

***BREASTFEEDING
THREE SETS
OF TWINS ...***

A mom's perspective

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May I introduce you to:

*Kathryn and
Lauren*



1995

*Erin and
Brandon*



2000

*Sean and
Benjamin*



2007

My very long-awaited children

1988-1994: A journey in faith from infertility to pregnancy (finally!)

After over 5 years of diagnostic work-ups and non-surgical methods to help achieve pregnancy, my husband and I decided to undergo **Gamete Intra-fallopian tube Transfer (G.I.F.T).**

Although other Assisted Reproduction Technologies (ARTs) procedures had higher success rates and were highly recommended to us (i.e. In Vitro Fertilization), G.I.F.T. was the only ARTs procedure not prohibited by the Catholic Church because it posed no ethical and pro-life concerns which were associated with the other available methods.

High-risk, twin pregnancy #1

At 8 weeks, an ultrasound revealed two strong heartbeats in two separate sacks. I was expecting fraternal twins.

At 14 weeks, the oppressive, debilitating morning (noon and night) sickness ended.

At 18 weeks, contractions caused effacement and I was placed on anti-contraction medication and complete bed rest ... and not allowed to get up until I reached 34 weeks.

At 30 weeks, contractions became uncontrollable, I was hospitalized, and although it was postponed nearly a week, delivery of my twin girls occurred at 30 weeks and 5 days following twin #1's ruptured membrane.

Kathryn & Lauren... and my decision to breastfeed



Feeling helpless, worried and frustrated after the premature birth of my babies, (2 lbs, 14 oz, and 3 lbs, 1 oz) I began to pump milk in the hospital for my preemie twins. Both the NICU nurses and the hospital LC agreed that preemie mother's breast milk is "liquid gold". The simple, yet profoundly important act of

*providing milk for my babies gave me a sense of **continuing purpose**. Providing the babies' vital nutrients allowed me to care and nurture them, although I was no longer protecting their growth and well-being through pregnancy. This realization was **extremely** comforting to me ... as it is to all mothers, especially those who've delivered prematurely.*

3 reasons why a mother of twins would choose to breastfeed

- 1 -- Breast milk is the healthiest, custom-made, nutritious food for her babies, and mom knows that she alone can provide this liquid gold.*
- 2 -- Mom can be assured that it is **very possible** to provide enough milk for two babies.*
- 3 -- Financial benefits! Formula costs a bundle ... double that cost. The money savings are enormous!*

2 benefits of breast milk for premature babies

- Breast milk produced by the mom of a preemie is higher in protein, fat, iron, chloride and other nutrients as compared to “term” milk. Preemie milk is often called “**super milk**”.*
- While mom is temporarily separated from her baby(ies), she is comforted and empowered by the knowledge that **she is playing a vital role** in their care, growth and well-being by expressing milk for them.*





Dealing with “well-meaning” criticism from family and friends

- *My mother and mother-in-law believed that, at first, I simply wanted to “experience” breastfeeding. I surely couldn’t expect to long-term breastfeed **two** babies.*
- *Their reasons for questioning my resolve:*
 1. *“She’ll **exhaust herself** soon. She cannot physically keep up with the demands of feeding two babies around the clock. It’ll take everything out of her!”*
 2. *“She **cannot possibly be able to produce enough milk** to sustain two growing babies. Surely the babies won’t receive enough nutrition.”*

Learning how to breastfeed while meeting the needs of twins



- *The first line of business was to learn **breastfeeding basics**: proper latching, recognizing let-down reflex, finding the best nursing position for me and babies, and same-time scheduling for sanity purposes.*
- *Next, came the **challenges** to face:*
 1. *Engorgement, blocked milk ducts, sore nipples;*
 2. *Surviving sleep deprivation and exhaustion;*
 3. *Maintaining and increasing milk production with babies' increasing stamina and food volume needs.*



*It's all about **SUPPORT!***

*Whether it be the positions a mom is most comfortable with or the fact that your husband is your biggest cheerleader, success depends on your **support system!***

The 3 P's:

*After trying various positions (criss-cross and double football), I decided that we were most comfortable with “double footballs” either on the bed or on the couch, but had to incorporate (what I call) the **3-Ps: planning, pillows and position.***

The 3 P's of “double footballs”, continued

1- **Planning:** Mom should plan ahead as to which baby receives which breast at a particular feeding. It's always a good idea to alternate each feeding so that one baby doesn't form a preference to one breast. Because each baby sucks a bit different and perhaps eats more than the other, alternating will allow each breast to produce milk equally. Each baby should be placed safely and reachable on the bed or next to mom on the couch for easy accessibility once comfortably seated.

2- **Pillows:** Mom should have enough pillows to support her back, neck, under her knees if needed, and most importantly, enough pillows under each arm to support babies as they nestle next to her side and under her arms.

3- **Position:** Make sure that each baby is placed far enough back under mom's arms so he can correctly latch and nurse. Mom should be able to completely relax while supporting and feeding both nurslings.

Yes, SUPPORT makes all the difference!



My husband Bruce was 100% for my breastfeeding our babies! In fact, he changed diapers before or after feedings, brought the babies to me for feedings (so nice!), and did everything possible to make it easier for us. We also took turns sleeping between feedings, too.

Other sources of breastfeeding support for twin moms:

- **Local lactation consultants** (via visits or phone);*
- **LLL** via internet, phone or local meetings;*
- **Peer support**, other moms of twins (local Twins Clubs);*
- **Success and validation** from self and family members.*

The importance and necessity of frequent one-on-one feedings

- In the very beginning, it was **definitely** awkward to breast-feed in public, at least it was for me. I found it easier and more manageable to nurse singly when away from the comfort and convenience of my home. Eventually, however, with increased confidence and the realization that breastfeeding one's baby is completely natural, healthy and normal, even among strangers, I became much more confident and competent ... even as far as doubling up while sitting in church! (discreetly, of course)*
- It is also important to see each baby in a twin set as an individual, not simply one of a set. I found that deeper bonding occurred during the one-on-one breastfeeding times I spent with each baby individually.*



Slow, natural, baby-led weaning

At 15 months, Lauren began to lose interest, became easily distracted, and her nursing duration became shorter and shorter. She soon completely weaned herself. Kathryn continued to happily breastfeed for another month or so, but with Lauren up and busy, her interest began to wane and by nearly 17 months, she was done! My experience breastfeeding my two daughters was one of the most satisfying, rewarding, loving times of my entire life.

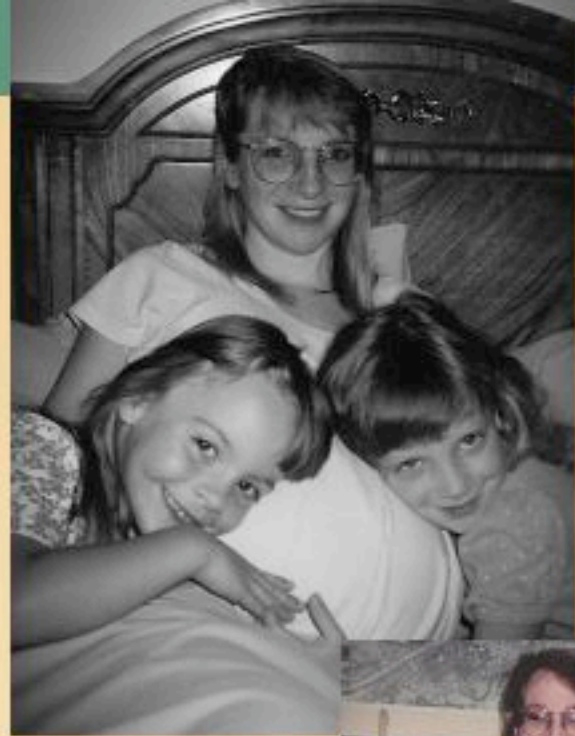
Winter 1999: After 3 more unsuccessful years in our quest for a third child ... pregnancy again!

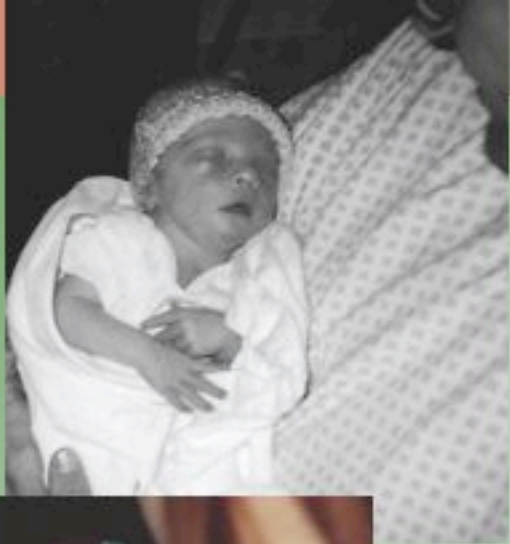
*Although after having Kathryn and Lauren, we felt that perhaps we wouldn't have to resort to the extreme methods to achieve pregnancy, I underwent G.I.F.T. again after 3 unsuccessful years ... and became pregnant. Although we'd taken **careful measures** to NOT have another multiple pregnancy ... I discovered that I was not only pregnant, but I was carrying triplets.*

At 12 weeks, an ultrasound revealed that one of the babies had ceased growing and was deceased. Although I technically miscarried one baby, the other two went on to grow, and my pregnancy continued.

High-risk multiple pregnancy #2

At 20 weeks, however, the contractions began again, and I went back on bed rest, where I spent the next 15 weeks. Through hospital visits to postpone labor, children's illnesses, alternating live-in mother with mother-in-law, and 3 hurricanes, I went into unstoppable labor at 35 weeks and delivered my second set of twins ... a boy and a girl.





Brandon and Erin ... and my decision to breastfeed again



Still considered premature at 35 weeks' gestation (although multiples reach full term at 36 weeks), Brandon (4 lbs, 13oz) and Erin (4 lbs, 6 oz) were placed in the hospital NICU due to their elevated bilirubin levels and low birth weights.

I was able to breastfeed immediately, but because they were still in the NICU when I was discharged, I had to face another homecoming with empty arms.

Attached to the Medela Breast Pump ...

Between hospital visits, I pumped milk around the clock for Erin and Brandon. When at the hospital, I breast fed them, actually timing my visits around their different feeding schedules. I was worried that one or both would become too accustomed to the artificial bottle nipple, so insisted on having as much skin-to-skin with each baby as possible.

Brandon was released after just one week, but Erin remained for 6 more days. It was quite a juggling act pumping for Erin while breastfeeding Brandon at home. A temporarily live-in mother-in-law was a blessing while we continued to make hospital runs for Erin.

We now shifted into “survival” gear

Our seemingly overwhelming conditions:

- With Erin now home, we had two newborns to manage around the clock.***
- I struggled with the familiar exhaustion, sleep deprivation, colicky Brandon, sore cracked nipples, those darned blocked milk ducts that popped up a couple of times per week, and a mother-in-law who was needed, but who’s challenges definitely outweighed her benefits by this point!***
- AND, we also had two demanding, clingy, 4-year-olds who needed lots of support while we all adjusted to our newest two family members.***

Breastfeeding challenges overcome

My fear that Erin would, in fact, develop a preference or a comfortable familiarity to an artificial nipple actually came true ... Erin became confused and refused to breastfeed.

Suspected reasons for breastfeeding refusal:

- Prolonged bottle feeding while in the NICU;*
- Because of the bottle feeding, which gave her “immediate gratification” of a dripping nipple, as opposed to her breastfeeding role of working to cause a let-down.*

Resolution to Erin’s breastfeeding refusal:

- Allow Brandon to begin feeding on one breast, cause the let-down, then put Erin to the breast once the milk was flowing.*
- With time and perseverance, she eventually caught on, with the phone advice from the hospital LC who I called very late one night!*

Other breastfeeding challenges with preemies



*Another difficulty was that each of our four preemies were so small when we began to breastfeed that they would fall asleep **LONG** before they received a full feeding. Because breastfeeding requires more work and expends more energy than bottle feeding, once the babies tired out, I'd pump the remainder of my milk to empty both breasts, then would bottle feed so as to "top off" each sleepy baby. After a few weeks, with growth and increased stamina, no more bottle "toppers" were needed!*



Unrushed, toddler-led weaning

We overcame our obstacles and went on to breastfeed for a year and a half. No longer having any qualms about nursing in public, we nursed everywhere: the park during play groups, the pool side, the mall, the zoo, the car, etc. Erin weaned about 15 months, and Brandon wrapped it up around 17 months.

No G.I.F.T. Required ...

Kathryn & Lauren were now twelve, and Erin & Brandon were seven. Over the years, we'd always been open to the possibility of another pregnancy. With our infertility history, as well as our Catholic beliefs, we simply never avoided the possibility of becoming pregnant.

In March 2007, we sought some minimal medical assistance (no fertility drugs or surgical procedures), and a few weeks later, I learned I was pregnant ... at 43.



You've GOT to be kidding!

When the early ultrasound to establish my due date was done, and the doctor pointed out Two heartbeats in two



separate sacks, our jaws fell to the floor! It was explained that often when a woman is over 40, she ovulates multiple times during one cycle, and the likelihood of twins increases.

At the risk of sounding like a broken record, I lined up all of my ducks for the time when I'd need to hit the couch again for the duration of my pregnancy. I got in lots of kid time, visits with friends, and enjoying life between the time the nausea faded and the contractions began ... which totaled only about 4 weeks.

Although I followed the doctor's orders to the letter, and only got up for OB visits and bathroom trips, the contractions worsened. My medication was changed after a long hospital stay, but with all these steps being taken to ensure a longer pregnancy, my water broke on the exact same gestational day as it had with Kathryn and Lauren. There was no stopping them.

*Our sons Sean (3 lbs, 11 oz) and Benjamin (4 lbs, 1 oz) were born, and were whisked away to the NICU. Unbelievably, here we were **again**.*

30 weeks and 5 days ... AGAIN?



Breastfeeding Struggles/ Breastfeeding Commitment

I may very well have successfully nursed two other sets of twins, but I found this time the most challenging of all! In 2002, I'd had a partial mastectomy to remove some small calcifications in the outside of my right breast. Benjamin, as compared to Sean, gained slower, and I



began to doubt myself and lack confidence in my ability to produce enough milk for both babies. I also experienced the familiar, continuous blocked milk ducts, which, on top of an already "adequate" supply made me very frustrated.

Breastfeeding challenges resolved

It's amazing how each pregnancy, each set of twins, and each individual baby were so different from the other. I had some new issues and some old familiar ones to address, and happily, each eventually was resolved.

- With the help, support and encouragement from two local LCs, I found that taking the herbs **fenugreek** and **blessed thistle** to increase milk production **very helpful!***
- I supplemented my slow-gainer with high calorie preemie formula after each breastfeeding. This system worked very well until he grew and gained better breastfeeding endurance ... then he was back to breast only.*
- I discovered hot/cold breast **gel packs**, which worked **WONDERS** when those awful blockages would occur!*

Other challenges resolved



During the early weeks after the boys' hospital releases, I began to realize that I was suffering from a degree of postpartum depression. With four other children to manage, two newborns, no sleep, constant worry about each baby and child's needs, I began to lose my ability to cope. My OB placed me (back) on some medication to help me "get a grip" and began to feel real improvement ... especially on the day my mother-in-law went back to Louisiana! As a family, we pulled together and all began to fall into place.

And life continues



Sean and Benjamin went on to breastfeed longer than my other two sets ... each weaned themselves around 18 months.

Looking back, I'm so thankful for the help, love and support I received, and our conviction and determination to do the best that we could do for all of our children despite all of the challenges we faced. Thank you, Lord!

Living life from behind double strollers



I wouldn't trade a minute of the crazy, wonderful life I've been given as the mother of my six amazing children. We've had our problems, disagreements, tantrums (even mine), financial struggles, and our share of illnesses and injuries, but we've also experienced an incredible amount of joy, laughter, silliness, adventures, successes, friendship, love and many, many blessings. What more could anyone hope and pray for?