Congratulations on Your Pregnancy with Multiples!

Congratulations on your pregnancy! Families expecting multiples often find themselves joyous but concerned about the coming months. Your pregnancy may be a long-awaited dream come true. Even so, when the word “multiples” comes up, parents are often shocked. Over time the shock gives way to reality, and planning for the best possible pregnancy and healthy babies begins.

Early Growth and Development

Your babies are growing quickly. By the 28th day after conception, each embryo is ¹/₁₅ of an inch long and hands have started to form. The legs look like small swellings, and the lenses of the eyes start to develop. By the 48th day after conception, each embryo is a little over 1 inch long, the fingers and toes are clearly defined, and the head, trunk, arms, and legs look very human.

Some parents want to share their news with only a few friends and family members until after 12 weeks, when the small risk of miscarriage or spontaneous natural reduction is lower. Spontaneous natural reduction is when the pregnancy naturally reduces from twins to one baby, or from triplets to twins or one baby.

A Higher-Risk Pregnancy

Some families expecting multiples experience an uncomplicated pregnancy and reach full term without many challenges. Others reach full term or very close to full term after having some complications. If signs of problems are noticed early, families can usually have healthy babies under the watchful care of a very experienced health care team.
The news of a pregnancy with multiples brings you into a new world, the world of a “high-risk pregnancy.” Preterm labor and preterm delivery are the biggest concerns in a pregnancy with multiples – up to 60% of twins are born preterm. Other complications in a pregnancy with multiples include placental or umbilical cord problems, babies not growing equally, and blood pressure problems such as gestational hypertension or preeclampsia in the mother.

**Concerns of Preterm Birth**

Your care provider has given you an “official” due date that matches the day you will reach 40 weeks of pregnancy, counting from the first day of your last menstrual period. But, health care providers think of a pregnancy as full term once you have reached 37 weeks of pregnancy. Babies born before 37 weeks are considered preterm.

Twins are 5 times more likely than a single baby to be born preterm, while triplets are 9 times more likely than a single baby to be born preterm. On average, twins are born at 36 weeks gestation, a month before their “official” due date. Over half of twins (60%) are born before 37 weeks, and 12% are born before 32 weeks. For triplets, 93% are born before 37 weeks and 36% are born before 32 weeks. For comparison, 11% of single babies are born before 37 weeks and 2% are born before 32 weeks.

Preterm infants often have a low birth weight. They may also have difficulty with breathing, feeding, and maintaining their body temperature for a short time after they are born. For these reasons, most babies born before 37 weeks are admitted to special-care nurseries.

Preterm infants also have a higher risk for long-term medical problems such as hearing loss, vision problems, and developmental disabilities and delays. The earlier preterm infants are born, the more serious these problems are likely to be. A small number of preterm infants do not survive. But, most preterm infants, especially those born after 32 weeks, do very well with a special-care nursery team of experienced health care providers.

**Choosing a Care Provider**

With a high-risk pregnancy, it is important to find a care provider who knows how to care for women expecting multiples. You may want to choose a perinatologist for all of your prenatal care. A perinatologist is a doctor who specializes in high-risk pregnancy and has 2 to 3 years of training beyond the 4-year residency that is required in obstetrics and gynecology (OB/GYN). This doctor knows how to monitor a pregnancy with multiples and will watch for signs and symptoms of problems that may occur.
It is especially important to see a perinatologist if you are having twins who share a placenta (called monochorionic/diamniotic twins) or who share both a placenta and 1 amniotic sac (called monochorionic/monamniotic twins). These pregnancies are considered high risk for the babies.

Another choice is to see your regular prenatal care provider, usually a doctor who is an OB/GYN, for regular prenatal visits, and to have 2 or more visits with a perinatologist during your pregnancy.

The Prematurity Prevention Program at University of Washington Medical Center (UWMC) is for families at risk for preterm birth – including families expecting multiples. This program has been providing state-of-the-art care for families for almost 20 years. This team is made up of perinatologists, specially trained nurses, resident doctors, a social worker, and a nutritionist who offer this special program for families expecting multiples.

Services at UWMC

It is important to choose a hospital where you will feel safe and comfortable giving birth to your babies. The Maternity and Infant Center at UWMC provides care for women during the labor and birth process, for women who have complicated pregnancies and need to be hospitalized before they deliver, and for women who are staying in the hospital with their babies after delivery.

Our antepartum (before birth), labor and delivery, and postpartum (after birth) units provide a calm and soothing setting during your transition to parenthood. You will receive high-level care from our skilled health care team, who are comfortable caring for families with multiples. UWMC also has a Level 3 (the highest level available) Neonatal Intensive Care Unit (NICU), which provides care for both full-term and preterm infants.

Our highly regarded Lactation Services Program adds to this exceptional care team by providing specialized assistance to mothers of multiples with full-term or preterm babies. Specially trained nurses in this program can help you with breastfeeding your babies throughout your breastfeeding experience.
Prenatal Care from the Prematurity Prevention Program at UWMC

Prenatal care for a woman expecting multiples at UWMC’s Prematurity Prevention Program includes more than routine prenatal care. Your prenatal care with our program will include:

- More frequent clinic visits.
- Awareness of common concerns of families expecting multiples.
- Screening at each visit for symptoms of preterm labor.
- A high trust and belief in a woman’s instincts of what is occurring in her pregnancy.
- An initial ultrasound evaluation to help find out if your babies are sharing a placenta or if each has its own placenta. This is an important issue, since multiples who share a placenta are at higher risk of having certain problems.
- Ongoing ultrasound checks for your babies’ growth and development, the length of your cervix (early shortening could signal a problem), and amniotic fluid levels.
- Special screening for urinary tract and vaginal infections.
- Nutritional assessment and dietary counseling for pregnancy with multiples.
- Social situation and work situation assessment and counseling.
- Regular antepartum testing or NST (non-stress tests) during the third trimester to check for uterine contractions and the babies’ well-being.
- Our class, “Preventing Preterm Birth,” which teaches the signs and symptoms of preterm labor.
- 24-hour access to nurses who know about preterm labor and the needs of families expecting multiples from our Maternal and Infant Care Clinic Triage Nurse or our Maternity and Infant Center Labor and Delivery nurses.