when the girls were moved to the transitional care unit and I could sit in a room with them and work on trying to get them to latch at the breast. They were still very small and found latching, sucking and swallowing difficult. We fed them expressed milk via their NG tubes whilst holding them in a breastfeeding position, to get them used to it. We then tried nipple shields, and this was a breakthrough for us, as the girls were able to latch and feed from the breast. Within 48 hours their tubes were removed, and we were allowed to take them home. They were 2½ weeks old.

Our 15 month breastfeeding journey was not always easy but with great support from my family we overcame each problem one step at a time. There were many occasions when I felt like giving up, but I am so glad that we persisted as we all really enjoyed it in the end.

We first attended our local breast feeding group a week after the twins were born and the team supported us in getting the breast feeding on track as we were discharged giving formula top ups. Without the group’s encouragement and practical advice, I am certain that breast feeding would not have been successful. Both Rohan and Mina were very sleepy babies (born at 6lb and 4lb 6oz) and feeding was nonstop. It was exhausting feeding them singularly so we worked towards tandem feeding. We had to wake them to feed and were doing so every 2 hours in the early days. As they slowly gained weight and strength we increased the time between feeds, but I would also feed on demand whenever they were interested. I was lucky as our families were very supportive of our decision to breastfeed and offered lots of practical help enabling me to concentrate on feeding and recovery. Over 4 weeks we slowly phased out the bottle top ups and Mina caught up with Rohan in weight. Their feeding and sleeping patterns also became synchronized.

I started to work part time from home when they turned one so fortunately was easily able to continue breastfeeding. Rohan and Mina self-weaned at approximately 18 months.

Nav’s story
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I started to work part time from home when they turned one so fortunately was easily able to continue breastfeeding. Rohan and Mina self-weaned at approximately 18 months.

Carol’s story
I have twins called Jack and Lilly and an older son who was 5 when they arrived. I mixed fed the twins for 8 months which was not exactly to plan, but nothing ever is after you have children!

I had a C-section at 37 weeks and both babies were very healthy with just a touch of jaundice. I had some complications so had to stay in hospital for 2 weeks.

The nurses helped me get the babies latched as soon as I was able and we had wonderful skin-to-skin contact. Every time they looked hungry staff were able to help me feed them – and when I wasn’t able to they fed them with a syringe.

Once home, I found that I could happily tandem feed. They both thrived, but I found that using some formula feeds took the pressure off me a little. It was a relief to be able to allow others to feed the twins whilst I got a solid 4 hours sleep during the early evening.

It was probably the worst of both worlds in the early days - cleaning and sterilising bottles as well as lots of on demand breast feeding - but it worked for our family. It meant that I was able to share some of the feeding so I could rest or spend time with my other son.
Louise's story

My identical twin girls (Francesca and Imogen) were born at 32+5 weeks because I had pre-eclampsia. Francesca was in NICU but only for a couple of days with a bit of CPAP help for breathing and Imogen went straight to SCBU. So most of my early experience with my girls was in SCBU (5 weeks in all). My girls were initially tube fed a mix of formula and breast milk because it took several days for my milk to come in due to my medical treatment and my lack of knowledge regarding how often to express (and no doubt the stress of the situation didn’t help either).

Luckily for me and my girls, in spite of my initial mistakes in trying to establish a good milk supply, I had ample supply and quickly switched to pure expressed breast milk. After about 4 weeks my girls were started to feed from the breast and we all quickly went home with tubes still in (just in case). They both immediately pulled them out but luckily we never looked back.

I did struggle with my supply whilst managing the switch from tube to solely breastfeeding but looking back, it was very likely because we followed advice to stick to the 3 hourly schedule. Once I decided to go with my instincts and feed on demand it was pretty much plain sailing until my girls were one year old when I decided to stop breastfeeding them. I am very proud of myself for making it that far. They are very healthy and beautiful 6 year olds now.

Adrienne's story

Millie and Georgie were born by C-section at 38+1 as they were both breech presentation. They were 7lb 6.5oz and 6lb 12oz respectively. Millie had a tongue-tie which was diagnosed on day 2, but not before she had become ill through low blood sugar caused by an inability to breast feed, and so she was formula fed in the hospital. After the tongue tie was cut on day 4, her ability to breastfeed improved hugely, and I mix fed (topping up with formula after each breastfeed), and was able to drop the top ups after a few weeks by gradually reducing the amount of formula. I also topped up her feeds for a few days around 6 weeks which eased the impact of both babies cluster-feeding. Other than that they were exclusively breastfed. (Georgie would never take a bottle, even of expressed milk!) until 14 months. Despite my best efforts they would rarely feed at the same time and so I mostly fed them separately, only really embracing tandem feeding from around 9 months, and they drank cow's milk from a cup from around 11 months old.
FURTHER INFORMATION AND SUPPORT

TAMBA’S BREASTFEEDING SUPPORT
Tamba runs antenatal breastfeeding webinars for parents of multiples and offers breastfeeding peer support (mother to mother). Tamba’s Twinline listeners offer support to all mothers of multiples with feeding issues and can refer you on to other sources of specialist support. For more details visit www.tamba.org.uk or phone Tamba Twinline 0800 138 0509

FOR FREE AND CONFIDENTIAL SUPPORT WITH BREASTFEEDING

NCT
Breastfeeding support line 0300 330 0771 (Option 1) (9am to 9.30pm 7 days a week)
www.nct.org.uk

National Breastfeeding Helpline 0300 100 0212 (run by BFN and ABM) (9.30am to 9.30pm 7 days a week)

Association of Breastfeeding Mothers 08444 122 949
www.abm.me.uk

The Breastfeeding Network Supporterline: 0844 4124664
www.breastfeedingnetwork.org.uk

La Leche League UK Supporterline: 0845 120 2918
www.laleche.org.uk

Local Support
There are many breastfeeding clinics, Baby Cafes, support and drop-in groups available across the UK for breastfeeding families. Contact the organisations above, speak to your local midwife or health visitor or see www.thebabycafe.org

OTHER ORGANISATIONS

United Kingdom Association of Milk Banks
www.ukamb.org

BLISS - the premature baby charity
www.bliss.org.uk

British Nutrition Foundation
www.nutrition.org.uk

FURTHER INFORMATION ABOUT BREASTFEEDING MULTIPLES

Australian Breastfeeding Association Booklets ‘Breastfeeding Twins, Triplets and More’ available through ABM abm.me.uk/shop/product-category/australian-breastfeeding-association-booklets/

‘Best Beginnings’ DVD From ‘Bump to Breastfeeding’ including chapters on twins, expressing and premature babies www.bestbeginnings.org.uk

Bliss booklet ‘The Best Start: A guide to expressing and breastfeeding your premature baby’
www.bliss.org.uk

UNICEF The baby Friendly Initiative. Lots of information on baby friendly care including the leaflet ‘You and Your Baby: Supporting Love and Nurture on the Neonatal Unit’

Karen Kerkhoff Gromada book ‘Mothering Multiples’
www.karengromada.com

La Leche League information sheet ‘Tips for breastfeeding twins’
www.laleche.org.uk/twins/

Multiple Birth Foundation booklet ‘Feeding twins, triplets and more’
www.multiplebirths.org.uk

Poppy Project information sheet on skin-to-skin care for premature babies ‘Your baby knows your loving touch’
www.poppy-project.org.uk

GENERAL BREASTFEEDING INFORMATION

Caroline Deacon Breastfeeding for beginners NCT book
www.nctshop.co.uk

Heather Welford ‘Successful Infant Feeding’ Carroll and Brown book

Kate Evans ‘The Food of Love’ Myriad editions book
www.thefoodoflove.org

Kellymom.com - support & evidence based information on breastfeeding, sleep and parenting
www.kellymom.com

Suzanne Colson Biological or ‘Laid Back’ nursing information sheet
www.biologicalnurturing.com

EQUIPMENT IF REQUIRED

Breastfeeding cushion:
Harmony Duo Twin Feeding Cushion
www.harmonyduo.co.uk/products/twin_feeding_cushion

Peanut and Piglet
www.peanutandpiglet.co.uk

Companies which hire and/or sell breast pumps for double pumping:
Ameda: www.ameda.co.uk
Avent: www.avent.philips.com
Medela: www.medela.co.uk
Janet Rimmer is a parent educator and facilitator who has worked with Tamba for several years designing and delivering workshops for parents of multiples. Janet is also an NCT Breastfeeding counsellor and mother of seventeen year old triplets whom she fully breastfed. She is a passionate supporter of the right of mothers of multiples to have similar access to information and support with breastfeeding as mothers of singletons. Janet trained the Tamba breastfeeding peer supporters team.

**ABOUT THE AUTHOR**

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