

Part 3 - Reducing the Risks

Although the outcome of many multiple pregnancies is the birth of healthy babies, there are increased risks and the possibility that certain problems may occur for both the mother and her babies. *Multiple Births: The Possible Risks* is a fact sheet series on the topic of risks associated with Multiple Births. The goal of this information series is to help you, as parents, to be aware of risks and how they may be reduced. If you haven't already done so please also read *Part 1 - Risks for the Mother* and *Part 2 -Risks to the Children* for more information on this topic.

The content of this document is for information purposes only and does not reflect each person's individual situation. If you have any concerns, please contact your health care providers immediately.

Introduction

A multiple pregnancy is a pregnancy in which a woman is expecting more than one baby. A multiple birth refers to the birth of twins, triplets or more. Of the 12,000 multiple-birth babies born across Canada each year, a high percentage are born healthy. While babies are a special gift to a family, parents expecting multiples face very specific challenges during pregnancy, when giving birth and when parenting two, three or more children of the same age. Expectant mothers of twins, triplets or more have a very different prenatal (before birth) experience from women expecting a single baby.

Because of the complexities of a multiple pregnancy, twins, triplets and more have a greater likelihood of health problems or even death during the prenatal period and in the months following birth. Multiple-birth infants tend to be born earlier and smaller than a single born baby, thus making multiples more vulnerable to health and developmental difficulties.

It is most important for women who may become pregnant with more than one baby and for expectant parents of multiples to receive timely information and support to help them feel prepared and at ease with the challenges they may face. Being prepared means knowing the uniqueness of a multiple pregnancy, birthing and parenting and what can be done to improve the possibility of a healthier birth outcome and a positive parenting experience. In addition, well informed parents make good partners with their health care providers in reducing the risks related to a multiple pregnancy and birth.

What can prospective parents planning a family do to avoid risks associated with multiples?

Before Pregnancy

- Prospective parents undergoing assisted human reproduction techniques should receive counselling, both verbally and with handouts, of the risks and potential complications associated with a multiple pregnancy and birth before agreeing to treatment.
- Those who are planning IVF treatments should seriously consider Single Embryo Transfer (SET). Experts believe that SET is a very effective method of producing one single baby with live birth rates similar to those when two embryos are transferred. Prospective parents should also be aware that even a SET procedure can result in multiples due to the splitting of the single embryo after transfer.

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- When considering treatments for infertility, investigate the expertise of the fertility centre team, including their pregnancy and live birth success rate as well as their multiple birth rate for the various assisted human reproduction techniques.
- Since Dizygotic multiples (DZ, fraternal) run on the mother's side of the family and Monozygotic multiples (MZ, identical) may also be inherited in certain families, it is important that women planning a family know their family history and investigate whether there are multiples in the family. The closer they are to you on your family tree, the greater the chances of conceiving at least twins. It is a myth that twins skip a generation.
- Women are encouraged to make necessary lifestyle changes prior to conception such as eating a
 balanced diet, folic acid supplementation at least three months prior, cessation of smoking and the intake
 of potentially harmful substances, and practicing stress reduction measures.

What can parents pregnant with twins, triplets or more do to help reduce the risks associated with a multiple pregnancy and birth?

For some parents, knowing the risks related to multiple pregnancy and birth may be overwhelming. If you are pregnant with multiples, the good news is there is a lot you can do to increase the chances of delivering healthy babies. The risks can be significantly reduced through multiples-focused care and with a positive attitude. The strategies outlined below will help to ensure that you and your babies will have the best possible care and birth outcome:

Choosing a physician to manage your multiple pregnancy

- Finding the right physician is critical as you will need to be able to contact her/him with concerns and questions.
- Seek the care of an obstetrician (a physician who specializes in the care of pregnant women and delivery of babies) and other health care professionals who have experience with multiple pregnancy and births.
- Where possible, request an early referral to a care team that specializes in multiple pregnancy (e.g. obstetrics, nutrition, education, social services and peer support). Some larger community hospitals have a specialized multiple-birth clinic in which professionals from various health disciplines provide multiple pregnancy care.
- If you are pregnant with triplets (or more) or if there are health concerns in a twin pregnancy, ask if a maternal-fetal specialist (called a perinatologist) should look after you and the babies during the pregnancy or be involved in your care.

Prenatal Health Care

Early diagnosis of twins, triplets or more is most important for women pregnant with multiples so that
the obstetrician can put into place a multiples-specific prenatal care and birth plan and referrals to
appropriate health care providers. Those who conceive through assisted human reproduction techniques
are at an advantage because they are more likely to have an early diagnosis through early testing to
confirm pregnancy.

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- Find out as soon as possible if the babies are dizygotic (DZ) or monozygotic/monochorionic (MZ/MC—that is, share a placenta). Experts recommend an early ultrasound by 14 weeks to determine if the babies are sharing a placenta because these babies have a greater chance of having additional health risks such as fetal abnormalities, restricted fetal growth and twin-to-twin transfusion syndrome (TTTS). TTTS can also occur between MZ/MC multiples within a triplet or more pregnancy. (For more information on TTTS refer to the *Biology of Multiples* and *Twin-to-Twin Transfusion Syndrome* fact sheets)
- Anticipate frequent prenatal physician and other health care professional appointments to screen for pre-eclampsia, gestational diabetes, fetal growth restriction and placental problems. As well, there will be regular ultrasound examinations of the fetuses to determine the health status of the babies and to detect any complications.
- Expect to have contact with many different types of health care providers during the course of the pregnancy. These include physicians, registered nurses, ultrasound technicians, social workers, specialist midwives, laboratory technicians, nutritionists/dietitians, physio-therapists, pharmacists and childbirth educators.

Healthy Eating

- Women expecting multiples (and breastfeeding multiples) have greater nutritional needs than women
 expecting a single baby and therefore good nutrition is important. Ask your caregiver for a referral to
 a registered dietician/nutritionist (RDN) for specialized and individualized nutritional counselling as
 part of your prenatal care. If your area does not have an RDN contact Multiple Births Canada (MBC)
 for information and suggestions regarding where you can find supportive and specific nutritional
 quidance (see contact information for MBC at the end of this document).
- All pregnant women need folic acid supplements to reduce the risk of fetal neural tube defects. Folic
 acid supplementation should begin at least 3 months prior to conception to be most effective and
 should be continued throughout the pregnancy.
- Women expecting multiples are encouraged to keep well hydrated and include protein, calcium, iron, and calcium-rich foods in their daily diet.
- Women should consult with their physician and nutritionist for advice on appropriate prenatal vitamin supplements and for actions to take if nausea and vomiting become problematic.

Weight Gain

- Although no established nutritional guidelines exist for multiple pregnancy, it is known that women
 expecting two or more babies need to eat more and have a higher weight gain than a woman expecting
 one baby. Excessive nutritional intake and weight gain is not recommended. It is important to discuss
 weight gain with your care providers at each prenatal visit. Recommended weight gains vary depending
 on your pre-pregnancy weight, overall health and the number of fetuses you are carrying.
- Since multiples are more likely to be born early, it is important to gain weight early in your pregnancy. Research tells us that the pattern of weight gain in the first 28 weeks is important for the babies' health.

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A rough weight gain guide for a healthy normal weight woman carrying twins is a total weight gain of 17-25 kg (37-54 lb) distributed as follows:

- 9-13 kilograms (20-30 pounds) by 20 weeks
- 14-20 kilograms (30-44 pounds) by 28 weeks, and
- 18-24 kilograms (44-54 pounds) by 36-38 weeks.

For triplets or more, weight gain should be even higher.

Staying Healthy

- Reducing stress in your life can help you to carry your multiples longer.
- Keep your spirits up through quiet time and relaxation.
- Become informed about multiple pregnancy and what to expect. Ask questions. Try to remain positive.
- Make and keep regular appointments with your various health care providers.
- Attend multiple-birth prenatal classes if they are available in your community. Some classes are available
 on-line or on DVD. Read about multiple pregnancy and parenting in books, magazines and online
 sources.
- Stay as active as possible, but first check with your physician regarding restricted activities.
- If you are a smoker, try to stop or reduce smoking.
- Stay away from people who smoke (second hand smoke). Second hand smoke is harmful to both mother and the unborn babies.
- It is recommended not to drink alcohol.
- Check with your health care providers about taking any over-the-counter medications or herbal products.
- Get to know some of the community resources you might need during pregnancy and after the babies are born. This may include the local multiple-birth support group, multiple-birth parents in your neighbourhood, lactation consultant, community/public health nurse, and postpartum help resources.

Rest

- Health care providers recommend that expectant mothers of multiples rest. Rest can range from reduced activity to total bedrest. However, experts do not recommend routine bedrest to prevent preterm labour.
- Rest when tired and take the time to sit and relax. Know your limitations and follow your health care providers' advice. Cleaning the house can wait.
- Try to get some extra help for care of other children, for grocery shopping, meal preparation, and with housework. Contact Multiple Births Canada for more information and recommendations on where to find help.
- While resting, avoid lying on your back. Lay on your left side to increase the blood flow to heart, uterus and babies.

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• If at all possible, take an early leave from employment. Expectant and new parents may take extended periods of paid/unpaid work leave. For further information contact Multiple Births Canada.

Know the signs of preterm labour

It is important to know the warning signs of preterm labour and to report these signs to the physician <u>immediately</u>. It may be possible to delay preterm labour by a few days or more if it is detected early. (For more information on this topic refer to *Signs of Preterm Labour* fact sheet)

Partner's Role

All pregnancies are a time of intense hormones, mood swings, body changes, and high stress. Good communication with your partner and understanding that these stressors can be reduced helps both parents enjoy the special joys of expecting and parenting multiples. The partner can help to reduce related stress by jointly being involved with prenatal activities such as:

- Learning about multiple-births and parenting.
- Attending multiple-birth prenatal classes.
- Taking a breastfeeding multiples class.
- Learning about the Signs & Symptoms of Premature Labour.
- Making sure that your partner is eating nutritiously.
- Taking care of more strenuous tasks in the house (e.g. vacuuming).
- Attending as many visits to health professionals as possible.

Prepare for Childbirth and Parenting

In order to avoid or reduce potential stress, expectant and new parents of multiples need consistent home support and childcare (other siblings) before and after the babies are born, and during the first year. While waiting, get prepared by contacting other multiple-birth parents who may have tips on how to find help and manage parenting more than one baby. Multiple Births Canada (MBC) is a good resource for information and to network with other parents of multiples. MBC can also put parents in touch with community-based support programs at the local level.

- Sign up for a multiple-birth prenatal class. If there is not one in your community, MBC can refer you to an online course or one on DVD to watch at home.
- Remain optimistic knowing that you have a circle of support through a caring health care team, and hopefully supportive partner, family and/or friends.
- Discuss birthing options with your physician well before the babies are born. For example:
 - What are the possibilities of a vaginal delivery versus a cesarean delivery (C-section)?
 - Will there be a routine delivery of MC multiples at 37 weeks to avoid last-trimester risks?
 - Arrange for a tour of the delivery suite where you plan to have your babies.

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- Think about your infant feeding options before the infants arrive. Breastfeeding is the best for the babies.
 Since nursing and simultaneously feeding multiples can be challenging, speak with your health
 professionals (e.g. physician, lactation expert, midwife, nurses, doula) about breastfeeding and bottle
 feeding term and preterm infants. As well, contact other community breastfeeding support persons such
 as Multiple Births Canada, La Leche League, doula for tips on feeding multiples.
- Getting ready for the homecoming of twins, triplets or more requires more planning than for preparing for a single baby. Everything will be needed in twos, threes or more most equipment, infant supplies, clothing, and transportation to accommodate two, three or more babies.
- A high percentage of babies that are born early are admitted immediately to the Neonatal Intensive Care
 Unit (NICU) for specialized care. Others may be admitted to the Preterm Nursery for feeding, maturation,
 and growth. While waiting for your babies' birth, ask for a tour of the NICU/Preterm Nursery to become
 comfortable with care the babies may require.

Recommended Sources of Information:

The Multiple Births Foundation www.multiplebirths.org.uk/

Telephone: 0208 383 3519 Fax: 0208 383 3041

E-mail: info@multiplebirths.org.uk

Twin to Twin Transfusion Syndrome Foundation www.tttsfoundation.org

International Society for Twin Studies http://twinstudies.org/

Multiple Births: Prenatal Education & Bereavement Support- https://jumelle.ca/

Documents and Articles:

- International Council of Multiple Birth Organizations (2010). Declaration of Rights and Statement of Needs of Twins and Higher Order Multiples www.multiplebirthscanada.org/english/declarerightsmb.php
- Leonard, L.G., Denton, J. (2006). Preparation for parenting multiple-birth children. Early Human Development 82, 371—378
- Twins, Triplets or More: Resource Guide for Multiple Pregnancy and Parenthood (Updated every six months) by Linda G. Leonard, RN MSN <u>www.nursing.ubc.ca/pdfs/twinstripletsandmore.pdf</u>
- Information for Parents: When Twins Share One Placenta (2010) Multiple Births Foundation. www.multiplebirths.org.uk/MC%20Pregnancy%20%20Version%2012%2017%205%2010.pdf
- Multiple Births Canada Fact Sheets on various topics related to multiple pregnancy, births and parenting

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References:

American College of Obstetricians and Gynecologists and Society for Maternal-Fetal Medicine. (2004--reaffirmed 2009.) Multiple gestation: Complicated twin, triplet, and high-order multifetal pregnancy: ACOG Practice Bulletin No. 56. Obstetrics and Gynecology, 104(4), 869-883.

Ayres, A., & Johnson, T. R. B. (2005). *Management of multiple pregnancy*: Prenatal care - Part I. *Obstetrical & Gynecological Survey, 60*(8), 527-537.

Ayres, A., & Johnson, T. R. B. (2005). Management of multiple pregnancy: Prenatal care - Part II. *Obstetrical & Gynecological Survey, 60*(8), 538-549

Ayres, A., & Johnson, T. R. B. (2005). *Management of multiple pregnancy*: Labor and delivery. *Obstetrical* & *Gynecological Survey*, 60(8), 550-554.

Belogolovkin, V. & Stone, J (2007). Managing risk—to mother and fetuses—in a twin gestation. *OBG Management, 19* (7). 66-67; 71-72; 75-79.

Black, M., & Bhattacharya, S. (2010). Epidemiology of multiple pregnancy and the effect of assisted conception. Seminars in Fetal & Neonatal Medicine, 15 306e312.

Blickstein, I., & Keith, L. (Eds.) (2007). Prenatal assessment of multiple pregnancy. London, UK: Informa Health Care.

Dodd, J.M., Crowther, C.A. (2005). Evidence-based care of women with a multiple pregnancy. *Best Practice & Research: Clinical Obstetrics & Gynaecology, 19* (1), 131-153.

Goodnight, W., & Newman, R., & Society of Maternal–Fetal Medicine (2009). Optimal nutrition for improved twin pregnancy outcome. *Obstetrics and Gynecology*, *114* (5),1121–1134.

Knox, E., Martin, W, (2010.) Multiples clinic: A model for antenatal care. *Seminars in Fetal Neonatal Medicine*.15(6):357-361.

Leonard, L.G., Denton, J. (2006). Preparation for parenting multiple-birth children. Early Human Development 82, 371—378

Statistics Canada (2011). Births 2008. Ottawa: Minister of Industry.

Watson-Blasioli, J. (2001). Defining the need for specialized prenatal care for women expecting twins: A Canadian perspective. *AWHONN Lifelines*, *5* (2), 35-42.

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