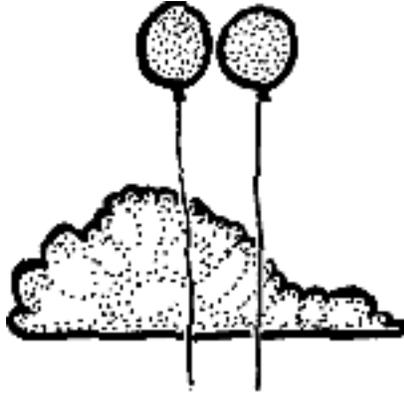


The Death of Your Twin or Triplet Babies

A pamphlet for parents and families who have experienced the death of both or all of a set of twins, triplets or higher multiples, during pregnancy, at birth, or in infancy.



For anyone who wants children, twins or more are very special. For many, finding out that it's twins or more feels like drawing a winning ticket when it comes to parenthood, and is the most exciting, memorable day of their lives. Many prospective parents who learn that they are carrying twins, triplets, or even higher multiples naturally also have some mixed feelings because of the realities of birthing, caring for and raising more than one at a time--but sooner or later most become very excited about their "group arrival" of babies and the prospect of such a special kind of parenthood. Many soon come to enjoy their special status and prestige among their family and community as the parents-to-be of multiples. Whether the pregnancy was planned or unplanned, a result of spontaneous conception or after months or years of fertility treatment, "getting ready" for some extra blessings soon becomes the main goal of life. Thanks to modern technology many parents get to know early that there are definitely multiples, and how many--and get to know each baby very well long before their due date, through sonograms and other testing, becoming thoroughly bonded to each one and to the reality of being the parent of multiples. It's not uncommon for babies to have each have their names from the early part of pregnancy, and to have everything ready early because of prematurity. For those whose twins were not diagnosed until birth, the news carries the same emotional impact.

The Loss

The death of both or all of the babies is devastating in a way that few others can imagine. Because of the much higher medical risks for triplets or more--and for twins as well--many parents experience the death of both or all of their babies in the first 20 weeks of pregnancy, in-utero (technically a miscarriage) or after premature birth; from premature birth after 20 weeks; in-utero or after birth from congenital problems shared by both or all; from maternal conditions; from the effects of Twin Transfusion Syndrome and other complications that can occur in identicals; or from birth trauma. Some twins die in-utero near term for no known reason, and occasionally both twins are victims of SIDS (Sudden Infant Death Syndrome), illness, or an accident. Sometimes the deaths are at the same time; sometimes after weeks or months of hopes that at least one baby would make it. Sometimes, the losses are at different times and/or from separate causes (such as stillbirth and SIDS in twins; or miscarriage, birth defects and prematurity in triplets). Some of these extra risks are ones that parents weren't told about at the exciting time of finding out it was more than one. No one who hasn't loved two or three or more at once and had hopes and dreams for each and all of them, can quite imagine the desolation of the death of two or three or more children over a period of hours, days, weeks or months.

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At the Hospital

If both or all the babies die around the same time, at or after birth, parents need to take and if necessary insist on having every opportunity that they might want to see and hold the babies, and to have mementos from them. Parents should never allow themselves to be rushed into saying goodbye. It is their need and right to hold both the babies, together if possible, for as long as they want and as many times as they want over the coming days, and to invite family members and friends to come see and hold the babies (including siblings, even young ones, if there are any). Parents have deeply appreciated the preciousness of this time for years to come, even though it was so painful. It's also important for parents not to be rushed into decisions which may seem overwhelming, and to consider asking a trusted family member or friend to help define options and coordinate preliminary arrangements while providing the parents with the opportunity to make the final decisions. Some important things are:

- plenty of good photos of the babies, together if possible (and touching hands) and being held by the parents, dressed up in an outfit chosen by the parents. These should be taken by family members as well as hospital staff, and special care given when they are developed. Videotaping is highly recommended as well (as well as requesting videotapes of earlier ultrasounds, if they exist).
- naming the babies (even if it's before 20 weeks' gestation and not legally required). This is very meaningful to many parents, and helpful in being able to grieve for and remember the babies later. Some choose to keep the special names they may have picked out for living children later, others decide to use them for the twins and create variations for children later.
- decisions about burying or cremating the babies together. Many have taken comfort in knowing that their twins are together in this way. If one baby has already been buried, this may still be possible--this can be discussed with a funeral director. One family's twins were cremated separately but the ashes of each placed on one arm of a beloved grandfather who had died earlier in the year. If one baby died earlier and it was not possible for parents to participate in the burial very much because of the condition of the other, or because there were no remains of the first baby or they were handled by the hospital, it's important to find ways for that baby to be included in the memorial service and other aspects of the second burial as well. Burial or memorial services do not have to be at a funeral home--other options are churches, your own home or that of relatives, or a park. One couple who lost their triplets, and were both funeral directors themselves, chose to bring their babies home for a service to which they invited dozens of relatives and friends.
- birth/memorial announcements. Many have found these a very beautiful way to honor their babies and to let others know what happened and what their feelings and needs are. Samples are available (contact CLIMB).
- finding out whether the twins or triplets were identical or not. This is very important later in knowing how to "picture" the babies, and also in looking at risks in another pregnancy. Even babies conceived with fertility technology may be identical. This needs to be requested (and often, insisted on) for same-sex babies in the first few days as it generally will not be possible later. Also, it will be important at the time and later to find out exactly what happened medically to cause the deaths, and to find answers to any questions.



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Coming Home

Coping with the First Weeks and Months

"The silence was deafening" is the way one mother expressed it--but there are truly no words to describe the emptiness and devastation of coming home with no babies at all. After the first few days or weeks, the shock and denial wear off and there is a great void--yet it is often at that time that others expect you to be "back to normal". Often it is at the time of the mother having to go back to work--and when she'd perhaps expected not to be going back at all because of having infant multiples. While work and other activities can be a temporary distraction, they can also be very stressful; and they do not lessen the grief. Fathers may have a very difficult time as well, since the birth of their babies made them so real, only to be not able to protect them from dying, or protect their spouse from her loss and grief. Other fathers may try hard not to talk about the babies or show any emotion, hoping that will make it easier.

It is very important for both mothers and fathers to talk to anyone whom they can talk to who understands and is willing to let them talk about their babies. They are saying both hello and goodbye to two, three or more babies and need every such opportunity to be in spirit with each of them, and all of them together, plus talking through the guilt, anger, frustration and myriad of other emotions that are the overwhelming fact of their life. Infant loss support groups can be very helpful--it's a good idea to call and talk to the group leader in advance to make sure of the group's sensitivity in this area. Finding a friend who has also lost multiples (through the group, or through CLIMB) is one of the things that has helped many the very most. It's also very important to talk with relatives and close friends and give them an opportunity to understand and be supportive--but if they cannot be, find others who can. Counseling from a trained counselor is always a good "insurance policy", and no one needs to be "losing it" to go--coping with the deaths of two or more babies is plenty of reason.

If the Babies Were After Infertility

Many have gone through months or years of trying to conceive, and quite possibly five years or more plus treatment with fertility drugs and methods such as in-vitro fertilization. They may have had miscarriages or other losses, including multiple birth losses; and may have undergone selective reduction hoping to give the remaining babies the best chance--or decided not to have reduction. It was easy to feel that these multiples (and this "instant family") were meant to be after all that--and now easy to wonder if they will ever be a parent (or for some, a parent again) and guilty to have tried so hard only to have this outcome. Yet for many, seeing their own babies after so long makes it even more essential to try again...but angry at having to go back into all the realities of fertility treatment when they may have been so close to never having to deal with it again. "With loss, it gets somewhat better each month--but with infertility, it gets harder each month," said one. Becoming parents in the context of the death of two or more children is a heartbreaking experience--and one that they did nothing to deserve.

Subsequent Pregnancy

Even if the multiples were an unplanned family addition, most parents want another pregnancy, and often have subsequent children as soon as they are able to. It's important to know when the mother is physically and emotionally as ready as is possible--but there is no magic formula, and each situation is unique. For those involved in fertility treatment, there are well-founded fears of conceiving multiples again --and of not conceiving at all. For those whose multiples were their first children, there are few clues to what to expect medically in a single pregnancy. Lots of support is necessary in decisions about "trying again", and in going through another pregnancy when it is possible. When it is possible to have a successful subsequent birth (after an anxious pregnancy and sometimes months



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of bedrest and other measures) it is a joyful experience that provides much more "balance" in what it's like to be a parent--but there is no pretending that it takes the place of the twins, or the first twins if there are multiples again; and the new baby is both wonderful and a reminder of all the "Why?" questions.

Remembering the Babies

Parents have found many ways to remember their twins or triplets and to include them in their family for the rest of their lives. Some of these are: a ring, necklace, locket or charm with their names and birthstone or footprints...creating an artist's portrait (from photos or memory)...mounted photos or needlepoint or other works displayed in their home...talking about the babies to their older or younger siblings, and including them in some way in holidays and family occasions...helping to found or lead a local or other support group, and reaching out to others, in honor of them...planting trees side by side at home or in a public park and watching them grow over the years...and many more. It is important for each family to find ways that are meaningful to them. Few ever forget their twins, or take for granted the preciousness and fragility of life--but with time and support, the babies' memory is part of life.

*by Jean Kollantai, CLIMB, Inc.
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