A singleton gestation is based on 40 weeks, twins on 38, triplets on 36 and quads on 34. Many multiples are born prematurely, from days to weeks early. For parents of multiples wishing to breastfeed their babies, the extent of the babies’ prematurity can impact breastfeeding success. Mother’s milk provides superior nutrition, protects against disease and enhances infant development. In short, it is perfectly made for babies, especially when they are premature. While premature birth complicates the breastfeeding of these infants, with knowledge, patience, perseverance, and good support systems in place, breastfeeding can be successful and any amounts of breast milk they can receive is beneficial. Following are some ideas and suggestions to help you, your partner and premature infants successfully breastfeed.

1. Whether or not you have decided to breastfeed your infants, your breasts will produce milk. This early milk is called colostrum and it contains high levels of antibodies and other substances that protect babies against infection. Therefore, pumping this colostrum and feeding it to the babies makes a lot of sense, and will ensure that they benefit from its important life-supporting properties.

2. One of the last things to develop in the few weeks before birth is the sucking reflex. Thankfully, babies can learn how to suck and swallow and that is one of the reasons you will sometimes see some babies in the nursery with a soother. They are practicing sucking and swallowing. If the babies are a few days or even weeks premature, you may be able to put them to the breast right away and with a little coaxing, trials and patience, they will learn to latch on and suckle. If the babies are very premature (4 or more weeks), you will have to pump as they will be too tiny and weak to take the breast. See MBC’s Fact Sheet, Breastfeeding Multiples: Pumping Tips, for information on pumping.

3. At the beginning of each feed a baby gets the foremilk. This stimulates and releases the hindmilk, which is higher in fat (for growth) than the foremilk. It is important that either nursing or pumping lasts long enough to stimulate the let-down of the fat rich hindmilk.

4. When expressing breast milk, expect to pump 8 to 10 times a day and night. It is helpful to also pump during the nights, as if you were getting up to breastfeed term babies. This round the clock pumping will help you establish your milk supply. See MBC’s Fact Sheet, Transporting Breast Milk to the NICU, for proper storing and transporting breast milk.

5. Once nursing or pumping has been established, supply and demand keeps breast milk forming and flowing. The more the babies feed, or you pump, the more milk your breasts will produce to meet the demands of your growing babies. Remember: make sure you pump frequently, drink lots of fluids and keep your stress levels low. All of these affect the quantity of milk available for your babies.

6. Your doctor, healthcare provider, lactation consultant, doula or midwife can help you decide when to transition from expressed breast milk to putting your babies to the breast. Factors that can help decide when the time is right, will depend on each babies’ ability to suck, breathe and swallow. Each baby will reach this goal at his or her own rate.

7. Premature infants are notorious for falling asleep before their wee tummies are full. While it is wonderful to hold and cuddle each baby, it is important that their tummies be full. You may need to encourage them to continue feeding by undressing them, holding one outstretched in front of you to encourage burping in case that is giving him the feeling of being full or moving them around in your arms to discourage sleep.

8. Initially, breastfeeding may be a challenge with your premature infants. Don’t give up! Take your time, choose a relaxing place to feed, stop and begin again if need be, and don’t be afraid to ask for help. Talk to the nurses in the NICU unit, check in with a lactation consultant. Babies aren’t born knowing how to breastfeed and sometimes with a small adjustment from a knowledgeable source you can all be back on track very quickly.
9. You may wish to begin feeding your babies one at a time until you feel comfortable. If you take this route, the milk stimulation in one breast may also cause a let down in your other breast. Having a sterile container nearby to catch any let-down will make sure that not one drop of your milk is wasted.

10. This double let-down can have a silver lining when feeding two babies simultaneously. It isn’t unusual to have one baby be a stronger sucker than another. Put your best sucker to the breast first then you can spend a little more time adjusting your second baby, plus s/he gets the benefit of the simultaneous let-down without even working hard for it.

Documents and Articles

Multiple Births Canada Fact Sheets on various topics related to multiple pregnancy, births and parenting, as well as feeding multiples [http://multiplebirthscanada.org/index.php/education/publications/fact-sheets]

Breastfeeding Your Premature Baby, La Leche League International

Additional Resources

Finding Our Way: Life with Triplets, Quadruplets and Quintuplets, Triplets, Quads & Quints Assoc., 2001


The Joy of Twins and Other Multiple Births, Pamela Patrick Novotny, Crown Trade Paperbacks, Inc., 1994


www.breastfeedingonline.com

www.breastfeeding.com

www.breastfeedinginc.ca Dr. Jack Newman

Written by Lynda P. Haddon - Multiple Birth Educator - [www.multiplebirthsfamilies.com]

Recommended Sources of Information:

Multiple Births Canada Information Sheets on various Multiple Birth Topics

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

Lactation Consulting Services Canada
[www.breastfeedinghelp.ca]