

IS# 401 11 Tips for Breastfeeding Multiples

The following suggestions are provided as information only. If you have any concerns about your particular situation, check with your babies' physician, a lactation consultant, other healthcare professional or doula.

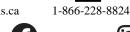
- 1. If you run into any difficulties, get help right away. Don't wait. Sometimes the answer is very simple and a consultation with a lactation consultant may identify the problem and have everyone back on track very quickly. You may even want to seek out resources before you need them. Some difficulties are much easier to prevent than fix.
- 2. Yes, enough milk may be produced to feed two, even three or more babies. Milk production is based on demand and supply. Frequent nursing stimulates breasts to meet nursing demands. Four things positively impact milk supply and production: a) frequent feedings; b) healthy eating, drinking and snacking; c) adequate rest; and
 - d) keeping stress levels as low as possible.
- 3. Pumping breast milk can be useful for moms wishing to help increase their supply, and offer others a chance to assist with feeding. Extra pumping after breastfeeding increases the demand and thus increases the amount of milk produced. Discuss pumping strategies with your health care professional. See MBC's Storing Breast Milk and Pumping Tips fact sheets for more information.

Do not refreeze previously frozen milk.

- 4. Simultaneous feedings help get babies on the same schedule and save an enormous amount of time. Most mothers feed simultaneously or one baby immediately after the other (backto-back). In the early days, one baby may need to feed more frequently than others, but as the babies grow and the milk supply is established, getting babies on the same schedule will be easier.
- 5. It isn't unusual to have one baby who is a stronger sucker. When settling down for a simultaneous feeding, put the stronger sucker to the breast first then spend time settling and arranging the second baby. Sometimes, a smaller baby may have difficulty managing the guick flow set by the stronger feeder. If one of the babies seems to be struggling with managing the flow of milk (i.e. the baby is coughing, gagging, spluttering, or breaking suction often), you may find it helpful to start a feed with this baby, or wait until after the flow has slowed to put this baby to breast.
- 6. Alternate breasts according to the schedule that works for you. Keeping a schedule will help you remember who used which breast last and when. Some mothers prefer to alternate breast with every feeding, other moms prefer to alternate every 24 hours. Mothers with more than 2 babies will often use some type of schedule that involves rotating the babies at each breast and a bottle-feeding, such that all babies get time at the breast. By alternating breasts, two important issues are addressed: first, one baby may be a better (stronger) sucker than the other thus stimulating the breast differently. Alternating breasts encourages both breasts to produce enough milk. Second, a nursing baby looks around and makes eye contact with its mother. When a baby nurses only at one breast, the lower eye doesn't get an equal opportunity to focus, look around and strengthen the eye muscles.
- 7. For triplets or more, it may be necessary to introduce some formula before your milk supply is fully established. There are a couple of choices in this situation: a) top up each baby

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after a breast feed; b) feed two by breast and one by bottle, alternating who gets which at each feed. A helpful way to increase milk supply is to feed two babies at each breast, 10 minutes, followed by the third baby at each breast for 5 minutes each side. Such a routine provides optimum opportunity to increase milk supply to meet the demand. Keeping a schedule ensures all babies rotate equally. Some mothers also choose to prioritize which baby receives breast milk according to the health status of each baby, and will change their system over time.

8.

- 9. **Never microwave breast milk.** The high temperatures can affect its natural beneficial properties, and can also cause varying degrees of temperature in the bottle, creating "hot spots" which could burn the inside of a baby's mouth. Breast milk defrosts very quickly in a bowl of hot water in the kitchen sink. The milk itself need not be hot, room temperature will do. If you are unsure of the milk's temperature, pour a couple of drops on the inside of your wrist. If it burns, it is too hot.
- 10. Use a twin nursing pillow. A large twin nursing pillow is horse-shoe shaped and designed to comfortably cradle two babies at a time. There is enough room on the pillow to turn, burp and change one baby while the other continues to nurse. Brands available in Canada at the time of publication include: San Diego Bébé (formally known the as EZ-2 Nurse Pillow), My Breast Friend Twins Nursing Pillow and Baby Buddy Twin Nursing Pillow.
- 11. Breastfeeding is a learned art for both mother and babies. Be patient, give it time and, if necessary, get some help from a lactation consultant, midwife or doula.
- 12. Babies hit multiple growth spurts throughout infancy. They first ones usually occur around 2 weeks and 6 weeks of age. As a result, babies will temporarily feed more often to increase the milk supply. This usually only lasts for 1-2 days. Many moms interpret shorter times between feeds as meaning they don't have enough milk, so they can become discouraged and guit as they feel their babies are "suffering." Continuing to nurse as per the babies' needs will soon rebuild your milk supply to meet the babies' new demands. Don't give up too soon.

Recommended Sources of Information

La Leche League of Canada Referral Service www.lalechelealque.org Tel: 1-800-665-4324

Lactation Consulting Services Canada www.breastfeedinghelp.ca

MBC Breastfeeding Support Network

Multiple Births Families www.multiplebirthsfamilies.com

Kelly Mom - Breastfeeding and Parenting www.kellymom.com Mothering Multiples: Breastfeeding & Caring for Twins or More, Karen Kerkhoff Gromada, La Leche League International, 2007.

Multiple Births Canada Lynda P. Haddon, Multiple Birth Educator, revised 2013, 2019

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