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ON THE COVER

Abby and Ally Hall, 3½ years old, recently moved with their family from Colorado to Nebraska, where they can be near grandparents and cousins. The girls are happy in a new pre-school and love playing with their Beanie Babies.



Cover Photography by Murray J. Elliott

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Join us **online** at www.TwinsMagazine.com

Stretched out on the bed next to me, my grandmother, fully clothed, would sigh and say, “The man who invented the bed was the smartest man who ever lived.” I must have been about 5 or 6 years old and didn’t appreciate the bed quite as much as she did. I am sure she just wanted me to go to sleep, but, nine times out of 10, she was sound asleep while I was still wondering how she knew that a man invented the bed and who he was exactly.

Well, I now appreciate my grandmother’s wisdom. She had six children. I have only two, but I cannot count the times I fell asleep reading to them. I would hear, “Mom, mom. Finish the story. Mom, are you asleep?” And, of course, I too was fully clothed.

So why do some babies and young children stall, procrastinate and do anything to avoid sleep? And two wakeful babies can mean much more than sleepless nights... sleepless months. You expect to wake up all

through the night with your babies, at least for the first few months, but toddlers... well, that’s another bedtime story.

If you are reading this in a sleep-deprived fog and three straight hours of sleep sound like bliss, have hope. You will sleep again. Maybe

sooner rather than later. In our special section on sleep, we offer three views on twins and sleep. Baby sleep expert Elizabeth Pantley answers a couple of your e-mails about night wakings and naptime-turned-nightmare. In her book *The No-Cry Sleep Solution*, she offers gentle ways to help your babies sleep. It’s great “bedtime reading” and you’ll sleep better with it on your nightstand. Excerpts begin on page 21. Two mothers of twins—one a nurse and lactation consultant and the other a veteran of the crib-to-bed transition—complete our sleep section.

You may have noticed that in our last issue we introduced a cartoon by Brad and Brian Jones (back page). The 37-year-old twins grew up in Kansas City where they live with their wives and children today. As in childhood, their lives continue to follow parallel paths.

From the age of 3, they’ve shown a passion for art. (See their photo and cartoon to the right.) A couple of years ago the two began to collaborate on a comic strip about twins; their father Bruce dubbed it “Twin Vision.” The characters are based on the personalities of Brian and Brad and most of the scenarios come directly from their own childhood antics and the experiences they shared. The duck, often seen as an observer in their comic strips, is modeled on a pet duck their father owned when they were young.

Brian wants readers to enjoy the humor in the comic strip, of course. But he also aims deeper: “[I want] the cartoon to help parents understand the complexity and close bond that twins share. Having twins is all about having patience, which my mother never lacked.”

Their mother may have been patient, but she didn’t always feel in control, despite the fact that she and her husband already were experienced parents of three children when Brian and Brad arrived. “We discovered that all our wisdom did not prepare us for what was about to happen... [our twins gave] me only fleeting moments of tranquility, a state I seldom experienced in the next 16 years,” recalled their mother, Bonnie. “It is my hope that all parents, particularly parents of twins, will identify with and enjoy the antics of these lovable characters, as we have enjoyed our time with their creators.”

The tough part is choosing which cartoon to run in each issue. I hope you enjoy Brian and Brad’s cartoons as much as we do.

Sharon Withers
Managing Editor

Do you know?



The National Organization of Mothers of Twins Club is not just for mothers. Turn to page 13 to read about a father’s foray into the world of mothers of twins clubs and to learn about the NOMOTC and other resources.

Twin Vision: “portrait and self-portrait”



Brian and Brad Jones, age 5



Brian and Brad, forever age 5

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More information on TTTS

I was so happy to see Dr. Machin's article on TTTS in the January/February issue. So much misinformation is out there about TTTS and few people know about TTTS, including OB/GYNs and parents of multiples. My family was very fortunate to be under the care of a well-informed and progressive OB/GYN who immediately referred us to a perinatologist when we were pregnant with our twin boys. This was crucial in receiving our early diagnosis of TTTS. I honestly believe we would not have our two healthy boys today if the TTTS had not been diagnosed so early and if we had not been under the early care of two physicians who were familiar with this rare condition and the best ways to treat it. I appreciated that Dr. Machin's article was so informative and accurate.

I was a little disappointed, however, in the article by Karen Johnston, also on TTTS and in the same issue. It suggested that Dr. Quintero was the "most experienced surgeon in this field" and stated that he is "considered the world's leading authority" on TTTS laser surgery.

I'm sure Dr. Quintero is a wonderful surgeon, but it should be noted that the originator of the only currently available surgery to treat TTTS is Dr. Julian DeLia of St. Joseph's Hospital in Milwaukee. Dr. DeLia, in my book, is the most experienced surgeon in this field and the world's leading authority. I underwent surgery for TTTS at about 20 weeks gestation and my two amazing miracle children are now 2 years old. I am ecstatic to hear that Ms. Johnston's girls are equally amazing miracles, but I would like other parents who may suffer from TTTS to know that they have some options besides Dr. Quintero. They should contact the TTTS Foundation online at www.tttfoundation.org or call (800) 815-9211 to receive thorough information and assistance regarding all options.

Justine Logan
via e-mail

Editor's Note: You are quite right. Dr. DeLia originated the surgery and the TTTS Foundation is a primary resource. In "Special Miracles" readers write about their personal experiences and express their opinions. Typically, we run a sidebar that carries information on the TTTS Foundation with every article on TTTS. In this instance, however, space was limited. Another TTTS article is planned for our fall issue and we will include this information.

Help for bed rest moms

This January/February issue of Twins magazine was great! I am always impressed by the responses you get from readers and by the quality of the articles.

The "Zygoty Puzzle" article about the two treatments for TTT babies was quite informative; I always enjoy Dr. Machin's articles. I had a very close friend lose her twin sons at 24 weeks to TTTS so the article hit close to home for me.

Loved the "Uh-oh! Toddler trials and training" article too. My twins are almost 5 and thankfully we're out of the toddler stage. But I remember it like it was yesterday. Recently, a Love & Logic class was held here, but because of scheduling conflicts we couldn't attend. I hope there will be another one soon. Parents I have talked to who have attended these classes or read the books and put into practice what they learned,
"bed rest moms" continued on page 6

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"bed rest moms" continued from page 5

give high praise to the entire program. Love & Logic can be started quite early but if you miss "prime time" (toddlerhood) it can be started later, or so I've heard. An excellent article.

The postpartum doula article was very interesting, too. I have never heard of a postpartum doula and sure wish I had had one after the twins were born. The article also mentioned that antepartum doulas give support to women on bed rest, which is so important. I want to share with you another program that supports women on bed rest: Sidelines [www.sidelines.org, (888) 447-4754 (HIRISK4)]. I am one of hundreds of volunteers in this very organized program. No one is ever turned down, regardless of their situation. The coordinators contact every single volunteer (if needed) to find the closest match for someone on bed rest. If you run a story on bed rest, may I suggest providing information on Sidelines?

I loved the article "Hardwired to Connect." It's so sad that many children suffer from emotional and behavioral problems resulting from a lack of "closeness" or feeling part of a loving/accepting family, which includes friends and their children. I hope this article helps families begin making positive changes.

Renee Hald
Poulsbo, Wash.



Cover boys, then and now

The then-10-month-old babies on the cover of our 2003 Guide to the First Year, (left) are now 2½ years old (right). Their appearance on the cover of the Guide to the First Year generated a nice feature in their hometown newspaper, *The Randolph Guide* in Asheboro, N.C. These cover gigs are not the only moments in the spotlight for Adam and William Harvey, monozygotic sons of Laura and Marcus Harvey of Randleman, N.C. The pair, born eight weeks premature, made their first public appearance in the local Veteran's Day Parade when they were only 13 weeks old. Since then they have been featured twice on local television programs. Laura is president of her area twins club, Mothers of Multiples, which meets in Greensboro.



Editor's Note: We asked TWINS Magazine message board members to tell us how twins changed their lives. We think Kimberly Fulbright painted a vivid picture of life before and after twins.

Twins have changed our lives

Twins are great!

We used to work out every night after work for a couple hours at the 24-Hour Fitness by our house. Now we get a 24-hour workout cleaning up the house after a day of baby-watching, feeding and bathing.

We used to wonder what to do on the weekends, now we wonder why weekends have disappeared.

We used to wonder what club to go to, where to eat out, what fashions were "in" and "out." Now we don't worry about clubbing and wonder why more restaurants don't have baby-friendly feeding rooms, and why most other malls don't offer the family changing (breastfeeding) rooms that Colorado Mills does.

Our house used to be minimalist in décor. Now it is all we can do to get from the living room to the bathroom without tripping on an excersaucer or bouncer chair. I recently broke my first bone ever: my toe. I stubbed it while walking between the stimulation mat, coffee table and the sofa. All the pain was soon forgotten when Kylee laughed at my silly red face. Madison also gave a small chuckle, although I think she was mostly mimicking her sister.

Vacations? We still take vacations but they seem like more work than rest these days. I used to pack two suitcases for myself, one for my clothes and one for my shoes. Now I just smash whatever I can into one suitcase for the babies and me. Daddy gets to pack one for himself and carry the diaper bag—the size of a small duffel bag—as his carry-on. I guess the twins have taught me to be very resourceful.

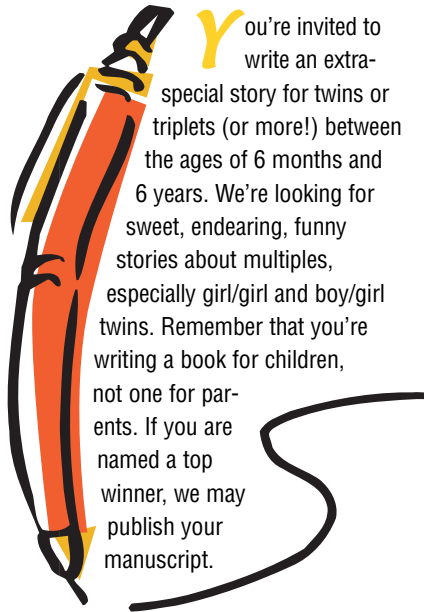
Sleep... an interesting concept. The last time we got a full night's sleep with consecutive hours of rest was, well, before the pregnancy and getting up to run to the toilet every 20 minutes, or now, to feed the babies every couple hours. The funny thing, though? I don't mind getting up in the middle of the night. Truth is, I'd miss them if they didn't wake me up every couple of hours.

The thing that the twins have changed the most about us? How much we love each other and respect one another. The birth of our girls gave a re-birth to the relationship I share with my husband. We are so much closer now and both of us never knew we were capable of loving something so much. We love our little family more than anything. We cannot even begin to imagine our lives without the girls. Christmas this year felt different, more special. The birth of the twins gave our families a good reason to get together for the holidays.

We love our twins, we love our lives and our family is the best thing that ever happened to either of us.

Kimberly Fulbright, wife to Jeremy and
mommy to Madison Amber and Kylee Michelle
Littleton, Colo.

Participate in our 6th annual fiction contest!



You're invited to write an extra-special story for twins or triplets (or more!) between the ages of 6 months and 6 years. We're looking for sweet, endearing, funny stories about multiples, especially girl/girl and boy/girl twins. Remember that you're writing a book for children, not one for parents. If you are named a top winner, we may publish your manuscript.

2004 Contest rules and terms

Story Categories. Your original, unpublished manuscript must focus on multiples or their families. There are three story categories:

- Ages 6 months to 18 months
- Ages 19 months to 4 years
- Ages 5 to 6 years.

Choose one story category: Winners will be selected on the overall quality of the story and writing—with special attention to the age category—as well as tone, character development, quality of language, brevity and clarity of the plot. Stories should engage young multiples and early readers. We will commission illustrators for the winning stories. Details of the contract will be provided to contest winners. Each entry must be original, not previously published or accepted by any other publisher at time of submission.

Submitting a manuscript: There is a \$10 entry fee for each story. Send a typed, double-spaced copy of your manuscript with your name, signature, address and phone number in the upper left-hand corner of the first page. Keep a copy of your submission. Submissions cannot be returned.

Deadline for entries: We must receive entries no later than Friday, April 23, 2004. TWINS Magazine is not responsible for manuscripts

lost in the mail. Send entries to TWINS Magazine, Fiction Contest, 11211 E. Arapahoe Rd., Suite 101, Centennial, CO 80112-3851. Only one entry per household, please.

Winners: First prize is \$250 and publication in the January/February 2005 issue. Second prize is \$175; third, \$100. Winners will be notified by mail by Friday, July 30, 2004, and announced in the September/October 2004 issue. Winning stories may be published in book form and may become part of our Bookshelf. No phone calls, please!

Terms: TWINS Magazine reserves the right to accept or reject an entry for any reason and to edit manuscripts as necessary.

Any and all materials submitted will become the property of TWINS Magazine. Prior to actual publication of any material, the author will be required to execute a copyright assignment form. Your signed entry constitutes an agreement to execute a publishing contract that includes copyright assignment.

Limitation: TWINS Magazine reserves the right to decide whether or not to publish in any form the winning fiction contest winners. The top winner (first place) will be published in the January/February 2005 issue of TWINS Magazine.

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Some babies co-bed; others go solo

I have 4-month-old boy/girl twins and they have been sleeping together since we brought them home from the hospital. My daughter is very attached to her brother and doesn't want to sleep unless he is in the crib, but they are starting to wake one another and may need different sleeping arrangements. I am curious as to what other parents of twins are doing.

Readers respond:

We also have boy/girl twins and our daughter needs her brother within reach any time they fall asleep. We connected two cribs together with the gates down and facing each other. This not only allows them to reach through the gate to touch each other, but it also prevents them from rolling onto each other during the night. Now 12 months old, they continue to sleep through the night. In the morning we find them both on one side, happily playing until we come and get them.

Larry and Silvia Kading
Weston, Fla.

When I found out I was pregnant I set my mind on co-sleeping arrangements but it only worked for a couple days. My daughter—quite the noisemaker—could sleep through everything, but she kept waking up my son, whether in a cradle next to my bed or in their own cribs in their room. After many sleepless nights and out of desperation, I moved them into separate rooms. It was hard on my son and me and took him about a week to adjust. Then we all got some sleep.

Kristien Hamilton
via e-mail

I have 5-year-old boy/girl twins and my daughter was very attached to her brother. They started waking each other around 5 months. First, I started separating them at nap time. When it was no longer a problem for my daughter to get to sleep (about a week), we tried the night separation. After maybe two weeks, they were sleeping fine on their own—from 8 p.m. until 7 a.m. It takes patience while they get used to new arrangements but lots of comforting, touching and soft voices got me through those few weeks.

Kellee McGee
Ridgecrest, Calif.

I have 16-month-old boy/girl twins. When I was pregnant I had fantasies of my twins sharing a room until they were teenagers, thus enhancing their unique twin bond. Reality set in quickly. After

my babies came home from the hospital it became clear that each baby had very different sleep patterns. I kept thinking they would eventually fall into a synchronized sleep schedule and get used to their sibling crying, but as the months passed that goal seemed more and more elusive. Parents in my multiples group encouraged me to keep my babies together and let them “work it out.” After eight stressful months, we separated our babies. This made it easier to use sleep-training techniques. It also gave us the peace of mind that we were addressing their individual sleep needs. Both toddlers are now good sleepers. As for their twin bond, I have come to the conclusion that they automatically have a special relationship that will continue to grow, regardless of whether they share a bedroom.

Jill Blaszkowsky
via e-mail

My 3-month-old fraternal girl twins were premature and spent four weeks in the NICU, where they were together the entire time. When we brought them home, however, they didn't seem to sleep well together. After one week, I put them in their own bassinets in our bedroom. It worked much better; we all got more sleep. They now sleep in the same room, but in separate cribs. I was told they would get used to each other's crying. I think that's true because they don't wake each other anymore.

Brandy Chapin
via e-mail

I have two sets of twins, ages 5 and 1. My first set of twins shared a crib until they were 8 months old and started turning in circles and kicking each other. The second set shared a crib until their first birthday. The difference? A crib divider! It's not expensive and definitely worth the investment. When one of them began standing on top of the divider (a safety issue), we put them in side-by-side pack-and-plays (all four kids are in one room), and they have had no trouble at all adjusting.

Molly Holloway
Laurel, Md.

I have 2 1/2-year-old boy/girl twins. Ever since they were born I have put them together for nap time and bedtime. When they were about 4 months old they started to wake each other up, but after a while they got used to each other's cry. Now they only wake up if the other one is crying because of pain. Once I separated them and they kept asking for one another. Have patience; your twins will sleep through the cries and noises they make.

Jennifer Eastman
Vacaville, Calif.

Sleeping arrangements for my twin girls was a challenge at 6 months, also. We put the girls in their own cribs, but one twin screamed. She knew she couldn't get close to her sister and even tried climbing out! Then we made things worse by putting them in separate rooms. After two sleepless weeks, we placed two twin mattresses in an L-shape on the floor in the corner of their room. I made a decorative bumper for the wall and placed a blanket on the floor next to the mattresses for cushion until they figured out the boundaries of their new beds. Now we all sleep better at night.

Rhonda DiBasilio
via e-mail

Our boy/girl twins slept in the same room until they were about 4 months old and started waking each other. We put them in separate bedrooms until they were about 9 months old. They both slept much better and by the time we placed them back in the same bedroom, they were able to put themselves to sleep and sleep through almost anything, including a twin's occasional crying.

Diane Imbach
Rancho Palos Verdes, Calif.

At about 4 months my boy/girl twins started scratching, grabbing, turning and kicking—and awakening the other. We separated them with anti-roll infant cushions. This gave them a bit of distance to get used to being apart but they were close enough to see and hear each other. At 6 months of age there simply was not enough room in one crib so we switched to two cribs in the same room without any problems. We made sure to have the same musical crib toy attached to the cribs in order to have some familiarity.

Nicole
Ontario, Canada

My fraternal twin sons slept in the same crib until their wiggling woke each other. I put their two cribs together and lay one in each crib, close to the rail where they could see and hear each other. It wasn't long until they were back in the same crib and one would wake without waking the other. As they got older they often slept in the same bed.

Terane Higgins
via e-mail

For May/June

I want to take my 18-month-old twins to our community pool this summer, but it seems like an impossible outing by myself. Any suggestions?

E-mail your replies to twins.editor@businessword.com; please type "Family Talk" in the subject line. Or, post your replies on the TWINS message board at www.TwinsMagazine.com.

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by Patricia Malmstrom, M.A.

The importance of knowing zygosity

Dr. Machin is “on vacation” this issue, while he moves from Berkeley, Calif., to Vancouver, B.C., Canada. In place of his regular column we are running an interview that Pat Malmstrom conducted with Dr. Machin. If you want to e-mail questions about your twins zygosity to Dr. Machin, his new e-mail address is geoffmachin@shaw.ca.

Tell me about your campaign to replace “identical” and “fraternal” with “MZ” and “DZ.”

I am campaigning to reduce parents’ confusion and anxiety about zygosity by abolishing the use of the words “identical” and “fraternal” in reference to twins. I have never met a pair of “identical” twins and neither has any twin or their parents. One-egg twins come from one egg, that’s all. They are never “identical” in the strict sense

of the word. In fact, it is possible for them to have noticeable differences in characteristics like height and hair color. Still, they are too alike in appearance to have come from two eggs. One-egg twins are monozygotic which means they came from one fertilized egg or zygote. I call them MZ for short. Two-egg twins are dizygotic which means they came from two fertilized eggs or zygotes. I call them DZ for short.

Why is zygosity so important?

I have come to see that zygosity is overwhelmingly important for the lives of twins. I know that parents are often confused about this, but there is actually nothing that matters more for the health and development of twins than knowing if they came from one or two eggs. There are significant chances that diseases of several

kinds will occur in both twins if they are MZ, but less so if they are DZ. I am currently helping with zygosity diagnosis in twins with cancer. If an MZ twin has breast cancer, there are four breasts to think about, not two, in terms of further cancer risks.

How do you help parents find out their twins’ zygosity?

I frequently speak at parents of twins clubs to clarify issues of how many placentas and how many eggs. Parents e-mail me their questions as well. I also can arrange for twins to be tested when they or their parents do not know whether they came from one fertilized egg. (There is a charge of \$100 for this test.)

Why do you promote screening for zygosity in the first trimester?

When I was in training as a genetic pathologist 30 years ago, I immediately saw the high risks of twin pregnancy. I think that many caregivers get carried along by the enthusiasm that goes with twin pregnancy management and fail to face up to its riskier side. The key to good outcomes is getting a really good ultrasound in the first three months of pregnancy, when one can easily tell how many placentas are present—before the womb is crowded and the number becomes difficult to see. Then we can attend to those twins who have extra high risks because they share a placenta.

Did you have any idea what you were getting into?

No, every field of knowledge expands, and techniques improve all the time. What lags

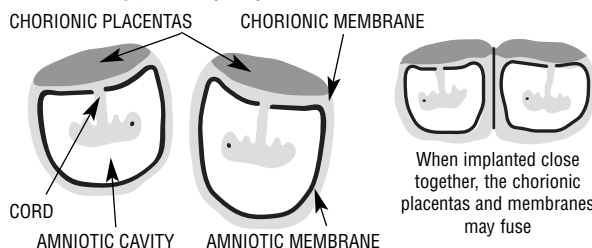
The Placentas of a Dizygotic (DZ) Twin Pair

The placentas of DZ twins are always:

- ▶ dichorionic (DC)
- ▶ diamniotic (DA)

Each fetus always has its own:

- ▶ chorionic placenta
- ▶ chorionic membrane
- ▶ amniotic membrane



The Placentas of a Monozygotic (MZ) Twin Pair

The placentas of MZ twins are most often:

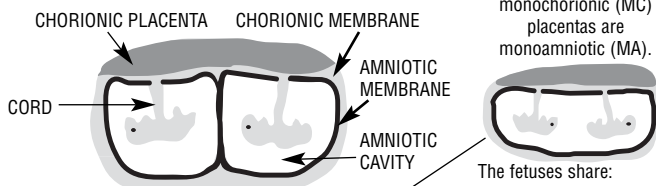
- ▶ monochorionic (MC)
- ▶ diamniotic (DA)

The fetuses share:

- ▶ 1 chorionic placenta
- ▶ 1 chorionic membrane

Each has a separate:

- ▶ amniotic membrane



Twin-to-twin transfusion occurs about 15% of the time when the placenta is truly single (MC).

About 33% of MZ pairs have truly separate chorionic placentas, like all DZ pairs.



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behind is medical education, because ours is quite a conservative profession. I hardly thought 30 years ago that I would end up being in the operating room, helping to do fetal surgery for twin problems, or running my "twin e-mail clinic." But these are the most rewarding things I do. It is quite thrilling, and I make new friends every day.

What lessons have you learned?

Twins and their families need information and have some difficulty getting it. Health care professionals are not necessarily well informed about twins. I have met many parents who have been misinformed about their twins. The most common mistake is telling parents that their twins must be DZ because there are two placentas. It is untrue

because one-third of MZ twins have two placentas. Every pair of like-sexed twins needs to know their zygosity for sure.

Why do you keep at it?

No choice. People keep arriving who need information or help. It is great to meet people who want to learn, who find the field interesting in its own right, as well as because of their own questions. It is also good to meet people who convert over to MZ and DZ so easily. My own knowledge increases each day.

What advice do you have?

1. Prenatally, get a really good consult with a fetal-maternal specialist and have a careful ultrasound to find out how many

placentas there are.

2. Get a lot of rest in pregnancy and stop work early. Your partner can do the laundry and shopping.
3. Before delivery, make it clear that you want the placenta(s) to get a pathology exam as this may tell you zygosity. ♥

Patricia Malmstrom, M.A., is director of Twin Services Consulting, co-author of *The Art of Parenting Twins*, (Ballantine Books, 1999) and mother of four adult children, including monozygotic twins. Order her book from www.twins-magazine.com or by calling (888) 55-TWINS.

Dr. Machin will return with his regular column next issue. He welcomes your questions about your multiples' zygosity. Please e-mail your questions to: geoffmachin@shaw.ca.

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Uncle Tom's nanny service

During the first few months of parenthood, most new moms turn to their mothers, sisters and aunts for help, especially when their husbands have to leave town. The whole experience usually becomes a special bonding time for women, who can pass along nuggets of wisdom to the sleepy, clueless new mom.

When our twins were 3 months old, my husband, Alex, left to attend a wedding on Cape Cod, and my mother was unavailable. I'm not close enough to my aunts to ask them for extensive child-care help, and I don't have any sisters. I was so relieved when my brother Tom offered to fly to Washington, D.C., to help me with a week-end of nonstop child care. Tom's children were both over the age of 4 at the time, so I considered him a veteran.

I knew plenty of mothers who handled solo parenting with two, three or even four children while their husbands were away, but I wasn't ready for that. Our kids were still eating about 10 times per day, and their apnea monitors—notorious for false alarms—were screeching throughout the night for no apparent reason, other than loose connections and shallow breathing. I had just survived my third case of mastitis and was trying to make the transition to formula.

Tom hadn't met the twins yet. He flew down from Maine just in time for their 10 p.m. feeding on Friday night. The elaborate nursing and medicine schedule charts on the refrigerator didn't seem to frighten him. He slept on the futon in the living room of our two-bedroom apartment, near the nursery, so he could not escape the crying. I told him I'd try to handle middle-of-the-night feedings unless I had double trouble—two babies screaming simultaneously. In that case, I'd need him to help me.

Julian had just started taking a new drug for his reflux problem, so we weren't sure whether this was going to make it eas-

ier for him to sleep through the night. Until that time, whenever he had a tough night, he sounded like the lead character in the movie *Slingblade*. Amplified by the audio

try to take a shower at some point during the night or read the mail or brush and floss our teeth or go to the bathroom. I asked Tom if he had any goals he wanted to share.



Illustration by Deborah Zemke

monitor in our bedroom, we heard him make loud, guttural groans. He also squirmed down from the elevated end of the crib to the opposite corner, occasionally loosening the connection of his apnea monitor wires, which triggered the machine's loud, piercing alarm. We assumed this squirming, which he'd been doing since his very first weeks at home, was his way of combatting tummy discomfort.

Tom didn't seem phased by the technical challenges of the apnea monitors or the spit-up and drool, but he wasn't thrilled about his first wake-up call at 3 a.m. Still, he managed to feed Adrienne while I fed Julian, and we all eventually got back to sleep. After the next 18 hours of round-the-clock diaper changes and feedings and diaper changes and feedings—around 9 p.m. the following night—the kids were in their cribs, and Tom and I had just finished eating dinner. I told him it was at about this time that Alex and I usually discussed our personal goals for the evening. We talked about ambitious plans such as our desire to

“Survival!” he exclaimed.

By Sunday, he had the routine down. I handled Adrienne's 5:30 a.m. feeding and Julian's 6:15 a.m. feeding and went back to sleep. My pumping intervals had gotten further apart since I'd started to decrease my breast milk supply and wean myself from the pump. By the time I woke up to pump at 11 a.m., Tom had fed both children and was marinating meat in the kitchen. He was about halfway through his preparation for barbecued spareribs and twice-baked potatoes, and the aroma was intoxicating. I was ready to sign this guy up for a regular baby-sitting gig.

A few days after Tom left, his wife said he had had a great time in Washington. She told me he couldn't stop talking about his visit but that he seemed especially concerned about their birth-control supplies when he got home. “Although he enjoyed meeting the twins,” she explained, “he didn't want to take any chances.” ♥

Lauren Kafka reflects on the first year with her twins, now 5, from her home in Bethesda, Md. She also is working on a book about that year.



Frances and Ben Trefny, and 9-month-old Erin (l.) and Kyle (r.)

NOMOTC support: more than meets the eye

In addition to the network of local clubs, the NOMOTC conducts research, produces publications, educates members and the public on the needs of multiples and offers specialized outreach.

Over the years NOMOTC has delved into a wide range of research topics from pregnancy to parenting—including potty training, breastfeeding, discipline, competitiveness and many more. In all, NOMOTC has completed more than 40 surveys.

Outreach programs target those who can't find support services in their town and those who have children with disabilities or illnesses. Bereavement, single parent and higher-order multiple support programs are among the specialized services.

a Father in a Mothers of Twins Club

By Ben Trefny

I recently went to my first “Mothers of Twins Club” meeting. It was arranged for new parents in a small room at the back of a baby store. About a dozen moms, a couple of nannies, and what appeared to be several hundred wailing kids sitting on the floor showed up. Actually, probably no more than 16 babies were present, but with that much squirming and crying it was hard to know for sure.

I, myself, am not a mother of twins. Rather, I am a mother's husband. When I visit the lactation consultant it is solely for the purpose of support. This genealogical

fact didn't hinder me from attending the meeting, though I should point out that—in name alone—I didn't feel completely relevant at the gathering.

Pretty much every major population center across the country has some semblance of a Mothers of Twins Club, part of a national organization known as the NOMOTC. The non-profit corporation was founded in 1960 to band together all the twin clubs around the country. It flourished over time because of the traditional roles of moms and dads in child rearing.

“A Father in a” continued on page 14

For More Information:

National Organization of Mothers of Twins Clubs, Inc.

www.nomotc.org, (877) 243-2276 or (615) 595-0936

Boot Camp for New Dads

www.bcnd.org (714) 838-9392

Books put out by the groups

Twins to Quints: The Complete Manual for Parents of Multiple Birth Children, published by Harpeth House, 2002. The culmination of an exhaustive seven-year project of the National Organization of Mothers of Twins Clubs, Inc., the book is available through the TWINS Magazine Bookshelf at www.TwinsMagazine.com, or by calling (888) 55-TWINS.

Hit the Ground Crawling, published by Dads Adventure, is a guidebook based on the experiences of the fathers from the Boot Camp for New Dads. Available Spring 2004 at www.newdads.com



Kyle (left), Ben and Erin (right) at the beach.

With a little help from my friends

Join your local mother, or parents, of multiples club. Although you may not consider yourself a “joiner,” members of local clubs have multiples and understand your situation best. Most clubs welcome expectant parents of multiples at meetings. Check out club listings on the TWINS Magazine Web site, www.TwinsMagazine.com, or visit the national NOMOTC Web site, www.nomotc.org, to search for the club nearest your home.

“A Father in a” continued from page 13

That is, mom took care of the kids at home while dad slipped out the rear to go to work, go golfing, or whatever. In the U.S., now, some 400 nationally recognized MOTC clubs represent over 23,000 individual parents of multiples.

“...I gathered the gumption to ask if babies can suck on pacifiers too much.”

Since it’s ostensibly for parents of either gender, the MOTC would perhaps more aptly be named the POMC—that is, the Parents of Multiples Club. And that’s exactly the title some clubs have taken on. To be more specific it could maybe be called the Mothers and Fathers of Multiples Club (MAFOMC) or possibly the FAMOMBO-MAOOMOMCAC (Fathers and Mothers of Multiple Birth or Multiple Adoption or Other Method of Multiple Children Attainment Club.) As a matter of fact, the NOMOTC considered changing its name a few years ago to make itself more gender equitable, but it was voted down.

“I certainly think it’s important to let dads know that they’re part of the equation and to include them in the club,” said NOMOTC president Mary Adcock. “But I can also see the people who have reservations about the name change in terms of name recognition. And there are some mothers who want to keep it a mothers club for various reasons.” And, according to Adcock, her husband, as one, is just fine with that.

Anyway, I found myself in that crowded room as a father at a Mothers of Twins Club meeting. Each woman (er, person) introduced herself and her children and then discussed what was working and what was problematic.

For example, this one from my wife: “My kids are doing great. They’re sleeping well and eating well and they really have only one extended fussy period—every evening while we’re trying to eat dinner. But my son likes to sleep in just one position, and that habit is molding his soft skull into the shape of a doorstep. Any thoughts?”

That prompted some murmur among

the mothers, a few suggestions to try propping the baby’s head in better positions when he sleeps, and the eventual consensus to ask our pediatrician for his advice.

As the meeting continued, I was able to see how MOTC is a helpful support group.

The topics bandied about were relevant for parents, including:

- ▶ Whether it’s better to mash babies’ food, to buy organic or to just feed the kids jars of Gerber’s
- ▶ What kind of stroller lasts longest, folds easiest and drives truest
- ▶ How to find a trustworthy (and affordable) nanny in San Francisco
- ▶ And how to convince the husband that mommy knows best.

Well, that last one, anyway, might not be the one point most discussed by fathers. But the meeting mediator, a mother of 4-year-old twins, handled it nicely by directing the topic to “parenting issues.” Still, I got the impression that day-to-day child-rearing still is considered the realm of moms.

My turn in the go-round came, and though I don’t love talking before groups of strangers, I gathered the gumption to ask if babies can suck on pacifiers too much.

I heard about a dozen responses, ranging from the condescending, “Babies suck,” to the knowledgeable, “In all the years I’ve been involved with this club, I’ve only known one baby who developed an overbite from sucking a pacifier,” to the pragmatic, “You’ve got two kids. What else are you going to do?”

So that was helpful, I guess.

As the meeting wore on, though, some of the moms seemed to get a bit frustrated with newbie questions. For example, when a mother of 3-week old twins said, “They just eat and sleep. I don’t know what to do with them,” a woman sitting next to me muttered under her breath, “They’re babies, lady, what do you expect!”

Overall, though, the women seemed to enjoy the get-together, even when their

Resources

Organizations for the support of special needs of multiples families

babies cried or tried to escape across the floor. Many a breast was pulled out to feed hungry kids, and this showed the distinct advantage mothers of twins have. For example, I was at a loss when my hungry daughter started crying loudly when she found no milky bosom on daddy's chest.

I know my wife will be back. She's deep into the MOTC chat rooms, e-mail advice and social gatherings that are all a part of a Mothers of Twins Club.

For me, I don't feel the need for a support group—yet. Perhaps that's a typical guy thing, and that's why there's no FOTC. That said, however, there are a few organizations for fathers, such as the non-profit Boot Camp for New Dads. The group, founded in 1990, has "trained" nearly 100,000 fathers in three-hour sessions dealing with everything from diaper duty to relationship management. There are other regional organizations as well, plus groups trying to get men involved in their kids' lives such as the National Center for Fathering.

But there's not much for fathers of twins. When asked if Boot Camp for New Dads has such a program, founder and head coach Greg Bishop laughs and replied, "Yes. We say, 'God help you!'"

I probably will return to the MOTC. There, I know I can get plenty of helpful advice on parenting my kids. Plus, maybe I'll be able to contribute some of my perspective as a man to the experience—such as when it is safe to buy twins their first golf clubs. ♡

Ben Trefny shops for golf clubs for his 21-month-old boy/girl twins in San Francisco, where he is a radio journalist and occasionally drops in on a mothers of twins club meeting.

Australian Multiple Birth Association AMBA, c/o The National Secretary, P.O. Box 105, Coogee, N.S.W. 2034, Australia; (02) 9802-6222. www.amba.org.au; secretary@amba.org.au

The Center for Study of Multiple Birth CSMB, Suite 464, 333 E. Superior St., Chicago, IL 60611; (312) 926-7498; www.multiplebirth.com

Center for Loss in Multiple Birth, Inc. CLIMB, P.O. Box 91377, Anchorage, AK 99509; (907) 222-5321; www.climb-support.org; climb@pobox.alaska.net

Childbirth and Postpartum Professionals Association CAPPA Referrals to certified child-birth educators, doulas and lactation consultants. CAPPA, P.O. Box 491448, Lawrenceville, GA 30049; (888) MY-CAPP; www.labdoula.com; info@CAPPANet

Home School Families of Twins 1226 Northlake Dr., Richardson, TX 75080; (972) 644-8965; <http://home.flash.net/~hsft>; hsft@juno.com

INFAC Breastfeeding support. Infant Feeding Action Coalition, 6 Trinity Square, Toronto, Canada M5G 1B1; (416) 595-9819; www.infactcanada.ca; info@infactcanada.ca

La Leche League International Breastfeeding support. P.O. Box 4079, Schaumburg, IL 60168; (847) 519-7730; www.lalecheleague.org; llli@llli.org

The Mom's Club For stay-at-home moms. 1464 Madera Rd. #N191, Simi Valley, CA 93065; (805) 526-2725; www.momsclub.org; momsclub@aol.com

Mothers of Supertwins International network for families of triplets or more. PO Box 306, East Islip, NY 11730; (631) 859-1110; www.mostonline.org; info@mostonline.org

Multiple Births Canada P.O. Box 432, Wasaga Beach, Ontario, L0L 2P0; (866) 228-8824; (705) 429-0901; www.multiplebirthscanada.org; office@multiplebirthscanada.org

National Organization of Mothers of Twins Clubs, Inc. P.O. Box 438, Thompson Station, TN 37179; (877) 540-2200; www.nomotc.org; info@nomotc.org

Nursing Mothers' Association of Australia P.O. Box 4000, Glen Iris, Victoria 3146. (03) 9885 0855; www.breastfeeding.asn.au; info@breastfeeding.asn.au

Sidelines For women with complicated pregnancies. P.O. Box 1808, Laguna Beach, CA 92652; (888) 447-4754; www.sidelines.org; sidelines@sidelines.org

The Multiple Births Foundation Level 4, Hammersmith House, Queen Charlotte's and Chelsea Hospital, DuCane Rd., London, W12 0HS; 44 (0208) 383 3519 (from the U.S.); www.multiplebirths.org.uk; info@multiplebirths.org.uk

The National Organization of Single Mothers Single Mothers, Box 68, Midland, NC 28107; (704) 888-KIDS or (704) 888-MOMS; www.singlemothers.org; solomother@aol.com

The Triplet Connection P.O. Box 99571, Stockton, CA 95209; (209) 474-0885, fax (209) 474-9243; www.tripletconnection.org; TC@tripletconnection.org

The Twins Foundation International research information center. P.O. Box 6043, Providence, RI 02940; (401) 751-8946; www.twinsfoundation.com; twins@twinsfoundation.com

The Twin to Twin Transfusion Syndrome Foundation Educational, emotional and financial support. 411 Longbeach Pkwy., Bay Village, OH 44140; (440) 899-8887; www.tttsfoundation.org; info@tttsfoundation.org

Twinless Twins International For twins who have lost a twin, and their families. P.O. Box 980481, Ypsilanti, MI 48198; (888) 205-8962; contact@twinlesstwins.org; www.twinlesstwins.org

Twin Services Consulting P.O. Box 10066, Berkeley, CA 94709; call the TWINLINE (510) 524-0863; www.twinservices.org; twinservices@juno.com

Twins and Multiple Birth Association TAMBA, 2 The Willows, Gardner Rd., Guildford, Surrey GU1 4PG, U.K.; call (0870) 770-3305 or fax (0151) 348-0765, www.tamba.org.uk; enquiries@tamba.org.uk

Mothers at Home 9493-C Silver King Court, Fairfax, VA 22031; (800) 783-4666; (703) 352-1072; www.familyandhome.org; fahn@familyandhome.org

It's high noon and the food war is raging. It's you vs. them.

How do you get your toddler twins to eat? Well, at least something other than dog biscuits, paper and dust bunnies?

Visit our message board at www.TwinsMagazine.com, open 24/7. More than 5,000 moms of multiples—plus a few dads—are waiting to answer your questions, or maybe just offer sympathy.



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How can I bond with my babies all at once?

You can indeed bond with two or more, but the process will be a little different from bonding with one single-born baby. Perhaps you won't fall equally in love with each of the babies on day one. More than likely, your first bond is with the group. In the early foggy days you put one foot in front of the other to meet their needs. As one mother recalled, "Our life was a marathon of feeding, changing, burping, walking the floor, then starting all over again. Some days I couldn't remember which baby had been fed and which one still needed his bath." Gradually, through the haze of your daily routines, you begin to pick up clues that each baby gives you about who they are and what they need. As you respond to each of their individual needs, you and your babies learn more about each other and your connections will deepen.

What if my heart is stretched between the baby in the nursery at home and the one in the hospital?

It's true that newborns require consistent loving care, but they won't mind if it does not always come from you. Arrange for the best substitute care you can find. You have plenty of time to get better acquainted when everyone comes home from the hospital.



What about their bond with each other?

Your babies first bonded with each other in the womb. Research has produced evidence that newborn twins are a comfort to each other. The presence of

Nicholas and Michael, 1 year, with mom Lajoy.



BONDING with more than one

by Patricia Malmstrom, M.A.



Jaxson and Jaydon, 2½ weeks with mom, Shari.

one can even improve the other's health. Whether your babies come home together or separately, the relationship between them shapes their lives right from the start. They are individuals who are born as members of a team. They will grow up with a strong relationship to the other members of their team. Their relationship bond brings with it life-enhancing possibilities seldom enjoyed by single-born children. Even infants light up with joy at the sight of

each other. Their daily companionship during early childhood lays the foundation for life-long camaraderie. Even pairs who have a feisty relationship come to each other's defense when another child tries to take away a toy or a stranger is critical of one.

How do they bond with parents and family?

Their close connection also challenges common notions regarding the individuation process. Since they come into the world in a relationship with each other, they experience and relate to you and the rest of their family both as individuals and as members of their team. They



share many early experiences as a team; however, they each have their own perception of those experiences. You discover early on that they are

not the "two little bookends" one mother imagined before her girls were born.

How long does it take to bond with twins?

Bonding is not a single event; it is a process. And you can take heart from the adage that "All good things take time." Day by day, you experience the dynamics of their different personalities and your babies teach you about themselves by the ways in which they respond to you and their environment. One may be content to snuggle and sleep for long periods. Another may be wide-eyed and curious, following everything that goes on in the household. You may be surprised and amazed to find that although you are the one providing their nurture and care, they are the ones leading the way. ♥

Patricia Malmstrom, Director of Twin Services Consulting, is the co-author of *The Art of Parenting Twins* (Ballantine Books, 1999) and the mother of four adult children, including monozygotic "identical" twins.

Early treatment can prevent vision loss

A new study gives eye doctors a precise way to identify premature babies who are at the highest risk of abnormal blood vessel growth in the retina and subsequent blindness. The computerized risk assessment tool should lead to treatment of retinopathy of prematurity at its earliest stages. Before this study, doctors did not have a precise clinical model to help predict which infants would ultimately develop vision loss from ROP, so treatment often was deferred until the disease reached the treatment threshold, at which point there still was a 25% chance of retinal detachment. Early treatment can reduce the likelihood of poor vision from 19.5% to 14.5% at about 1 year of age, and of structural damage from 15.6% to 9.1%.

Traveling cardiothoracic surgeons

A pediatric cardiothoracic team from the Children's Hospital of Philadelphia—known as the Duct Busters—now travel to regional hospitals to repair life-threatening heart defects called patent ductus arteriosus (PDA), in which a major blood vessel fails to close after birth. Most common in premature newborns, the open duct causes abnormal circulation and can lead to heart failure and impaired lung function. Medication sometimes closes the duct, but surgery with small titanium clips is required in other cases. The service eliminates transport risks and reduces stress for families.

Nitric oxide effective and safe

An inhaled treatment for critically ill newborns is less invasive, more effective and costs less than the traditional treatment to treat a potentially fatal condition called hypoxic respiratory failure (HRF). HRF develops in babies whose lungs cannot deliver enough oxygen to their bodies, causing their bodies to become bluish and endangering their lives. Until now, the only effective treatment for HRF-newborns who did not respond to standard care was an invasive surgical procedure and putting the baby on a heart-lung machine to oxygenate the blood. Nitric oxide, by contrast, is an inhaled gas with few potential complications.

New method to test swallowing

Researchers have developed a new way to test the nerve-muscle function using micromanometric catheters that record pressures generated by muscles in the bowel wall. "Feeding problems are a big issue in the neonatal intensive care unit (NICU)," said Sudarshan Jadcherla, M.D., attending neonatologist, associate professor of pediatrics department of neonatology at Columbus Children's Hospital. "The trouble is, we don't know why they're not eating—it could be related to breathing, sucking, swallowing, coordination or other reasons. Gastroesophageal reflux (GER) is also another common problem among infants who are still learning to swallow." Understanding the way infants' swallowing and esophageal functions work and develop is the first step in identifying the reasons these infants aren't eating and subsequently treating the real problem so it doesn't become a long-term issue.

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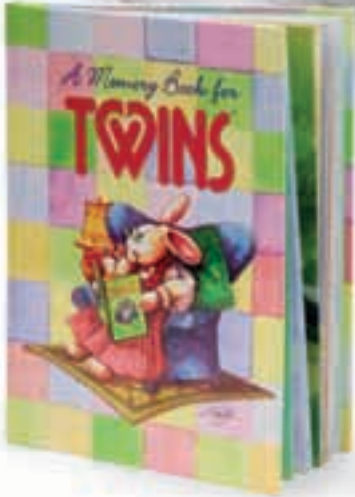
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Brad and Jake, 3 days old


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sample of 2-page spread



Dying to tie on a great birthday bash?

by Beth Tysl

If the thought of organizing a birthday party overwhelms you, we've got help. Visit www.TwinsMagazine.com, scroll down the home page and click on the link "Birthday Party Help." TWINS Magazine message board member, Melissa Charette, a highly organized former executive assistant for a company president and home manager for her 1½-year-old twin girls and husband in Taunton, Mass., shares her complete list online.

If you are dying to find a creative birthday party idea, a tie-dye party may be just the answer. With supervision, children as young as 3 or 4 can tie-dye a T-shirt.

It is important to stay organized when doing this theme. About two months before my twins' fifth birthday, I rented a picnic shelter at a local park. I chose a date in mid-September (about a month before their actual birthday) in hopes that the weather

still would be warm. Thirty children were on the guest list, including eight sets of twins.

Based on our RSVP count, I purchased tie-dye kits at a fabric/craft store and bought packs of white undershirts for our guests. On the invitation, we asked parents to bring their own T-shirt if they wanted to join in the fun.

We brought several 5-gallon buckets to the park for soaking the T-shirts in water and in the soda ash solution. We also used the buckets to collect excess dye that ran off the T-shirts. On a large poster board, I listed step-by-step instructions (simple illustrations are helpful). I also copied various tie-dye techniques on another poster board.

The dye was mixed in individual squeeze bottles, which made application easy. Be sure to have an apron and plastic gloves on hand for the person who "dyes."

Party sites

- ▶ www.childfun.com
- ▶ www.amazingmoms.com
- ▶ www.birthdayexpress.com
- ▶ www.party411.com
- ▶ <http://bhg.com> (our favorite)

With the help of the parents and older kids, the kids "tied" their T-shirts with rubber bands. After soaking the tied shirts in soda ash,

the party guests showed us where they wanted the colors, and my husband and I applied the dyes.

Finally, I attached washing instructions to the plastic bags in which the guests took their wet shirts home—dye must remain in the fabric for 24 hours.

From start to finish, the party took about 2½ hours and we completed about 45 tie dye shirts. Setup and cleanup took about 30 minutes. All things considered, things went smoothly.

The best thing about this party is that the T-shirts make terrific favors. The following week, we so enjoyed the phone calls from guests telling us how their shirts turned out, we decided to get together for a photo. This party was well worth the effort. ♥

Beth Tysl, a freelance writer and photographer, lives in Twinsburg, Ohio, with her 5-year-old boy/girl twins, Gabrielle and Gavin.

Photo above: top row: Janie (singleton sister of Karen and Karlie); Ben and Alex; Christopher (singleton brother of Ben and Alex); Zachary and Alex. Center row: Corrinne and Jocelyn; Gabrielle and Gavin. Front row: Karen and Karlie; Michaela and Rick. Photo by Beth Tysl.

More birthday ideas for twins under 5:

- ▶ Karate party/dance party. Check local karate or dance studios for availability.
- ▶ Swim or sports party. Community pools and fitness centers may offer this.
- ▶ Indoor playground party. Some playground equipment retailers rent out their showrooms for parties.
- ▶ Royal party/pirate party. Use your creativity to come up with homemade costumes and props. Our twin friends held their pirate party at the beach area in their lake community, and the kids dug for buried treasure.
- ▶ Roller skating party. Some roller rinks carry special “toddler skates.”
- ▶ Bowling party. You won’t strike out with this standby that’s always a hit.
- ▶ Zoo party. An animal theme at your local zoo is great for the very young who enjoy the petting corrals.
- ▶ Game room party. Local indoor game rooms usually offer packages.



before



after!

Kyle and Connor really dig into their cake at their first birthday party!

- ▶ Inflatable bouncers. Rent squares or even castle-shaped bouncers from companies that also provide a supervisor.
- ▶ Magician/clown/balloons. Ask friends for referrals or check the Yellow Pages.
- ▶ At-home themes: picnic, game day, circus, dinosaur, bugs and worms, water party or airplanes. Also, for boy/girl twins: Raggedy Ann and Andy, king and queen, ladybugs and spiders parties. And, for the first year: rubber duckies, teddy bears, and stars and moon.

Ten tips for happy birthday parties for multiples

KISS: Keep it simple, sister. Resist the competitive urge to keep up with your neighbors, or bend to every family member’s wish. It is not necessary to serve a meal or hire the entire Sesame Street cast. More is not necessarily better, especially for the first birthday celebration.

Plan. Think the event through and plan for contingencies. With two children, chaos and confusion are part of the party. You, your twins and the guests will enjoy a party that is simple and well-planned, with your twins’ interests in mind.

Two cakes. Decorate each cake as each twin wishes. Some parents find that cupcakes, or cake baked in ice cream cones simplifies serving time.

Separate birth dates. If your twins have birthdays on different dates, celebrate on the weekend or a neutral third day. This is not an issue for the first few years. Some parents double the work and expense by throwing two parties, one on each birth date.

Themes. Choose an age-appropriate theme that expresses your twins’ current fascination. When twins are 1 or 2, they won’t care or remember. At that age, the theme is more important to you.

Photographs. Ask a friend or family member to take over snapshot duties. Otherwise, years later when you look back you’ll see pictures of your babies with friends and family members.

Short and sweet. Limit the party to two hours, no more. Also set the time of the party for your twins’ best time of day—not when grandmother can come or when a clown can show up. Tired twins will not enjoy a party. Keep things moving.

Gifts. Plan goodie bags for the guests. These help to distract any little guest who may want to open gifts. Before play time is the best time to open gifts. (And by the way, when your twins are invited to a party, each one should take a gift for the birthday girl or boy. You may have to buy smaller gifts, but it affirms your twin’s individuality and helps others to think of them as individuals. Plus, you expect all guests to bring each of your twins a gift.)

The First Year. Twins are not aware of what all the fuss is about at their first birthday party. It’s really a party for you. If you had preemies, it is a landmark occasion to celebrate the health of your twins. Invite your friends and family, take some great pictures to remember the day and don’t worry if your twins need to leave the party early for a nap.

The Second Year. Twins still are not really able to comprehend all the birthday hullabaloo. (See tip No. 1.) Choose a theme they will like, organize the party like a play group and forget structured games. Be sure you have plenty of parents attending, too.

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sleep...zzz



Sweet dreams

Do you wonder why Mr. Sandman seems to skip right over your house? Instead of sweet dreams, is nighttime a nightmare? Does sleep deprivation define your state of mind, day after long day? In our special sleep section, sleep expert Elizabeth Pantley—mother, parent educator and author of *The No-Cry Sleep Solution and Gentle Baby Care*—has some gentle solutions for you. Her hands-on experience lends practicality to her advice on getting your babies to sleep through the night—without having them cry it out. Lactation consultant, nurse and mother of 6-year-old twins Rosemary D'Errico offers her advice and experience. And, Kari Loth, mother of 3-year-old twin girls, sees the humor in the transition from cribs to “big girl” beds.

The No-Cry Sleep Solution

excerpted from the book by Elizabeth Pantley

Newborn babies sleep when they are tired

Babies younger than 4 months old have very different sleep needs from older babies. During the early months of your babies' lives, they sleep when they are tired, it's really that simple. You can do very little to force a new baby to sleep when he doesn't want to sleep, and conversely, you can do little to wake him up when he is sleeping soundly.

A very important point to understand about newborn babies is that they have very, very tiny tummies. New babies grow rapidly, their diet is liquid and it digests quickly. Formula digests quickly and breast milk digests even more rapidly. Although it would be nice to lay your little bundle down at a predetermined bedtime and not hear a peep from him until morning, even the most naïve among us know that this is not a realistic goal for a tiny baby. Newborns need to be fed every two to four hours—and sometimes more.

During those early months, your babies will have tremendous growth spurts that affect not only daytime but also nighttime feeding, sometimes pushing that two- to four-hour schedule to a one- to two-hour schedule around the clock.

When will they sleep “through the night?”

You have probably heard that babies should start “sleeping through the night” at about two to four months of age. What you must understand is that, for a new baby, a five-hour stretch is a full night. Many (but nowhere near all) babies at this age can sleep uninterrupted from midnight to 5 a.m. (Not that they always do.) A far cry from what you may have thought “sleeping through the night” meant! Also, some of these sleep-through-the-nighters will suddenly begin waking more frequently, and it's often a full year or even two until your little one will settle into a mature, all-night, every night sleep pattern.

It is very natural for a newborn to fall asleep while sucking at the breast, a bottle

or a pacifier. When a baby always falls asleep this way, he learns to associate sucking with falling asleep; over time, he cannot fall asleep any other way. I have heard a number of sleep experts refer to this as a “negative sleep association.” I certainly disagree, and so would my baby. It is probably the most positive, natural, pleasant sleep association a baby can have. A large percentage of parents who are struggling with older babies who cannot fall asleep or stay asleep are fighting this natural and powerful sucking-to-sleep association.

Therefore, if you want your babies to be able to fall asleep without your help, it is essential that you sometimes let your newborn suck until he is sleepy, but not totally asleep. When you can, remove the breast, bottle or pacifier from his mouth and let him finish falling asleep without something in his mouth. When you do this, your baby may resist, root and fuss to regain the nipple. It's perfectly OK to give him back the breast, bottle or pacifier and start over a few minutes later. If you do this often enough, he will eventually learn how to fall asleep without sucking.

They will wake for night feedings... frequently

Many pediatricians recommend that parents shouldn't let a newborn sleep longer than three or four hours without feeding, and the vast majority of babies wake far more frequently than that. No matter what, your baby will wake up during the night. The key is to learn when you should pick him up for a night feeding and when you can let him go back to sleep on his own.

This is a time when you need to focus your instincts and intuition. This is when you should try very hard to learn how to read your babies' signals. Here's a tip that is critically important for you to know. Babies make many sleeping sounds, from grunts to whimpers to outright cries, and these noises don't always signal awakening. These are what I call sleeping noises, and

“Sweet dreams” continued on page 22

Ask Elizabeth

Nap time or play time?

I am having a hard time getting my 2-year-old girls to go down for a nap. They spend most of the time talking or bouncing in their cribs. I've tried separating them at naptime but all they do is scream and cry. I also play soft music and rub each of their backs for about 10 minutes. Any suggestions? I am at my wits end!

Twins do seem to incite each other to undesirable behavior, to a greater extent than any parent of singletons will ever realize. The good news is that they can have a dramatic effect on desirable behavior as well! The key to successful naptime is to create a very specific routine that occurs at exactly the same time nearly every day.

Children thrive on a nap routine, and will come to predict naptime and welcome it if the routine is pleasant and consistent. Try to follow these naptime guidelines:

- *Have plenty of activity in the morning so that your girls are tired at naptime.*
- *Provide a light, healthy lunch or snack prior to beginning your naptime routine. Avoid giving them any chocolate, soda or sugar right before naptime.*
- *Plan to spend 20 minutes or so tucking them in, as a rushed process will leave them wide-awake and unwilling to sleep.*
- *Once it's time to begin your pre-nap routine make sure the lights are dimmed and the mood is peaceful.*
- *Include restful activities prior to sleep, such as reading a book, listening to soft music or giving them back rubs.*
- *Sit in a chair near the door until they settle down. If they begin their playtime bouncing simply help them lay down, rub their backs for a minute and shhh them until they become quiet.*

If you can structure your days around this routine for the next few weeks you'll find that naptime becomes a peaceful, consistent part of your day. And as any parent of twins knows, naps are just as important for parents as they are for the children who sleep.

“Ask Elizabeth” continued on page 23

"Sweet dreams" continued from page 21

your baby is nearly or even totally asleep during these episodes. I remember when my first baby, Angela, was a newborn. Her cry awakened me many times, yet she was asleep in my arms before I even made it from cradle to rocking chair. She was making sleeping noises. In my desire to respond to my baby's every cry, I actually taught her to wake up more often!

You need to listen and watch your babies carefully. Learn to differentiate between these sleeping sounds and awake and hungry sounds. If he is awake and hungry, you'll want to feed him as quickly as possible. If you respond immediately when he is

Begin by having your babies take their daytime naps in a lit room where they can hear the noises of the day, perhaps bassinets or cradles located in the main area of your home. Make nighttime sleep dark and quiet. You can also help your babies differentiate day naps from night sleep by using a nightly bath and a change into sleeping pajamas to signal the difference between the two.

Learn your babies' sleepy signals

One way to encourage good sleep is to get familiar with your babies' sleepy signals and put them down to sleep as soon as they seem tired. A baby cannot put himself to sleep,

bed later in the evening. They think, "If he's really tired he'll sleep better, right?" Wrong! This often backfires because a baby becomes overtired, and chronically sleep-deprived.

In the majority of cases, a baby's biological clock is preset for an early bedtime. When parents work with that time, a baby falls asleep more easily and stays asleep more peacefully. Most babies are primed to go to sleep for the night as early as 6:30 or 7 p.m. I often hear about how babies and toddlers have a "melt down" period at the end of the day; they get fussy, whiny and out of sorts. I suspect that it's simply a sign of over-tired children longing for sleep.

For babies, early to bed does not mean early to rise! Most babies sleep longer with an earlier bedtime. Keeping your little one up too late backfires, and more often, a late night is the one followed by that early morning awakening.

If you are a working parent, and your evening with your little one begins at 6:30 or 7 p.m., you may find yourself torn between keeping your baby up for some playtime and getting him right to bed. When your babies go to sleep earlier, and sleep better, they awaken in a pleasant mood, eager to play. Because you have gotten a good night's sleep, you can consider getting up earlier in the morning and saving some time before work to play with your babies. Later, when they are consistently sleeping all night, every night, you can move bedtime a little later and judge whether the difference affects your babies' sleep.

Regular naps improve nighttime sleep

According to sleep research, and motherly experience, the length and the quality of naps affect nighttime sleep. (And, conversely, nighttime sleep affects naps.)

Timing of naps is important. A nap too late in the day will negatively affect nighttime sleep. Certain times of the day are better for napping because they suit your baby's biological clock; these optimum periods balance sleep and wake time to affect nighttime sleep in the most positive way.

Naps should happen immediately when your baby shows signs of tiredness (above).



Larissa Sage and Samuel Sky, 6 weeks

In the majority of cases, a baby's biological clock is preset for an early bedtime.

hungry, he will most likely go back to sleep quickly. But, if you let his cry escalate, he will wake himself up totally, and it will be harder and take longer for him to go back to sleep. Not to mention that you—and possibly your other baby—will then be wide awake, too!

Help your baby distinguish day from night

A newborn baby sleeps about 16 to 18 hours per day, and this sleep is distributed evenly over six to seven brief sleep periods. You can help your baby distinguish between nighttime sleep and daytime sleep, and thus help him sleep longer periods at night.

nor can he understand his own sleepy signs. Yet a baby who is encouraged to stay awake when his body is craving sleep is typically an unhappy baby. Over time, this pattern develops into sleep deprivation, which further complicates your baby's developing sleep maturity. Learn to read your babies' sleepy signs—such as quieting down, losing interest in people and toys, and fussing—and put them to bed when that window of opportunity presents itself.

Early bedtime means better baby sleep

In their efforts to encourage their baby to sleep better, many parents put their baby to

Travis and Trey, 2 months



Babies differ in their napping needs, but here's a general guide that applies to most babies:

Age	Number of naps	Hours of naptime
4 months	3	4-6
6 months	2	3-4
9 months	2	2½-4
12 months	1-2	2-3
2 years	1	1-2
3 years	1	1-1½

If you wait too long, he becomes overtired, “wired up” and unable to sleep.

Once you are familiar with your baby’s nap needs you can plan a nap routine to start the wind-down process. If consistent naps are new to you, look more for your baby’s signs of tiredness and scrimp on the routine until you settle into a predictable pattern. In other words, don’t begin a lengthy pre-nap routine if your baby is clearly ready to sleep!

You have probably experienced this scenario: Your babies look tired and you think, “Time for a nap.” So, you wash their hands and face, change their diapers, answer a phone call, put out the dog and head for their bed, only to find that they’re suddenly wide awake and anxious to play!

What happened? He has moved through his window of tiredness and gotten that “second wind” that buys him another hour or two of alert time before he re-enters his tired state. This often can happen later in the day. Suddenly, your baby is (finally!) ready for a nap at dinnertime, and the plot thickens: Do you put him down for a late nap and thus extend bedtime, or keep him

awake and deal with a tired, fussy baby? Rather than face this ordeal, respond earlier to his signs of fatigue and get him in for his nap right at that time.

Once you have watched your babies carefully for a week or so, you should be able to create a nap schedule that works with their daily periods of alertness and tiredness, thus making your nap schedule easy to adhere to. Once you’ve established a nap schedule for your babies, it is helpful if you create a simple but specific nap routine. Better naps mean better nighttime sleep.

Should I let my baby cry it out?

Does it take forever for your babies to fall asleep? Do they only fall asleep if you breastfeed, give a bottle or pacifier, rock, carry, swing, take a ride in the car or perform other elaborate rituals? Do your babies wake up frequently throughout the night? Are your sleep issues further complicated because your babies won’t nap easily, or take very short naps?

As your sleep issues cast lengthening shadows over your life, you may begin to live purely for the moment. Your sleep-deprived, foggy brain may focus so intently on sleep that you can’t think beyond the next few hours of rest. You may have one or many people telling you that you should just let your babies cry to sleep. You are probably frustrated and confused. What you lack is perspective. To gain that perspective, ask yourself these questions:

Where will I be five years from now? How will I look back on this time? Will I be proud of how I handled my baby’s sleep routines, or will I regret my actions? How will the things I do with my baby today affect the person he will become in the future? The key is to evaluate whether your babies’ sleep schedule is a problem in your eyes, or just in those of the people around you. ♥

Excerpted with permission by McGraw-Hill/Contemporary Publishing from *The No-Cry Sleep Solution: Gentle Ways to Help Your Baby Sleep Through the Night* by Elizabeth Pantley, copyright 2002. Order from TWINS Magazine Bookshelf; online at www.TwinsMagazine.com or call (888) 55-TWINS

“Ask Elizabeth” continued from page 21

They won’t go to sleep

My 13-month-old identical twin girls were good babies, but now they won’t sleep at naps and bedtime. We have tired everything—let them cry, put their beds together to make one big bed, played the radio and played a sound machine—but nothing works. There is only one way I can get them to sleep: I have to lie down with them in a big bed. Help!

Your twin girls are still good babies, they are just sleepless good babies! This is a challenging time for parents—having two toddlers with boundless energy can wear even the most experienced parent down to a frazzle. What often happens is that we parents become unfocused and lose the rhythm that helped synchronize days and nights when our babies were younger. The key is to develop and follow a specific pre-sleep routine that includes some important aspects:

First, examine your own needs and desires apart from what the rest of the world thinks or wants. Some parents, for example, are perfectly happy to lie down with their little ones until they fall asleep—and if you are one of these parents then keep doing what works. Those few minutes of peaceful cuddling may be just what you all need at the end of the day.

However, if this isn't the way you'd like your days to end, then begin to incorporate some of these tips into a new routine:

- Try to stick to the same bedtime seven days a week.
- Aim for an earlier bedtime rather than later.
- Make sure your child is getting enough healthy food to eat during the day.
- Develop a bedtime routine for the hour before bedtime that is quiet and peaceful.
- Encourage regular daily naps up until age 3 or 4.
- Keep your child's bedroom dark and quiet.
- Avoid chocolate, soda pop and sugary snacks the few hours before bedtime.
- Have your child get daily exercise.
- Make sure your child's bed, pillow and blankets are comfortable.
- Relax and be peaceful. There are no “rules” that must be followed. Do what works best for your family.

A sleep primer for parents of pairs

by Rosemary D'Errico, RNBC, IBCLC

Bringing home multiples is stressful enough before factoring in sleep issues. There are as many opinions about getting your young babies to sleep on a survivable routine as there are parents. Remember that you are the expert on your family; what works best for you is what is best.

Give up the idea that newborns can be trained to do anything. They are not ready physically, physiologically or developmentally to sleep for long periods of time. In fact, newborns must eat at least eight times a day if breastfeeding, or at least six times a day if bottle feeding, in order to maintain adequate hydration and nutrition. Though they may sleep 16 to 20 hours a day, their cycles are shorter and less deep than those of adults. Couple these factors with a couple of babies and you've got parents desperate for a few z's.

New moms of multiples can, however, work around their multiples' needs and meet some of their own. Right from the start, try to feed the babies at the same time. Breastfeeding mothers can accomplish this with a little practice and a full-size nursing pillow. Bottle-feeding mothers can enlist family members or use a nursing pillow to support both babies while feeding (more comfortable than leaning over to feed them in infant seats). Waking both babies for each feeding helps synchronize their feedings.

Where your babies sleep will affect your sleep. Though having two or more new babies complicates things, some families find that the family bed concept helps everyone sleep better; babies are able to feed easily without much fuss or parental stumbling around in the night. Co-sleeping is practiced throughout the world. For safety, be sure that the babies are not on pillows, down comforters or fluffy bedding. Babies should not sleep on waterbeds, feather beds or with parents who smoke or have consumed alcohol or sedating drugs.

Co-sleeping nests for in the bed or that attach to the bed are convenient, but check weight restrictions. Traditional bassinets or cribs in your room can also decrease disruption during the night. If you prefer having your multiples sleep in their own room, use

an infant monitor in order to hear their cries (though even the most exhausted moms tend to hear their babies' slightest squeaks!).

Once your multiples are about 3 months old, they are developmentally ready for whatever "sleep training" technique or philosophy appeals to you. The Ferber method, gradually increasing, supported separation (and the crying that usually accompanies it) works for some families. Challenges for mothers of multiples stem from differences in their babies' tolerance and crying.

Less familiar are sleep routines that attempt to support children's individual sleep habits and needs. Though on the surface it might seem daunting to try this with multiples, the techniques are very effective. Elizabeth Pantley's book, *The No-Cry Solution: Gentle Ways to Help Your Baby Sleep Through the Night* contains specific and gentle help with this approach. (See article, page 21.) William Sears, the parenting guru, suggests that gentler methods can be supportive of an infant's developmental needs for stability and trust in their parents and environment.

Whatever method you choose, remember that eventually all of you will be sleeping like babies! ♥

Rosemary d'Errico, a nurse, lactation consultant and mother of 5-year-old twins, freelances from her home in Thiells, New York.

Bedtime reading

- *Solve Your Child's Sleep Problems*, Richard Ferber, (1986) Fireside Publishing
- *Sleeping Through the Night: How Infants, Toddlers and Their Parents Can Get a Good Night's Sleep*, Jodi A. Mindel, (1997) HarperResource
- *The No-Cry Solution: Gentle Ways to Help Your Baby Sleep Through the Night*, Elizabeth Pantley, (2002) McGraw-Hill
- *Nighttime Parenting and The Fussy Baby*, William Sears, M.D., (1999) Plume
- *The Family Bed*, Tine Thevenin, (1987) Perigee

—Rosemary D'Errico

You are getting sleepy... very, very sleepy

You don't have to hypnotize your twins to get them to sleep. Here are a few suggestions to help them prepare for sleep:

- **Slow the pace.** Quiet time at least half an hour before bedtime will help your twins settle down.
- **Outline the bedtime routine** with a written chart—pictures or words.
- **Bend and stretch**, yoga-style, to relax muscles.
- **Paint a mind picture.** With eyes closed, help them visualize a calm scene.
- **Stuffed animals or loveys** can help them feel more secure.
- **Tune in.** Music or nature sounds CDs help soothe the soul.
- **Be a masseuse.** Back rubs are even more relaxing with lavender oil.
- **Reading is fundamental.** Some children, even pre-readers, find taking books to bed relaxing.
- **Let there be light.** A flashlight or night-light can chase the shadows away.
- **Let them talk.** As long as they remain calm and in bed, conversation can help multiples ready themselves for sleep.
- **Cuddle up.** Your heartbeat can be the ultimate sleeping aid.

—Rosmary D'Errico

Our Adventures with Big Girl Beds

By Kari Loth

Some like to call the move from cribs to big beds a right of passage; others, the unavoidable jump into being “big girls.” For me, I like to call it the loss of a mother’s sanity.

From the time they started climbing out of their cribs, I tried to avoid the move. First, I threatened. That didn’t work, so I resorted to crib tents. (You know—the ones that carry the warning: “Not to keep a child in, only to keep cats out.” I figure that warning is for moms of singletons, or at least children who obey their mommies.) Anyway, the tents worked for a while until Courtney figured out how to unzip them. So, I stuffed the zipper way down. Ha! I’m so clever! Well, Chrissa just reached her little hand over to Courtney’s crib, pulled out the zipper and then Courtney did the rest. Hmmm... a losing battle. Time for beds.

Mark and I tried to make “big beds” really exciting for the girls. And, believe me, the next few months were very exciting—for me.

When we moved our Chrissa and Courtney into their new beds they were 2½ years old—a reasonable time to move kids into beds, or so I thought. Here’s how it went.

Kari Loth, a freelance writer who lives in McKinney, Texas, tries to catch a few winks when she’s not chasing her twins and their big brother.

Day One

Chrissa and Courtney get out of their beds and play for three hours. Fine, I knew this would not happen overnight. I can deal with grumpy toddlers for one afternoon then put them to bed early.

Day Two

My little escape artists leave their room and proceed to destroy their big brother’s room. They smear soap all over Christian’s bed and floor. Words cannot describe the mess, but you get the picture. Time to put a lock on their door.

Day Three

They are forced to stay in their room. Even if they don’t nap, at least they are getting “quiet time,” right? Wrong. They pull every article of clothing out of their drawers and off the hangers in their closet and throw them all over the room. You couldn’t even walk in the battle zone. Time to move the drawers into the closet and put a lock on that door.

Day Four

Today they sleep, probably from sheer exhaustion. I think we are on our way! Think again, mom.

Day Five

The twins share a Jack-and-Jill bathroom with their brother. For obvious reasons we lock the door that opens into the bathtub and toilet area, but the sink is still accessible from their room. So, we put a baby gate there. Do you know what twins say to baby gates? “Ha! One of you and two of us!” They push down the gate and open the cabinets. (Yes, the cabinets are “babyproofed,” but not twinproofed, especially for twins who have a dexterous big brother who teaches them how to open these things.) They pull out foam soap, shampoo, toothpaste, detangle hair spray and two bottles of Robitussin (no, these do not have babyproof caps) and proceed to dump their contents all over the floors, walls and mirrors. That was fun to clean up, and I got to call my old buddies at Poison Control, just in case they ingested anything. So, we take everything—every last thing—out of the bathroom and re-install the baby gate.

Day Six

Chrissa and Courtney knock down the baby gate again, but this time they go for the sink. They stuff animals, blankets and clothes in the sink and turn on the water. Their own swimming pool! That night, Mark cuts off the water under their sink.

Three months later

There is nothing else to destroy. They have only toys and beds. They do manage to strip their sheets off the beds many days, but I can handle that. Almost every day they have a party in their room. In fact, right now, as I write this, I can hear them up there giggling and occasionally I hear a loud “thump.” Should I investigate? Nah... They are just having “quiet time,” remember? ♡

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Two for the road

The 2004 Guide to Car Seats and Car Seat Installation

by Trina Lambert

You want to get ready so you can go, go, go. But in order to do that, you need to own car seats that work well for you. Even sleep-deprived, you need to be able to install car seats—and your children in them—correctly every single time. But how do you do that?

First, you need to make certain the seats fit your vehicles—before you buy. You can avoid hassles if you ask to try the seats in your car(s) before paying. Most stores will accommodate your request. For convertibles, forward facing and booster seats, bring the kids because you need to make certain the seats fit them. And finally, make sure the seats are easy to use.

For starters, check our charts with the price ranges, weight and height limits, dimensions and harness formats given to us by the manufacturers. We recommend that if your vehicle space is limited, as it is for many families of multiples, take a tape measure to verify that any seat measurements are as reported. We did a spot check of three infant seats, three convertible seats and two booster seats to see how well the reality conformed to the listings. Most were accurate in width and depth, although we found the heights varied as much as an inch or two. Seats are getting bigger to accommodate older children. While the kids are more comfortable, it complicates an already difficult task for parents with two, three or more children in car seats.

Measure the seats with the accessories and options you will use. Moving the seat to the reclining position added as much as five inches to the depth of the seats we measured. Check the depth listing for infant seats: It may not include the handle in the down position. The handle, depending on its style, can add almost four inches. Two cupholders can add about five inches to the width, and one holder about half that.

Install the seats in your vehicles according to instruction guides for both the seats and the automobile. The seats should not move side-to-side

Infant Seats						
Brand Name	Price	Harness Type	Dimensions height x width x depth	Rear-Facing Weight Limits	Rear-Facing Height Limits	Double Travel System
Baby Trend						
Adjustable Back Latch-Loc*	90	5 pt.	22" x 16.25" x 27"	5-22 lbs.	Up to 28.5"	Yes
Latch-Loc	80	5 pt.	22" x 16.25" x 27"	5-20 lbs.	Up to 26"	Yes
Britax						
Companion	199	5 pt.	17.5" x 18.5" x 28"	4-22 lbs.	Up to 30"	No
Car Seat Specialty						
Nania Baby One	36-40	5 pt.	11" x 17.5" x 25.75"	Up to 29 lbs.	Up to 29"	No
Nania Baby Ride	60-70	5 pt.	15" x 17.5" x 28"	Up to 29 lbs.	Up to 29"	No
Combi						
Tyro™ Model 8000	160	5 pt.	29" x 15" x 24"	Birth-22 lbs.	Up to 29"	No
Cosco						
Arriva™	40	3 pt.	22" x 18" x 26.5"	5-22 lbs.	19"-29"	No
Eddie Bauer						
Infant Car Seat	90	5 pt.	22" x 17" x 28"	5-22 lbs.	19"-29"	Yes
Safety 1st						
Designer 22	80	5 pt.	22" x 17" x 28"	5-22 lbs.	19"-29"	Yes
Evenflo						
Discovery™	49	3 pt.	16" x 18" x 28"	5-20 lbs.	**	No
PortAbout 3™	59	3 pt.	16" x 18" x 28"	5-22 lbs.	**	Yes
PortAbout 5™	69-89	5 pt.	16" x 18" x 28"	5-22 lbs.	**	Yes
Graco						
SnugRide®	60	3 pt.	22" x 17.25" x 26"	Birth-20 lbs.	< 26"	Yes
SnugRide®	70-120	5 pt.	22" x 17.25" x 26"	Birth-20 lbs.	< 26"	Yes
Peg Pérego						
Primo Viaggio	200	5 pt.	22.67" x 17.5" x 23.5"	Birth-20 lbs.	Up to 26"	Yes

*Available in April **Top of head should be 1" below top of seat

Forward-Facing Seats							
Brand Name	Price	Harness Type	Dimensions height x width x depth	WT Limits w/Harness	HT Limits w/Harness	WT Limits w/Belt	HT Limits w/Belt
Britax							
Husky	239	5 pt.	30.25" x 22" x 22.5"	22-80 lbs./1 yr.*	19"-53"	N/A	N/A
Car Seat Specialty							
Nania Airway	100-130	5 pt.	27.5" x 17.5" x 20.5"	22-50 lbs.	29"-48"	33-80 lbs.	33"-57"
Nania Nuevo	90-110	5 pt.	26.25" x 18" x 20.5"	22-40 lbs.	29"-40"	33-80 lbs.	33"-57"
Nania Solo	60-70	5 pt.	26.25" x 18" x 20.5"	22-40 lbs.	29"-40"	33-80 lbs.	33"-57"
Cosco							
High Back Booster	50	5 pt.	26" x 22" x 16"	20-40 lbs.	29"-40"	30-80 lbs.	29"-52"
Summit®	100	5 pt.	31.5" x 21" x 17.5"	20-40 lbs.	29"-40"	30-100 lbs.	29"-52"
Ventura DX	60	5 pt.	26" x 23" x 17.5"	20-40 lbs.	29"-40"	30-80 lbs.	29"-52"
Eddie Bauer							
Deluxe High Back Booster	120	5 pt.	31.5" x 21" x 17.5"	20-40 lbs.	29"-40"	30-100 lbs.	29"-52"
High Back Booster (100 lbs.)	90	5 pt.	28.5" x 22" x 16"	20-40 lbs.	29"-40"	30-100 lbs.	29"-52"
High Back Booster (2 versions)	80-180	5 pt.	26" x 23" x 17.5"	20-40 lbs.	29"-40"	30-80 lbs.	29"-52"
Safety 1st							
Vantage Point	80	5 pt.	28.5" x 22" x 16"	20-40 lbs.	29"-40"	30-100 lbs.	29"-52"
Evenflo							
Chase Comfort Touch®	69-79	5 pt.	27" x 18" x 19"	20-40 lbs.	▲	30-80 lbs.	37"-54"
Comet™	69	5 pt.	29" x 19" x 22"	20-40 lbs.	▲	30-80 lbs.	37"-54"
Express®	49	5 pt.	27" x 18" x 19"	20-40 lbs.	▲	30-80 lbs.	37"-54"
Vision®	59	5 pt.	27" x 18" x 19"	20-40 lbs.	▲	30-80 lbs.	37"-54"
E-Z-ON Products, Inc.							
E-Z-ON™ Vest	100-110	5 pt./Vest	N/A			20-168 lbs.	N/A
E-Z-ON™ Adjustable Vest	100-110	5 pt./Vest	N/A			20-168 lbs.	N/A
Kid Y Harness Model 43Y**	55	Y	N/A			40-80 lbs. (car) 30-80 lbs. (school bus)	N/A
Graco							
CarGo™versions (Platinum™, Treasured & Ultra)	60-100	5 pt.	27" x 18" x 17"	20-40 lbs.	27"-43"	30-100 lbs.	35"-54"
Century® NextStep®	100	5 pt.	26.5" x 17.5" x 22.3"	20-40 lbs.	27"-43"	30-100 lbs.	35"-52"
Century® Breviera® Ascend SE	80	5 pt.	28.8" x 18" x 18"	30-40 lbs.	35"-43"	30-100 lbs.	35"-50"

* At 48 lbs. switch from LATCH to seat belt attachment.
▲ Shoulders at or below harness slots

** Secures with vehicle's lap only belt or can be used in conjunction with RideRyte Booster Seats.

Convertible Seats

Brand Name	Price	Harness Type	Dimensions height x width x depth	Rear-Facing Wt/HT Limits	Front-Facing Wt/HT Limits	Belt Position Wt/HT Limits
Britax						
<i>Advantage</i>	259	5 pt.	26" x 18" x 22.5"	5-33 lbs. 19**	20-40 lbs./1 yr. 27"-40"	N/A
<i>Britax Galaxy</i>	239	6 pt.	26" x 20" x 18"	5-33 lbs. 19**	20-40 lbs./1 yr. 27"-40"	N/A
<i>Canadian Marathon</i>	249	5 pt.	28" x 19.5" x 25"	5-33 lbs. 18**	20-48 lbs/1 yr. 27"-49"	N/A
<i>Marathon</i>	249	5 pt.	28" x 19.5" x 25"	5-33 lbs. 18**	20-65 lbs./1 yr.* 27"-49"	N/A
<i>Roundabout</i>	239	5 pt.	25" x 18.25" x 23.5"	5-33 lbs. 19**	20-40 lbs./1 yr. 27"-40"	N/A
<i>Wizard</i>	269	5 pt.	28" x 19.5" x 25"	5-33 lbs. 18**	20-65 lbs./1 yr.* Up to 49"	N/A
Car Seat Specialty						
<i>Nania Basic/Basic LX</i>	69-79/ 99-109	5 pt.	23" x 17.5" x 23.5"	5-30 lbs. 19" minimum	20-40 lbs. Up to 40"	N/A
Combi						
<i>Avatar™</i>	210	5 pt.	25" x 18" x 21.5"	0-30 lbs.** 19"-40****	20-40 lbs. Up to 40"	N/A
Cosco						
<i>Alpha Omega®</i>	140	5 pt.	28" x 17" x 15.5"	5-35 lbs. 19"-36"	20-40 lbs. 29"-40"	30-80 lbs. 29"-52"
<i>Alpha Omega Elite</i>	150	5 pt.	29" x 25" x 17"	5-35 lbs. 19"-36"	20-40 lbs. 29"-40"	30-100 lbs. 29"-52"
<i>Alpha Omega® Overhead</i>	150	Ohs	27" x 24" x 16"	5-35 lbs. 19"-36"	20-40 lbs. 29"-40"	30-80 lbs. 29"-52"
<i>Regal Ride™</i>	60	Ohs	25" x 19" x 14"	5-35 lbs. 19"-36"	20-40 lbs. 29"-40"	N/A
<i>Touriva®</i>	50	5 pt.	25" x 16" x 15"	5-35 lbs. 19"-36"	20-40 lbs. 29"-40"	N/A
<i>Touriva® Overhead</i>	60	Ohs	25" x 19" x 14"	5-35 lbs. 19"-36"	20-40 lbs. 29"-40"	N/A
Eddie Bauer						
<i>3-n-1 Convertible Car Seat</i>	160	5 pt.	28" x 25" x 17"	5-35 lbs. 19"-36"	20-40 lbs. 29"-40"	30-80 lbs. 29"-52"
<i>Deluxe 3-n-1 Convertible Car Seat</i>	170	5 pt.	28" x 24" x 16"	5-35 lbs. 19"-36"	20-40 lbs. 29"-40"	30-100 lbs. 29"-52"
Safety 1st						
<i>Comfort Ride</i>	70	5 pt.	25" x 14" x 16"	5-35 lbs. 19"-36"	20-40 lbs. 29"-40"	N/A
Evenflo						
<i>Titan 5™</i>	60-70	5 pt.	27.5" x 20.25" x 21"	5-30 lbs. 19" ♦	20-40 lbs. < 40"	N/A
<i>Tribute™</i>	60-70	3 pt./ohs	25.5" x 20.25" x 21"	5-30 lbs. 19" ♦	20-40 lbs. < 40"	N/A
<i>Triumph® 5</i>	120	5 pt.	27" x 18.5" x 20.5"	5-30 lbs. 19" ♦	20-40 lbs. < 40"	N/A
<i>Vanguard 5 Comfort Touch®</i>	80	5 pt.	27" x 18" x 20"	5-30 lbs. 19" ♦	20-40 lbs. < 40"	N/A
<i>Victory 5 Comfort Touch®</i>	90-100	5 pt.	28" x 18.5" x 20"	5-30 lbs. 19" ♦	20-40 lbs. < 40"	N/A
Graco						
<i>Century® 1500 STE™</i>	50	5 pt.	26" x 17" x 19"	5-22 lbs. ****	20-40 lbs./1 yr. Up to 40**	N/A
<i>Century® Accel® SE Overhead</i>	80	3 pt./ohs	26.5" x 20" x 18.5"	5-30 lbs. ****	20-40 lbs./1 yr. Up to 40**	N/A
<i>ComfortSport™</i>	70-120	5 pt.	26.5"H x 20"W x 18.5"D	5-30 lbs. ****	20-40 lbs./1 yr. Up to 40**	N/A
<i>ComfortSport™ Overhead</i>	80	3 pt./ohs	26.5" x 20" x 18.5"	5-30 lbs. ****	20-40 lbs./1 yr. Up to 40**	N/A

* At 48 lbs. switch from LATCH to seat belt attachment.

** Consult doctor for use under 5 lbs.

*** Seat changes to forward position based on weight limits

**** When child can no longer comfortably fit and knees remain bent, seat should be used forward facing only if child is over 20 lbs. and one year old.

** Top of ears below top of shell ♦ Top of head must be 1" below top of seat

Resources

American Academy of Pediatrics (AAP),
www.aap.org, (847) 434-4000

Insurance Institute for Highway Safety,
www.highwaysafety.org, (703) 247-1500

National Highway Traffic Safety Administration (NHTSA), www.nhtsa.gov, (888) DASH-2-DOT

National Safe Kids Campaign,
www.safekids.org, 202-662-0600

SafetyBeltSafe U.S.A., www.carseat.org, (800) 745-SAFE

or forward. Seats and vehicles manufactured from model year 2002 and on are equipped with Lower Anchors and Tethers for Children (LATCH) and should allow you to install the seats without the seat belts. Some anchors and car seat configurations, however, are a difficult, if not impossible, fit. Also, unless both the seat and the vehicle are LATCH-ready, seat belts still need to be used for installation. Belt-positioning boosters do not require LATCH as they attach with seat belts only.

Don't overlook the importance of ease-of-use. As parents with more than one child in car seats, you need all the timesaving and simplifying features available. (See sidebar for suggestions.) View the National Highway Traffic Safety Administration (NHTSA) Web site for its new Ease-of-Use Rating Program. Your comfort with the product is the true test of whether you find a seat easy or difficult to use.

After you're sure the seats fit your car, and you and your kids are comfortable with them, buy. Then do yourself and your children a favor: Get your installation techniques checked out by an NHTSA-certified child safety technician. You can find safety inspection stations through your local fire or police department. Inspection events are held at car dealerships, outside of stores such as Babies "R" US and at family-oriented community events.

Englewood, Colo., firefighter and EMT Jason Hehn is also the car seat coordinator for the city. He inspects installations and instructs parents on proper techniques. "Statistics show that nine out of every 10 car seats inspected by a trained technician are installed incorrectly," Hehn said.

The most common errors he sees are the child not being secured properly with the 5-point harness and the seat not being secured in the vehicle properly with the lap and shoulder belts. While LATCH is a fairly consumer-friendly system, he still encounters installation errors. Most parents use the top tether, but either attach it to something other than the approved anchor points or use it in some other non-conforming way. He always reminds parents to read the vehicle manual prior to installation.

While some installation problems are resolved by new technologies, others crop up. For example, if your vehicle has side-impact air bags, refer to your vehicle's manual for safety advice and possibly contact the manufacturer. Stay informed and don't be afraid to go in for periodic installation check-ups.

Once you have your car seats and you know how to install them properly, you're ready for the road! Get in your car and go, go, go. ♥

Trina Lambert lives in Englewood, Colo., and is the mother of boy/girl twins.

Infant seat handles, depending on the style, can add four inches to the depth measurement.



Road-Ready Features

Safety

- ▶ Impact-absorbing foam
- ▶ Polystyrene
- ▶ Side impact protection
- ▶ Higher weight/height limits for forward-facing harness seats
- ▶ FAA approved for airline use (boosters not approved)

Fitting

- ▶ Number of shoulder straps, including stepless
- ▶ Number of crotch straps
- ▶ Adjustable lengths, widths and/or depths of seats
- ▶ Adjustable head support systems
- ▶ Wider and larger seats to accommodate school-age children
- ▶ Removable booster backs for flexible seating options (depending on child's size and vehicle's seat back height)

Installation

- ▶ Option to purchase additional bases to keep in separate vehicles
- ▶ Adjustable bases, especially good for moving between vehicles
- ▶ Level indicators

Ease of Use and Comfort

- ▶ Harness adjusters
- ▶ Built-in lock-off clips
- ▶ Soft padding
- ▶ Recline
- ▶ Retractable and removable backs for carrying boosters
- ▶ Storage pockets
- ▶ Cupholders and snackholders
- ▶ Armrests (fixed or adjustable)
- ▶ Cold weather infant seat boots
- ▶ Ergonomic handles
- ▶ Easy-to-use handles

Booster Seats

Brand Name	Price	Type	Removeable Back	Dimensions height x width x depth	Belt Position Wt Limits	Belt Position Ht Limits
Baby Trend						
<i>Recaro</i>	359	High Back	No	32" x 21.5" x 18.5**	30-80 lbs.	37"-59"
<i>Trend Booster</i>	30	High Back	No	29" x 18" x 17"	30-80 lbs.	Up to 54"
Booster Kids						
<i>Grizzly Bear</i>	119	High Back	No	29.25" x 19" x 14"	40-100 lbs.	36"-57"
<i>Polar Bear</i>	129	High Back	No	29.25" x 20" x 14"	30-100 lbs.	33"-57"
<i>Teddy Bear</i>	109	High Back	No	29.25" x 17" x 14"	30-80 lbs.	33"-57"
Britax						
<i>Bodyguard</i>	110-130	High Back	No	34" x 17" x 14.5"	40-100 lbs.	43"-60"
<i>Roadster</i>	80	High Back	No	28" x 18" x 17.5"	40-100 lbs.	37"-56"
<i>Starriser™</i>	45	Backless	As Is	9" x 15.5" x 16.5"	30-80 lbs.	33"-53"
<i>Starriser Comfy</i>	99	High Back	Yes	32" x 15.5" x 16.5"	30-80 lbs.	33"-53"
Car Seat Specialty						
<i>Nania Dreamer LX</i>	59-99	High Back	Yes	28.5" x 18.5" x 18.5"	33-80 lbs.	33"-57"
<i>Nania Highride</i>	20-25	Backless	As Is	9" x 14.5" x 14.5"	33-80 lbs.	33"-57"
<i>Nania Ola</i>	19-24	Backless	As Is	10.25" x 18.5" x 15"	33-80 lbs.	33"-57"
<i>NaniaPolo</i>	16-20	Backless	As Is	9.5" x 15.75" x 13.75"	33-80 lbs.	33"-57"
<i>Nania Topper</i>	30-40	High Back	Yes	27" x 15.75" x 15.75"	33-80 lbs.	33"-57"
<i>Nania Uno</i>	20-30	Backless	As Is	9.5" x 15.75" x 13.75"	33-80 lbs.	33"-57"
Combi						
<i>Apogee™</i>	110	High Back	Yes	33" x 17" x 15"	33-50 lbs. ■ 50-100 lbs. □	33"-57" ※
Cosco						
<i>Complete Voyager®</i>	25	High Back	No	27" x 22" x 15.5"	30-80 lbs.	29"-52"
<i>High Rise Auto Booster</i>	20	Backless	As Is	9.5" x 20" x 16"	30-100 lbs.	29"-52"
<i>Protek</i>	40	High Back	Yes	30" x 19.5" x 14"	30-100 lbs.	29"-57"
<i>Vista</i>	35	High Back	No	27" x 18" x 15"	30-80 lbs.	29"-52"
Evenflo						
<i>Big Kid™</i>	39-49	High Back	Yes	28" x 17" x 19"	30-100 lbs.	Up to 57"
<i>SightSeer™</i>	39	High Back	No	27" x 18" x 19"	30-80 lbs.	37"-54"
Graco						
<i>My CarGo™</i>	40	High Back	No	27" x 18" x 17"	30-100 lbs.	35"-54"
<i>TurboBooster® (backless)</i>	20	Backless	As Is	8.64" x 16.25" x 13.5"	40-100 lbs.	40"-57"
<i>TurboBooster®</i>	50-80	High Back	Yes	26.5" x 16.5" x 15"	30-100 lbs.	38"-57"
Jupiter						
<i>Komfort Cruiser</i>	90-100	High Back	No	29" x 18" x 18"	33-100 lbs.	37"-57"
Safety Angel						
<i>RideRyte Full-Back****</i>	62	High Back	Yes	26" x 16" x 15"	30-80 lbs. ■ 40-80 lbs. □	30"-53"
<i>RideRyte No-Back****</i>	38	Backless	As Is	9" x 16" x 15"	40-80 lbs.	30"-53"
ProRider						
<i>Booster Car Seat</i>	\$15**	Backless	As Is	7" x 17.5" x 15"	33-80 lbs.	Up to 60****

* Dimensions adjusted to largest settings.

** Sold in increments of 2.

*** Seated height places midpoint of head below the top of the auto seat's backrest

**** Can also use with E-Z-ON Product's 86-Y Universal Harness with lap-only vehicle belts.

※ Top of ears below top of shell ■ With back □ Without back

Car Seat Companies

Angel Guard Products Inc. (800) 815-6330, www.mercurydistributing.com

Baby Trend (800) 328-7363, www.babytrend.com

Booster Kids (978) 632-8638, www.boosterkids.com

Britax (704) 409-1700, www.britaxusa.com

Car Seat Specialty (877) 912-1313, www.team-tex.com

Columbia Medical Manufacturing Corp (800) 454-6612, www.columbiamedical.com

COMBI International, (800) 992-6624, www.combi-intl.com

Dorel Juvenile Group (Cosco, Eddie Bauer, Safety 1st) (800) 544-1108, www.djgusa.com

Evenflo (800) 233-5921, www.evenflo.com

E-Z-ON Products (800) 323-6598, www.ezonpro.com

Graco Baby (800) 345-4109, www.gracobaby.com

Jupiter Industries (800) 465-5795, ext. 24, www.jupiterindustries.com

Peg-Pérego (800) 671-1701, www.pegperego.com

ProRider (800) 642-3123, www.prorider.com

Safety Angel (888) 743-3798, www.safetyangel.com

Sammons Preston (800) 323-5547, www.sammonspreston.com

Snug Seat (800) 336-7684, www.snugseat.com

Special Needs Seats

Brand Name	Price	Harness Type	Dimensions height x width x depth	Rear-Facing WT/HT limits	Front-Facing WT/HT limits	Belt Position WT/HT limits	Features
Angel Guard Products <i>Angel Ride Infant Car Bed</i>	57	3 pt. wrap-around	10" x 21" x 15.5**	< 9 lbs. / < 20"	N/A	N/A	LATCH-exempt, child lying flat, baby's head toward center of car (only 2 car beds per automobile seat), for special needs babies or babies with breathing difficulties, 5 degree surface raises baby's head
Columbia Medical <i>Orthopedic Positioning Seat 2000</i>	745	5 pt.	29" x 19" x 10"	N/A	20-102 lbs. 36"-60"	N/A	For kids who cannot sit upright unassisted, pads for customizing, depth extensions
<i>Small Adult Orthopedic Positioning Car Seat 2500</i>	1295	5 pt.	33" x 23" x 12"	N/A	60-130 lbs. 54"-66"	N/A	Pads for customizing, abductor accessories
E-Z-ON Products, Inc <i>E-Z-ON™ Modified Vest Model 101M2/XXS</i>	100-110	5 pt.+/ Vest	N/A	N/A	N/A	20-65 lbs. ***	Transport in prone or supine position with existing vehicle belts
<i>E-Z-ON™ Modified Vest Model 101M2</i>	100-110	5 pt.+/ Vest	N/A	N/A	N/A	20-100 lbs. ***	Transport in prone or supine position with existing vehicle belts
Sammons Preston <i>Carrie Car Seat (preschool)</i>	call	4 pt. ★	24" x 12" x 9"	N/A	20-40 lbs. 36"-45"	N/A	Therapeutic positioning, built-in pommel, installs with Carrie Seat tether & vehicle seat belt
<i>Carrie Car Seat (elementary)</i>	call	4 pt. ★	29.25" x 14.25" x 12"	N/A	30-60 lbs. 42"-50"	N/A	Therapeutic positioning, built-in pommel, installs with Carrie Seat tether & vehicle seat belt
<i>Carrie Car Seat (junior)</i>	call	4 pt. ★	33.5" x 16.5" x 15"	N/A	50-100 lbs. 48"-56"	N/A	Therapeutic positioning, built-in pommel, installs with Carrie Seat tether & vehicle seat belt
<i>Carrie Car Seat (sm. Adult)</i>	call	4 pt. ★	36.75" x 18.25" x 17"	N/A	60-130 lbs. 54"-66"	N/A	Therapeutic positioning, built-in pommel, installs with Carrie Seat tether & vehicle seat belt
Snug Seat <i>Gorilla</i>	625	5 pt.	30" x 18" x 14"	N/A	20-105 lbs./1 yr. Up to approx. 52"	N/A	Positioning accessories available
<i>Snug Seat 1000</i>	295	Belt Position	28" x 13.5" x 10"	N/A	N/A	30-60 lbs Up to 48"	5 pt. harness for postural control only, built-in pommel
<i>Snug Seat Car Bed</i>	425	Bunting	10" x 32" x 15.5**	6-21 lbs. Up to 29"	N/A	N/A	For infants who must lie flat, may be modified for special applications
<i>Spelcast CRD</i>	325	5 pt.	26" x 15" x 21"	10-20 lbs.	20-40 lbs./1 yr.	N/A	For children in hip (spica) casts
<i>Traveller Plus</i>	595	5 pt.	31" x 21" x 22"	N/A	22-105 lbs./1 yr. Up to 52"	N/A	Positioning accessories available
<i>Wallaby**</i>	10	Bunting	N/A	Up to 12 lbs. N/A	N/A	N/A	Positioning device for low birth weight and medically fragile children

*Car beds are placed sideways, not rear-facing **Car seat accessory only ***No longer than the length of the vehicle seat. ★ H harness ▶ Child's ear below top of seat

The Rules of the Road

General Rules

- ▶ Snug harnesses
- ▶ Plastic harness clip at armpit level
- ▶ Keep straps flat
- ▶ In cold weather adjust straps then place blanket on child
- ▶ All children 12 and under should be in back seat

Infant-Only Seats

- ▶ Rear-facing in back seat only
- ▶ Harness straps at or below child's shoulders
- ▶ Top of head 1" or more below top of the seat shell
- ▶ 45 degree angle
- ▶ If newborns slouch, pad the sides of seat and between crotch with rolled up diapers or receiving blankets
- ▶ Use until child is 1 year old AND over 20 pounds (or more depending on model)
- ▶ If child reaches maximum weight before turning 1 year, switch to convertible seat in rear-facing position

Convertible

- ▶ Rear-facing until child is 1 year old AND over 20 pounds

- ▶ Rear-facing harness straps at or below child's shoulders
- ▶ Forward-facing from 1 year AND over 20 pounds
- ▶ Forward-facing harness straps at or above shoulders
- ▶ Upper weight limits depend on product

Forward-Facing

(including harness seats that convert to belt-positioning boosters)

- ▶ From 1 year AND over 20 pounds
- ▶ Harness straps at or above shoulders
- ▶ Internal harness system for up to 40 pounds to 65 pounds, depending on the product
- ▶ Highly active and younger (3-4 years) children better protected in harness system
- ▶ Seats convert to belt-positioning boosters for children above 40 pounds, depending on the product

Boosters

- ▶ Children 40 pounds AND over until adult seat belts fit (around eight or about 4' 9")
- ▶ Used with lap and shoulder belts (not for lap only belts)

- ▶ Lap belt low and tight across upper thighs or lower hips
- ▶ Shoulder belt snug across chest and shoulder

Seat Belts only

- ▶ Child sits against back of vehicle seat with knees bent over the edge
- ▶ Lap belt low and tight across upper thighs or lower hips
- ▶ Shoulder belt snug across chest and shoulder

Travel Vests

- ▶ Use with lap belts (see product for more information)

Harness Anchored with Tether

- ▶ Use with lap belts AND in conjunction with tether (see product for more information)

Built-In Safety Seats

- ▶ From 1 year AND over 20 pounds

Special Needs

- ▶ See each product for information

Do your children and yourself a favor: Get your installation checked out by an NHTSA-certified child safety technician.

TWINS Parents' Bookshelf

More outstanding books and closeouts are available online at www.TwinsMagazine.com

Ready or Not...Here We Come!

Elizabeth Lyons

\$16.00



This author and mother of twins of Jack and Harry recognized that raising multiple children would not be easy. In her multiples birthing class, she met a group of women who not only survived their pregnancies, but also grew to be close friends. In her first book, Lyons and her "multiple sorority" survive the hardships of their first year with twins. They also learn and appreciate the fun and humor associated with raising multiple children. *Paperback, 165 pages.*

Twins

Mary Ellen Mark

\$50.00



One of America's leading photographers, Mark, whose work has appeared in *The New Yorker*, *Rolling Stone*, *Vanity Fair*, *Vogue* and *Life*, spent two consecutive years at the popular "Twins Days" festival in Twinsburg, Ohio, where she photographed twins using her large format camera. The results is this gift book: 80 stunning tritone images that show the bond between twins but also catches their unique individuality. Accompanying the photographs are interviews with the twins that illuminate the experience of life as a twin. *96 pages, hardback.*

When You're Expecting Twins, Triplets, or Quads

Barbara Luke, Sc.D., M.P.H., R.D. and Tamara Eberlein

\$14.00



Among the best books ever for expectant parents of multiples, it's full of positive, empowering information about health care providers, diet, activity and rest restrictions, preterm labor and infant feeding and care tips. *Paperback, 301 pages.*

Breastfeeding Your Premature Baby

Gwen Gotsch

\$5.95



The new La Leche League International publication proves once again that breastfeeding is possible in seemingly impossible circumstances. *Paperback, 60 pages.*

Your Premature Baby

Everything you need to know about the childbirth, treatment, and parenting of premature infants

Frank P. Manginello, M.D., Theresa Foy DiGeronimo, M.Ed.

\$17.95



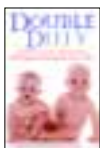
This book helps lessen parents' fears with guide to facing the challenging and often costly ordeal of giving birth to and caring for premature babies. Revised edition. *Paperback, 336 pages.*

Double Duty

The parents' guide to raising twins, from pregnancy through the school years

Christina Bagini Tringiov

\$14.95



Real-life solutions, parent-tested suggestions and expert advice on everything from pregnancy-related weight gain to whether or not to put the children in the same class in school. Each chapter includes a "top five" list of ideas to make your life and your twins' lives easier and more enriched. *Paperback, 201 pages.*

TWINS!

Pregnancy, birth, and the first year of life

Connie Agnew, M.D., Alan Klein, M.D.; Jill Alison Gannon

\$18.00

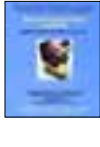


Read about physical, medical, emotional and psychological issues, with an emphasis on twin-specific issues and a month-to-month guide for the first year. *Paperback, 320 pages.*

Your Premature Baby & Child

Amy E. Tracy, Diane I. Maroney, R.N.

\$17.95



Written by experienced preemie parents and medical professionals, this book answers your questions from the simple to the complex: NICU, homecoming, bonding, medical, developmental, school years and more. *Paperback, 327 pages.*

Having Twins And More

A parent's guide to multiple pregnancy, birth, and early childhood

Elizabeth Noble

\$18.95



This newly revised third edition is bursting with details about multiple pregnancy; the birthing experience, postpartum concerns, and caring for twins at home. Includes chapters on prenatal psychology, premature delivery, twin bonding and the experience of loss. *Paperback, 562 pages.*

The Multiple Pregnancy Sourcebook

Nancy Bowers, RN, BSN

\$17.95



A perinatal nurse and mother of twins writes on pregnancy, infertility technology, prenatal testing, nutrition and development, preterm labor, birth and the NICU. *Paperback, 420 pages.*

Everything You Need to Know to Have a Healthy Twin Pregnancy

Gila Leiter, M.D., Rachel Kranz

\$15.95



A mother of twins and an OB/GYN herself, Dr. Leiter offers practical information, support and detailed resources for soon-to-be parents of multiples. *Paperback, 330 pages.*

The Pregnancy Bed Rest Book

A Survival Guide for Expectant Mothers and Their Families

Amy E. Tracy

\$14.00



With information on everything from notifying your employer and working with your health insurer to proper nutrition and calisthenics, this comprehensive guide helps you adjust to horizontal living and get back on your feet. An extensive resources list. *Paperback, 229 pages.*

Mothering Multiples

Breastfeeding and Caring for Twins or More

Karen Kerhoff Gromada

\$14.95



Published by the La Leche League, this guide covers first efforts in the hospital, avoiding problems, full vs. partial breastfeeding, going public and how to juggle household duties. *Paperback, 352 pages.*

Mothering Twins

Advice and support from five moms who've been there and lived to tell the tale

Elizabeth Friedrich, Cherry Rowland

\$13.95



The authors, both mothers of twins, deliver a bounty of useful guidance. Readers will tap into a wealth of practical tips and advice from doctors, nurses and dozens of other parents of twins. *Paperback, 304 pages.*

Raising Twins

What parents want to know (and what twins want to tell them)

Barry E. McLanara, Ed.D.; Francine J. McLanara, MSW, CSW

\$7.95



The McNamaras, TWINS Magazine advisory board members, recommend ways to work with your child's school, effectively manage your child's behavior, provide emotional support and act as an advocate for your child. Aimed at parents of school-age children. *Paperback, 216 pages.*

The No-Cry Sleep Solution

Gentle Ways to Help Your Baby Sleep Through the Night

Elizabeth Pantley

\$14.95



This sensible book offers a 10-step program that leads you, one day at a time, to your goal of a good night's sleep for everyone. Packed with tools and suggestions, not rigid formulas. *Paperback, 256 pages.*

Solve Your Child's Sleep Problems

Richard Ferber, M.D.

\$12.00



Does your child have difficulty falling asleep? Wake in the middle of the night? Suffer from night fears? This handy book is packed with insights, tips, sample problems and solutions, and a bibliography of children's "go-to-sleep" books. *Paperback, 251 pages.*

Nighttime Parenting

How to Get Your Baby and Child to Sleep

William Sears, M.D.

\$9.95



A vigorous opponent of letting your babies cry it out, Sears offers dozens of tips to help you get your babies (and toddlers) to sleep and to stay asleep with clear explanations of how babies sleep, high-need children and many more sleep-related issues. Revised Edition. *Paperback, 204 pages.*

How to Talk So Kids Will Listen & Listen So Kids Will Talk

Adele Faber, Elaine Mazlish

\$12.50



A contemporary "classic" about parent/child communications; it's supportive, friendly, and, above all, effective. According to the *Christian Science Monitor*, applying the book's ideas "will bring about more cooperation from children than all the yelling and pleading in the world." *Paperback, 286 pages.*

Twins to Quints

The Complete Manual for Parents of Multiple Birth Children

Rebecca E. Moskwiniski, M.D., ed.

\$18.00



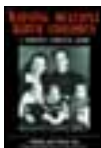
Compiled by the National Organization of Mothers of Twins Clubs and edited by Education Vice President Rebecca E. Moskwiniski, M.D., this book is packed with research reports, expert advice and practical "been there, done that" tips from club members. *Paperback, 298 pages.*

Raising Multiple Birth Children

A parent's survival guide

William & Sheila Laut

\$19.95



The Lauts have written a practical, well-thought-out guide that's loaded with lots of great lists, tips from dozens of parents of multiples, plenty of "why-didn't-I-think-of-that" insights and loads of humor. "A must-read." —Janet Bleyl, Founder of the Triplet Connection. *Paperback, 240 pages.*

The Parents' Guide to Raising Twins

From pre-birth to first school days — the essential book for those expecting two or more

Elizabeth Friedrich, Cherry Rowland

\$13.95



The authors, both mothers of twins, deliver a bounty of useful guidance. Readers will tap into a wealth of practical tips and advice from doctors, nurses and dozens of other parents of twins. *Paperback, 304 pages.*

Keys to Parenting a Child with Attention Deficit Disorders

Barry E. McLanara, Ed.D.; Francine J. McLanara, MSW, CSW

\$7.95



The McNamaras, TWINS Magazine advisory board members, recommend ways to work with your child's school, effectively manage your child's behavior, provide emotional support and act as an advocate for your child. Aimed at parents of school-age children. *Paperback, 216 pages.*

Keys to Parenting Multiples 2nd Edition

Karen Kerhoff Gromada; Mary C. Hurlburt

\$7.95

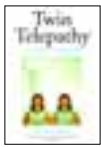


Helpful and practical guidelines for nurturing multiples from pregnancy and into childhood. Covers breastfeeding, individuality, combined energy, toilet learning, school, development and much more. *Paperback, 216 pages.*

Twin Telepathy: The Psychic Connection

Guy Lyon Playfair

\$9.95



Evidence of a telepathic link and incidents of shared emotions, thoughts and tactile sensations, extreme physical manifestations as bruising or burning are documented. *Paperback, 160 pages.*

Discipline Without Shouting or Spanking

Jerry Wyckoff, Ph.D.; Barbara C. Unell

\$8.00



Every parent of 1- to 5-year-olds contends with children who sometimes whine, refuse to eat, throw tantrums, etc. Unell, founder of TWINS magazine, and Wyckoff help parents learn how to discipline children without damaging self-esteem or curtailing natural curiosity. Revised and expanded edition. *Paperback, 160 pages.*

Twin Stories

Their Mysterious and Unique Bond

Susan Kohl

\$13.95



A mother of twin boys talks to twins of all ages and writes with insight, warmth and humor, what it's actually like to be a twin. From growing up and competitiveness to trust and individuality, these stories provide a fresh look into twintship. *Paperback, 188 pages.*

Entwined Lives

Twins and What They Tell Us About Human Behavior

Nancy Segal, Ph.D.

\$25.00



Leading twin researcher and a monozygotic twin, Segal sheds light on the nature vs. nurture debate and shows how twins hold the keys to understanding our physical and intellectual capabilities. An easy-to-follow examination of complex studies on twin relationship, this book is an excellent resource for parents of twins. *Paperback, 396 pages.*

Twins in the Family

Interviews with Australian Twins

Tom Shapcott

\$18.95



From many interviews with Australian twins of all ages, the author, a twin himself, weaves a fascinating picture of twins' intuitive bond, their communication and the many ways in which they live out their individualism. *Paperback, 232 pages.*

Two at a Time

Jane Seymour; Pamela Patrick Novotny

\$24.95



Reading this book is like talking with Seymour about pregnancy, birth and life at home. Lists and answers to common questions. *Paperback, 205 pages.*

The Art of Parenting Twins

Patricia Malmstrom, M.A.; Janet Poland

\$14.00



Patricia Malmstrom, founder of Iwin Services, Inc., is a mother of adult twins who holds degrees in early childhood education and special education. She offers insightful advice compiled from interactions with thousands of mothers of multiples. Read about organizing your home, breastfeeding, "twinshock," developmental delays, identity issues and more. *Paperback, 333 pages.*

The Joy of Twins

Having, raising, and loving babies who arrive in groups

Pamela Patrick Novotny

\$16.00



This handbook covers everything from the scientific facts to practical parent-to-parent hints about raising two babies at once. *Paperback, 326 pages.*

TWINS

Photographs by David Fields; Essays by Ruth and Rachel Sandweiss

\$27.50



Beautiful collection photographs and short essays celebrate twintship with stories of 27 pairs of twins, including Muhammad Ali's twins, Jane Seymour's twins, Mario and Aldo Andretti, the first NASA twin astronauts, twin Olympians, twin brothers who survived the Holocaust and more. *Hardcover, 144 pages.*

Book bargains for parents of multiples!
Visit our Bookshelf Clearance Section online
www.TwinsMagazine.com

Facing the loss of a multiple

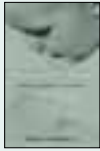
Coming to Term

A Father's Story of Birth, Loss and Survival

William H. Woodwell Jr.

\$25.00

By sharing the very early birth of his twin daughters, Woodwell looks at the heartache and the miracles of the NICU, the death of a twin, courage and survival. Hardcover, 216 pages.



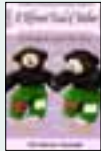
A Different Kind of Mother

Surviving the Loss of My Twins

Christine Howser

\$13.95

Howser lost both of her twin boys shortly after their birth and offers a story of love, loss and the choices that made healing possible. Paperback, 120 pages.



TWINS

MAGAZINE

SPECIAL REPORTS

Each special report is an updated compilation of the best articles from TWINS Magazine on topics of concern.

Feeding Multiple Babies

The simple questions—such as whether to breastfeed or bottle feed, weaning, handling colic, and many more—become more complicated when you have two or more babies. Full of useful insights from mothers who have been there! 40 pages.

Tips and Tools for New Parents of Twins and Triplets

When “twinshock” hits new parents, it hits hard. This compilation of special articles will be a blessing to new parents of young multiples by providing practical, encouraging advice about coping with day-to-day challenges. 52 pages.

Health & Safety for Infant Multiples

From choosing a pediatrician to ear infections and diaper rash, all parents of multiples will benefit from the simple, essential advice about the health of their babies. 40 pages.

Premature Twins and Triplets

This wonderful collection of articles helps frightened parents deal with the big and little traumas they must face as their small, prematurely born multiples enter life with extra health problems. 44 pages.

NICU

This collection of articles is designed to help parents more easily deal with their fears of the neonatal intensive care unit of hospitals, the challenges of nurturing premature babies, and bringing home their tiny babies. 54 pages.

Higher Order Multiples

This special collection of articles is for parents of triplets and quadruplets who face the same concerns of parents of twins—only multiplied. Topics include sleeping, feeding, bathing, dressing, car seats, school, relationships among multiples, and growing up as multiples. 88 pages.

Multiples Aged 7 to 12: The Middle Years

Your twins really grow up quickly. This collection of articles sheds light on classic parenting challenges during the twins' middle years—discipline, sexuality, safety, self-confidence, identity and more. 85 pages.

Multiples During the Adolescent Years

Parenting teen multiples isn't just hard. It's confusing and stressful, too. This collection gives straightforward insights and advice on multiples' adolescent development, behavior issues, health and education, and typical parenting woes. 87 pages.

Discipline Without Raising Your Voice

Reading (and re-reading) this outstanding collection of articles on discipline and behavioral issues is certain to expand your parental coping skills, ease tensions and help you through difficult times. Your children will benefit enormously, too. 56 pages.

A Guide for Parents Who Want Their Twins to Share a Classroom

An intelligent report to help you persuade schools to allow your twins to remain in the same classroom. Gives both the parents' views and the educators' perspectives. 25 pages.

Separate Classrooms or Together?

Multiples face unique schooling challenges and questions. To separate or not? What to do when one seems to be succeeding, the other not? Although every family's situation is unique, this collection of articles will help light the way down the often difficult educational path. 58 pages.

\$8.95 for one • \$14.95 for two

Published by TWINS Magazine

Popular choices from Twins Magazine

The Psychology of Twins

A practical handbook for parents of multiples.

Herbert L. Collier, Ph.D.

\$13.95

Twins do differ from singletons and, just as importantly, from each other, whether monozygotic or dizygotic. Herbert L. Collier, a psychologist and father of twins, draws firsthand experience from rearing his twins who are now happy, well-adjusted adults and also from counseling hundreds of families with multiples. Dr. Collier offers compassionate wisdom seasoned with patience and a perspective that comes only with time. When it comes to practical, down-to-earth advice, this is a must-have book for the parent who wants to understand and value each child as an individual. Paperback, 120 pages.



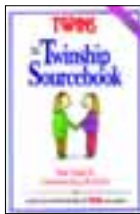
The Twinship Sourcebook

Your guide to understanding multiples

Editors of TWINS Magazine

\$14.95

The leading source of information for parents of multiples, this handy, one-of-a-kind guidebook helps you understand your multiples as they grow from birth through the school years and into adulthood. Topics include temperament and personality, twin-types, and whether to separate in school. If you have only one book on multiples, this is the one to have! An ideal gift suggestion to your friends and family! Paperback, 272 pages.



The Twinship Sourcebook 2: Toddler Twins

Practical parenting

Editors of TWINS Magazine

\$14.95

Your everyday questions about raising toddler twins are addressed in this informative new guidebook from the editors of TWINS Magazine. Twins and triplets who are moving beyond their babyhood—and, oh boy, can they move!—make every day a challenge and lots of fun! With insightful articles from experts and other parents, the book is divided into topics that concern parents most: biting and fighting, eating, identity, discipline, growing stages, physical development, language development, emotional development, play and creativity, and more. A perfect gift. Paperback, 198 pages.



The Stork Brought Three

Secrets of successful coping for ALL parents of multiples

Jean P. Hall

\$12.00

You may have twins instead of triplets, but you're sure to enjoy this touching, humorous first-hand account. This inspiring tale emphasizes the two essential ingredients for raising multiples—patience and a sense of humor. You'll learn from the practical steps this mom took to make life manageable. Paperback, 82 pages.



Dancing Naked in Front of the Fridge

And Other Lessons from Twins

Nancy J. Sipes, Ph.D. and Janna S. Sipes, J.D.

\$16.95

To these identical twins, twinship is like a dance in front of a mirror—each twin constantly reflecting the other. Look inside twinship, and yourself, for a fascinating view of relationships. Read this book and you'll gain new and valuable insight into your twins and their relationship. Paperback, 244 pages.



Twice as funny ... TWINS

A book of cartoons

David Lochner

\$10.95

Lochner's cartoon collection, *Twice as Funny... TWINS*, is sure to tickle your ribs. A great gift. Paperback.



Twins in the Park

Ellen Weiss **\$3.99** **NEW!**
Delightful story of twins on an afternoon trip to the city park will entertain young children. Charming images by British illustrator Sam Williams, "Twins in the Park" tells of fun, games and discoveries in a local park. *Paperback, 24 pages.*



Twins Take a Bath

Ellen Weiss **\$3.99** **NEW!**
Delightful story of twins in the bathtub will entertain young children. Featuring charming images by British illustrator Sam Williams, "Twins Take a Bath" tells of splashing and splashing and getting clean, dry and ready for bed. *Paperback, 24 pages.*



My Best Friend

Margie Fincher **\$5.95**
This simple book of rhyme teases the reader with the question, "Can you guess who my friend can be? I'll give you hints and you will see." 2000 Fiction Contest Winner



Simon Says

Diana Hamilton Keller **\$5.95**
Firstborn Simon flaunts his seniority over his twin, Max, who shows him a different way to approach that lofty position. 2000 Fiction Contest Winner



One Was Not Enough

Lori Manning **\$5.95**
Mama tells 5-year-old twins Zachary and Nicholas she had two babies because "one was not enough." 20 pages. 1999 Fiction Contest Winner



You Can't Trick Me

Yvonne Field-Bagwell **\$5.95**
Identical twin boys delight in tricking friends, teachers, and even Grammy about "who's who"—but they can never trick Mom. 1998 Fiction Contest Winner



Wishing on a Star

Dori J. DeGennaro **\$5.95**
As Kyle and Tyler, 5-year-old dizygotic twins, gaze at the stars, Mom shares how she wished the same wish every night when she saw the first bright star. 1998 Fiction Contest Finalist \$5.95



Michael's Brothers

Crystal Forsberg **\$5.95**
A great story for helping siblings get over jealousy and rivalry that are part of the constant attention multiples receive. 1997 Fiction Contest Finalist



Brown TWINS Series (6 books)

Patricia Frechtman
Ages 1 to 4. \$ 5.95 each • \$30.00 set

Book 1 • The Twins' Beginning!
Mrs. Browne's pregnancy and the birth of the Browne twins, Joshua and Lindsay.

Book 2 • The Twins Come Home!
Browne baby twins coming home and new the new demands on their happy parents.

Book 3 • The Twins' First Walk!
Joshua and Lindsay take their first excursion outside, seeing the big world from their stroller.

Book 4 • The Twins' First Visit to the Doctor!
The Browne twins visit the doctor.

Book 5 • The Twins Are on the Go
The Browne twins learning to crawl, stand and walk.

Book 6 • The Twins' First Birthday
Joshua and Lindsay joyfully celebrate their first birthday with a big party.

Jan and Ann are Twins

Barbara Sherwood **\$5.95**
Monozygotic twins Jan and Ann decide to switch places, but Mom takes Jan to Ann's favorite place, and Dad takes Ann to Jan's favorite place. Read to ages 1 to 4 and for early readers. 20 pages.



Jan and Ann and the Pet Rabbit

Barbara Sherwood **\$5.95**
Dad gives Jan and Ann sprinkling cans to water the garden, but they decide to give Fluffy, the pet rabbit, a shower instead. Read to ages 1 to 4 and for early readers. 20 pages.



Twenty Wiggle Toes

Cynthia Johnson **\$5.95**
Twins have 20 toes to wiggle, four feet for racing, four hands for clapping, 20 busy fingers and two bedtime yawns. 1997 Fiction Contest Finalist



One to Three

Nancy Griffin **\$5.95**
A older sibling learns to accept twin babies. At first it's confusing and hard, but that changes with time and love grows. 1999 Fiction Contest Winner



His Sister, Her Brother

Wendy Black-Mancarella **\$5.95**
Boy/girl twins who like different foods, have different personalities and enjoy different activities, know how much they love each other. Read to ages 1 to 4. 1998 Fiction Contest Finalist



Imagination Collaboration

Doris Goldstein **\$5.95**
Twins Max and Aliza turn the couch into an airplane and imagine forks and spoons having a party. 1997 Fiction Contest Finalist



The Chairs Where Pam & Sam Sit

Cynthia Grannell **\$5.95**
In the style of "This is the house that Jack built", the milk lands on the floor, the cat licks the milk, the cookie drops on the cat and so on. 1997 Fiction Contest Finalist



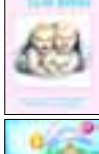
Tiny Tired Twins

Elizabeth DeArmond **\$5.95**
Filled with illustrations of "twin" animal babies, this bedtime story conveys a peaceful "sleepy" message. Read to ages 1 to 4. 1997 Fiction Contest Finalist



Twin Babies, Twin Babies

Joan MacNeil, Robin MacNeil **\$5.95**
In musical rhythms of a poem, new parents delight in their twin babies. Read to ages 6 months to 3 years. 1999 Fiction Contest Winner



The Twins & the Birthday Party

Marcia Murphy **\$5.95**
Lucy gets invited to a party, but her twin brother Larry doesn't. Yet he has a special day alone with Mom. Read to ages 3 to 5 and for early readers. 1998 Fiction Contest Finalist



Three is the Perfect Number

Kimberly Carey **\$5.95**
Triplets jump rope, play restaurant, sneak cookies and give parents a big bear hug. Stimulates imagination and self-directed play. 1997 Fiction Contest Finalist



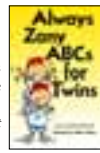
One Baby, Two Baby, Three Baby, Four

Christi Rober **\$5.95**
Twins, triplets or quads will giggle when they see quadruplets crawling, visiting a zoo, crying, taking a bath and, finally, falling asleep. Read to ages 1 to 4. 1997 Fiction Contest Finalist



Always Zany ABCs for Twins

Dawn Mitchell **\$5.95**
Romp through the alphabet with playful rhymes from "A is for Always, there's always us two..." to "Z is for Zany, the zany things we do..." Great for teaching twins the ABCs. 2001 Fiction Contest Winner



Twiship is in Your Heart

Stacy Dye **\$5.95**
On a visit to the park, mom gives twin brothers Alex and Evan a riddle to solve. Can they find the other twins in the park? The author dispels twin stereotypes and teaches individuality. Read to ages 3 to 5 and for early readers. 2001 Fiction Contest Winner



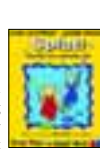
Boing!

No Bouncing on the Bed **\$12.99**
Jane Seymour, James Keach
Big Jim Cat becomes increasingly agitated when This One and That One go from bouncing on the bed, to bouncing on chairs, to bouncing on the sofa, to the bed again. For ages 4 to 8. Hardcover, 30 pages.



Splatt!

The Tale of a Colorful Cat **\$5.99**
Jane Seymour, James Keach
Lady Jane is away shopping and Big Jim gets This One and That One permission to paint him while he takes a nap, as long as they don't get paint on themselves or the floor. And that's what they do—paint dad! For ages 4 to 8. Paperback, 30 pages.



Yum!

The Tale of Two Cookies **\$12.99**
Jane Seymour, James Keach
This One and That One can't resist the smell coming from a basket of cookies their mom has made. But Lady Jane Cat made the cookies for their hungry dad Big Jim, whose fishing isn't going well. Everyone's in for a bit of a surprise! For ages 4 to 8. Hardcover, 30 pages.



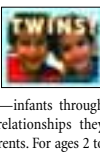
I Love You the Purplest

Barbara M. Joosse **\$15.95**
"Who do you love the best?" asks Julian, one of mama's young boys. "I love you the reddest," she answers. "I love you bluest," she says to Max, Julian's brother. A read-aloud story for ages 3 to 8 about the unique love a mother has for each of her children. Wonderfully illustrated by Mary Whyte. Hardcover, 24 pages.



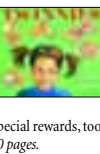
TWINS!

Elaine Scott **\$17.95**
Photographs by Margaret Miller
Through large photos and simple text, this warm and colorful book look at the lives of young multiples—infants through preschool-age—shows the special relationships they enjoy with each other, siblings and parents. For ages 2 to 5. Hardcover, 40 pages.



Twinnies

Eve Bunting **\$15.00**
As seen through the eyes of an older sister, life with "twinnies" isn't always easy. Sometimes the older child gets a little ignored and frustrated, but being the big sister has its special rewards, too. For multiples ages 5 to 7. Hardcover, 30 pages.



What Will We Do with Two?

A rhyming book for twins **\$10.95**
John P. Trump
This rhyming book, celebrates how parents respond to the challenges of raising multiples. For reading to multiples ages 1 to 3. 16 pages.



Twins: The Two of Us

Susan May **\$9.95**
With vivid, engaging photos and easy-to-read text, this delightful book shows that twins, though unique in many ways, experience the joys of life much like everyone else. Toddlers and early readers. 32 pages.



Twin to Twin

Margaret O'Hair **\$15.95** **NEW!**
Rhythmic text and playful illustrations take the reader through an exciting day with rambunctious brother and sister twins, who share a special bond as they play and learn to walk. For ages 2-5. Hardcover, 36 pages.



Kevin and Ben

Gail S. Coleman **\$5.95**
Identical twins Kevin and Ben see differences emerge as they get older... yet still feel lucky to have a twin. 1997 Fiction Contest Finalist



Just Like Me

Barbara J. Measi **\$4.95**
This simple learn-to-read book, written by a mother of twins, describes how twins Jennifer and Julie are alike and different. A vocabulary list helps children learn new words. Paperback, 32 pages.



About Twins

Shelley Rotner, Sheila M. Kelly **\$16.95**
Filled with photos of twins, this book shows parents and their twins (ages 4 to 8) what it means to be a twin and helps each twin develop a sense of individuality. Hardcover, 32 pages.



Family Reunion

Lynn Burgess **\$5.95**
The twins don't like having their heads patted by relatives who can't tell them apart and who always ask who is older, who is smarter and so on. This story helps twins learn to handle silly comments. 1997 Fiction Contest Finalist



My, You Have Your Hands Full!

Amber Lappin **\$5.95**
A simple rhyme book of how "full" life with multiples is, shows that what is most full is Mommy's heart. 2000 Fiction Contest Winner



It Takes Two

Tammie Blackburn **\$5.95**
Twins complement each other: One can draw pictures, the other can write words, "but to make a story come alive, it takes two." 1999 Fiction Contest Winner



The Little Green House

Beth Covino **\$5.95**
Twin sisters introduce "our two beds, two blankets, two pillows for resting our heads." But not everything is alike... one likes to read, the other loves music. 2000 Fiction Contest Winner



Where Are the Twins?

Maegann M. Struble **\$5.95**
Daddy and Mommy find their older sister, the dog, the bird and the cat, but where are twins Amanda and Samantha? Read to ages 1 to 3. 1999 Fiction Contest Finalist



T is for Twins: an ABC Book

Mary Bond **\$15.95**
This rhyming book pairs each letter of the alphabet with a large photograph of twins or triplets engaged in activities from tree climbing to napping. Read to young twins, who can insert their own photo on the last page. Hardcover, 32 pages.



twins!

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When “it’s not fair” is fair

Historically parents have been told to treat their children equally in order to foster self-esteem, positive sibling relationships and prevent behavior problems. Parents bend over backward to avoid playing favorites... to be “fair.”

Parents of multiples hear the cry “it’s not fair” two or three times as often as parents of singletons. And the struggle with this issue is especially painful if one twin is chronically ill, handicapped, academically slow, gifted or finds himself or herself in any number of special circumstances.

In the best of family situations, it can be easy for parents to confuse “fair” and different, particularly if they face a daily barrage of “it’s not fair.”

A University of Missouri-Columbia researcher has some encouraging news for parents. Amanda Kowal, an assistant professor of Human Development and Family Studies, found that parents can treat their children differently and avoid the potentially negative consequences.

For the study, Kowal interviewed 135 children ages 11 to 13 years of age and their older siblings independently about parents’ distribution of preferential treatment. She also collected the mothers’ reports of the children’s behavior problems. Kowal pointed out that even at very young ages siblings are able to empathize with each other and take each other’s perspectives. They may not be able to articulate their feelings as well as older children, but they understand what the other is experiencing.

“Although this research does not target twin relationships specifically, I believe my program of research can speak to differential parenting and twin relationships,” Kowal explained. “As parents of twins know, even identical siblings can be very different in their temperaments, talents, interests and predilections. Twins often go out of their way to emphasize differences

between them: They may ascribe one as the older and one as the younger, even if the age disparity is a matter of minutes.”

Siblings emphasize these differences when they explain why their parents treat them differently and decide whether the treatment is justified. In fact, many children in Kowal’s study said a sibling’s unique needs precipitated differential treatment.

“The results suggest that in many cases, kids think it’s fair that they receive more punishment and less affection than a sibling,” Kowal said. “When they think it’s fair, they have fewer behavior problems and higher levels of socio-emotional development.

“On a practical level, it is important for parents to understand children’s views about the legitimacy of preferential treatment,” Kowal said. “Although parents may believe that their behavior is warranted or fair, they may not make their reasoning clear to their children. As a result, children may form attributions that are different from what parents intended.”

Children’s perceptions of differential treatment are more important to their relationship and to their developmental outcomes than who benefits. Thus, in cases where children believe they are “favored” and their sibling receives less parental attention and more control (discipline) and they believe this treatment is unfair, they tend to have poorer behavior. On the other hand, if children see their siblings as receiving better treatment, but believe this is fair, they have better outcomes. In fact, it may be that if a child believes a sibling’s needs are not being met because he or she is receiving better treatment or because parents are treating the children equally—even in the face of a sibling’s greater needs—the child may feel guilt or concern, which can translate into behavior problems.

“We did find that children in normally developing sibling pairs were often sensitive to reasons why their siblings may be in greater need of different forms of parental treatments,” Kowal said. Certainly a brother’s or sister’s needs would be particularly salient when one child is chronically ill or handicapped. Research has shown that differential treatment was associated with poorer sibling relationships in families with normally developing siblings, than in those with a child who has a developmental delay.

Siblings may be sensitive to inequities in the half ounce differences in bowls of ice cream or an extra M&M. “When, however, we talked to kids about more complex issues—including discrepancies in parental attention, sensitivity, praise, punishment and strictness—we found that children generally believe differential treatment is fair,” Kowal said.

“This is not to say that parents need not be concerned about treating their children differently. Children do monitor differences in parental behaviors and are very sensitive to them. What we find is that children have better outcomes when they understand that differential treatment is fair and these perceptions appear to be more important than whether the parental treatment is exactly equal,” Kowal summarized. “Thus, rather than attempting to treat very different children the same, families may benefit if parents are sensitive to children’s perceptions about the fairness of the differential treatment. By broaching this issue in discussions about family relations and by using children’s complaints of “it’s not fair” as opportunities to discuss this issue, parents can emphasize how much they love each of their children and that they seek to meet their different and unique needs—even if one of them ended up with an extra blue M&M last week.” ♥



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Finding a new normal

by Jean Kollantai

Almost 18 years ago, after her full-term twin son Andrew died at birth, Jean Kollantai founded the Center for Loss in Multiple Inc. (CLIMB). Nearly every day since then she has listened to detailed stories of twin, triplet or higher-order pregnancies and births. While the majority of multiple pregnancies have a good outcome, many of the stories she hears involve the loss of one or more of the babies and sometimes of handicapped survivors. She offers, from her point of view, advice on reducing the risk of loss and supporting those who suffer loss in a multiple-birth pregnancy. E-mail her at climb@pobox.alaska.net. Visit www.climb-support.org or call (907) 222-5321 for more information. (Kollantai refers to Diane and Deron; their story appears on page 37.)

Diane and Deron's loss of their son Brady, one of their triplets, places them in a very special group—bereaved multiple-birth parents who have experienced the death of one or more beloved babies. Our situations and causes of loss may be different, but the grief is universal and lasting.

For many, the loss comes after months or years of efforts to conceive with the help of fertility technology. With the increase in multiple conceptions, many parents who appear to the rest of the world to be parents of twins or triplets are in reality the parents of triplets, quads or more. Many other parents have a single living child who is actually a twin—as I do—and many more parents who do not have a survivor are, nonetheless, parents of multiples. All parents who face the tragedy of loss need support. There are things that those suffering loss and those helping them—or even meeting them casually—can do to ease the pain. Furthermore, parents can sometimes reduce the risk of loss.

Reducing the risk of loss

With three babies, Diane had three times the chance that her pregnancy would be

affected by a congenital problem, as happened with Brady.

Although not always possible, losses sometimes may be prevented if parents choose to be well informed and assertive. Premature labor is the most well known risk. Learn the symptoms of premature labor, which may not be recognizable as labor, and be aware of how early in the second trimester labor can occur. It also is important to be aware of the risks in the third trimester and at birth. Talk with your doctor about the timing and management of the delivery and make informed choices—many of us have lost big, near-term babies in ways that may have been preventable.

Certain risks are specific to monozygotic pregnancies. From what we have seen here at CLIMB over the years, we cannot stress enough the importance of knowing as soon as possible in the pregnancy whether the babies share a placenta or an amniotic sac. Armed with this knowledge early in pregnancies, doctors can closely monitor at-risk women for twin-to-twin transfusion syndrome and monoamniotic complications.

We also recommend consulting a perinatologist or maternal-fetal medicine

specialist at least once, and more often if the babies even possibly share a placenta.

Insist on medical attention for anything that may not seem right at any time in your pregnancy. Knowledge is power for your babies' lives and health.

Unique grieving

Grieving for your baby or child who has died is an intense and demanding experience—emotionally, physically, mentally and spiritually. It doesn't come in neat stages that someone graduates from in a certain amount of time. There are not any "TV miracles." We would all like somehow to get around it, but it's a "pay me now or pay me later" situation.

As bereaved multiple-birth parents, we face an especially complicated situation for many reasons. We are either grieving for two or more babies without survivors, or grieving for one or more babies while caring for a tiny survivor. In such a case, we experience the realities of parenthood and of loss at the same time. We all grieve for the loss of the set and the status of being the mother of visible multiples. Furthermore,

"Finding a new normal" continued on page 36

many of us have a survivor who is physically identical to the baby who died. Of course, all of us with survivors are concerned with the effect of the loss on them.

Many parents have been through months of a traumatic pregnancy and horrifying scenarios in the NICU, which bring their own grief. Often active grieving of the loss doesn't really begin until we bring home our survivor(s) and we have time to

Asking, "How are you?" and then being willing to really listen is one of the biggest gifts anyone can give.

mentally and emotionally process a very complex experience. About this same time, others may assume that everything is OK, or expect us to "focus on the survivor," or even tell us how lucky we are. As one of CLIMB's original members whose triplet son was stillborn at 32 weeks put it, "Two out of three is not good when it's your baby who died."

What parents can do

Parents can help themselves by knowing that grief for a loss in multiple birth is truly complicated, and the process of trying to cope and heal is likely to be long. We grieve not because there is something wrong with us, but because we love our babies and something terrible has happened. It's easy to get confused, exhausted, isolated and angry. It's important to know that there can be some pitfalls and sticking points. Seek help if they occur, or if you may have become clinically depressed.

Every person and every situation is different, but if parents know they are not alone and that their feelings are valid, most can find within themselves the wisdom to know what to do. They also can be patient with themselves and others as they move toward a "new normal" in a future that is completely, unexpectedly altered.

When parents' support needs are met, it is much easier to relate to survivors in a healthy way about their sibling who died. Support also helps parents find joy with a

single child in a subsequent pregnancy, all without having to "try" so hard, or enshrining the multiples who died and making it hard for the other kids to match.

Friends and family can help

Even though it is often painful to see living multiples, their parents usually best understand our loss. They could never imagine which of their babies they could live without. Rarely would a parent of multiples tell

us "at least you have one" or "you didn't know your twins." Parents of living multiples, and twins and multiples organizations, can help by letting parents know that they always will be parents of multiples, even though it is so sad that one or more of their babies could not be here with them. Avoid making anyone, including a prospective club member, feel that they have "flunked out" or been rejected by an elite group.

In families like Diane's with multiple survivors it's very important to know how they wish to have their living children identified—as twins or as surviving triplets. This is a major, constant source of discomfort and other parents of multiples are in a position to be sensitive about it.

What would be most helpful is knowing that friends and family appreciate what a really complicated and long-term loss experience this is, and that even though parents may be relating to any one part of it at a given time, it is really the whole thing they are reacting to.

Kindness and patience are never wrong. The willingness to try to see our experience from our point of view and what it means to *us* is important. Although people are tempted to make comparisons when it comes to loss, this tends to minimize loss rather than offer comfort. The words "easier" or "at least" are usually signs that an unhelpful comparison is being made.

People who say, "I don't know what to say" are much more empathetic than those

who try to tell us what to think or do in order to make it more comfortable for themselves. Asking, "How are you?" and then being willing to really listen is one of the biggest gifts anyone can give. For a caring person to simply say, "I can't imagine how difficult it must be" can be the biggest comfort at times.

It is not helpful for parents to "stay busy." Family, friends and multiples groups can help with meals, childcare, transportation and other practical things. Having time to rest and do what is needed in relation to the baby or babies who died is very helpful. So is remembering birthdays and anniversaries of the babies, and mentioning the baby's name.

Five helps for healthy healing

Many factors contribute to healthy healing. While everyone's personality and circumstances are different, we at CLIMB find certain factors to be influential.

1. Treatment by caregivers at the time of loss and how effectively they meet emotional needs
2. Supportive family, over an extended period of time
3. A willingness and ability on the part of the parent to reach out, even a little
4. Resolution of any medical questions: what really happened and was the loss preventable
5. Being able to integrate the loss into one's religious or other worldview

Down the road

For many of us, it was a real surprise to find that we didn't wake up one day with everything suddenly OK ... that it was like it never happened... that we were the same person we were before.... that if we do everything right, some kind of "closure" and wisdom will suddenly arrive. This loss is not like broken bones or a very bad case of flu. It is more like adapting to something that is painful but has to be adapted to, and of getting comfortable with something that is very uncomfortable.

For most of us in the 5- to 10-year period and beyond, life is good—and at the same time, while our loss is much less painful, we will always have a love for our child or children who died and a loyalty to who we are as people and as parents as a result of our experience. ♥

After trying every means possible for three years, my husband Deron and I finally, through IVE, got pregnant—with triplets. We were overjoyed and felt like the pain and heartache of trying to conceive and build a family was behind us and we could move on to life's joys. Then, at about 20 weeks an ultrasound revealed that one of our sons had hypoplastic left heart syndrome. He would survive in my uterus because his blood flow was through my heart but would not, without major medical heroics, survive for much time after he was born.

We began the journey of seeing specialists, at first to confirm our son's diagnosis and then to seek answers to our questions. A pediatric cardiologist at Children's Hospital in Denver, Colo., was the first to confirm the diagnosis. After a three-hour ultrasound during which I was violently sick, we went to a room where he sat across from us and, in a very matter of fact way and without any emotion, gave us four choices: Do nothing, let nature take its course and provide only comfort care after the birth; put the baby on the list for a heart transplant, with little hope for success; perform a series of risky and controversial heart surgeries; or terminate the pregnancy altogether.

I can't put into words my state of mind at the time. Thinking back, I wonder if I weren't in some form of shock, like time was standing still. For a few brief minutes I focused on the doctor. I got the feeling that for this doctor, the news he was delivering was so ordinary, so matter of fact, completely clinical. I wanted him to tell me that he felt my grief and that he understood that the news he had just given us was devastating.

At that appointment I realized what I wanted from the medical professionals. I wanted someone to step out from the security and comfort of the clinical role and take a minute to acknowledge our personal tragedy. While most of the specialists during our pregnancy kept us at arm's length, we were incredibly fortunate to have a wonderful OB/GYN and a team of amazing nurses after our babies were born.

Upon hearing our four choices, without speaking the words to each other, we both knew the right answer for our son—to treasure him while I was pregnant and then provide him with comfort and love for how-

ever long we would get to keep him. But as the days went by we found ourselves doubting our decision and spent several uncertain and difficult weeks researching hypoplastic left heart syndrome, talking with experts and asking their opinions.

In our final medical interview, we asked



Jackson and Maxine, 22 months

Loss and blessing

by Diane Grothe

a very senior pediatric cardiac surgeon what he would do if it were his son. He gently told us he couldn't tell us what to do, but that death for an infant waiting for a transplant was excruciatingly painful, drawn-out and ugly. And that the heroics required to keep our son alive until a heart was available would be beyond extensive.

We circled back to our original decision. I think we knew all along that comfort care would be our final choice, but we needed to be good parents to our son by making the most informed and loving decision we were capable of before he was born. We also had to do our utmost to protect the pregnancy for our other two babies.

At 32½ weeks, Maxine Taylor, then Brady Alan, then Jackson Thayer were born by Caesarean. Each baby was swaddled and presented to their daddy and me, then whisked away to the special care nursery. While teams of experts poked, prodded, inserted tubes and put Jackson and Maxine on ventilators, Brady was simply given oxygen and love.

One of our babies' amazing nurses, Pam, was determined to get Brady's footprints while he was still with us. Now we have a treasured page with three sets of tiny footprints lined up. Prior to delivery, we also asked our family, friends and nurses to take as many pictures as they could and to not feel like they

were intruding. I knew that some time down the road we would be grateful for the pictures.

We had spent nearly four months planning for this, yet we were completely unprepared for the depth of love and sorrow we would feel. Deron brought Brady to me in the recovery room and we spent the rest of his short life holding and kissing him, touching him and trying to visually and emotionally capture for permanent memory every second of his short life.

As soon as I was stabilized, the nurses wheeled Brady and me from recovery into the special care nursery so our family could be together. It was important to us that Brady spend some time with each of his siblings, so the nurses moved aside the tubes and monitors to let them briefly be together in this world. Then, Brady rested on my chest, eyes closed, skin to skin. Finally, just four short hours after his birth, he slipped away. As Brady left us, our family gathered closely around my bed and we prayed. My mom recalls the nursery being filled with a powerful divine presence.

After Brady died, our family and friends went home, leaving Deron and me with our three children. As I lay in my hospital bed, I watched Pam gently guide my husband through the process of bathing and dressing our son. It was done with such dignity and respect. Then she led my husband, cradling Brady, to a room to take his picture.

My first experience as a mother was saying goodbye to my first-born son. We got to keep Brady for only four short hours, but his birth, life and death have left a hole in our hearts that will remain always.

It has been 22 months since our children were born and Brady died. We are able to see now that along with so much grieving over the loss of our son, his life also gave us countless gifts and blessings. So, when someone asks me, "How many children do you have?" or "Are they twins?" or says "At least you did not have three," I can't help but think, "I am the mom to three: two I am rearing and one who watches over us from heaven." ♥

Diane Grothe lives with her husband and her twins in Ft. Collins, Colo.

Note from Diane: Deron and I realize that there are many options with HLHS and no right or wrong decisions. Every family must decide what is right for them and their children. Their decision may not be the same as ours.

Differing sex drives strain marriage

She said:

I want some advice on how to overcome the 'rut' of a marriage that endured years of infertility treatments and, unfortunately, lost all its passion. We still love each other, try to make time for ourselves and enjoy spending time with our twin girls (14 months). We don't want to spend the money and time going to a marriage counselor because we know we have a good marriage. It's just hard to find any chemistry in the bedroom because we spent so much time trying to conceive in the doctor's office. Our marriage has turned into a solid friendship, and nothing more. Help!

Shelly

He said:

Our sex life is not on my mind as much as it used to be, but I don't think of it as a negative thing. My mind is on a lot of different things. I realize we aren't as frequent as we should be, but it isn't really a big problem for me. Also, the more my wife talks about it, the less I feel I want to. I get turned off by the long, drawn-out conversations about our sex life.

Tom

P.S. from Shelly

Tom walked out of the room while we were talking about this e-mail and put on the ball game! I feel so sad and hurt by that! He should have taken me in his arms and hugged me and made some kind of an effort!

Dear Tom and Shelly,

The fight that you are having is currently going on in millions of homes across the country right now. It's helpful to our readers to hear from women who are struggling with this issue, since it's more common to hear men complaining about the lack of sexual interest from their wives, since twins.

Shelly, you said that you want "to overcome the rut of a marriage that endured years of infertility treatments and, unfortunately, lost all its passion." It is true that years of infertility treatment can sometimes wear down the intimacy and goodwill in a marriage. As an infertility specialist, I see this happening frequently to the couples in my practice.

Emotions of infertility

There are several reasons why this occurs. The first has to do with the stress that infertility places on a marriage. The potential diagnosis of infertility is a huge loss. People who are unable to have children easily, or unable to have children with whom they share a biological connection have to grieve.

The different ways that women and men manage infertility can strain a marriage. Women commonly wish to handle the stress of infertility and its interventions through frequent discussions and expressions of emotions. Men often want to manage their feelings by avoiding them, and focusing on the practical. This dynamic leaves women feeling misunderstood, lonely and isolated. It leaves men feeling guilty, burdened and overwhelmed.

Because infertility is most commonly caused by one, rather than both members of the couple, the infertile member may be more weighed down with feelings of guilt, shame and inadequacy. Men commonly feel like they're not "real men." The common way that men joke about their

infertility is to say, "I'm shooting blanks." They worry that their wives see them as less virile or masculine.

Women's infertility also can have an enormous impact on their self-esteem and identity as women. For women, conceiving and carrying a child is often closely tied to how they think of themselves as women. Women who can't conceive without intervention, or who have to use other women's ova or wombs, have the potential to feel inadequate. They may feel as though fate is punishing them with infertility. For both men and women, infertility can get tied into deeper feelings of inadequacy or defectiveness stemming from their own childhoods. Regardless, it's important to understand the details of how your infertility has affected your marriage and your sexuality. It's different for every couple.

Commitment and counseling

I applaud your desire to have a good sex life with your husband and your willingness to take some risks to make it better, such as writing in to TWINS. That shows a good commitment to your marriage. That said, I think you should believe Tom when he says that talking about this issue is a turnoff to him. This illustrates my earlier point. Men commonly shut down in response to conflict or complaints, and it looks like Tom has headed in that direction.

In Michele Wiener-Davis' book, *Divorce Busting* she counsels readers to sometimes "go blind." By this, she means that if you've been beating your head against the wall to get your partner to give you more than he's giving, then give it up for a while. This does not mean that you're giving up on sex for the rest of your life... more, that you're acknowledging that the current chase isn't netting any gain. My advice is to stop bringing up the topic of sex for the next



Joshua Coleman, Ph.D.

three months. Completely. If he initiates, and you're in the mood, fine. Other than that, you act like it's not even on your radar.

Shelly, you also said that you don't want to spend the money and time on a marriage counselor because you know you have a good marriage. In general, money on a good marriage counselor is money well spent. Studies show that most couples

- ▶ Feeling annoyed by their wives' worries about the twins
- ▶ Having a hard time seeing the mother of their children as a sexual object
- ▶ Feelings of resentment or exhaustion over the increase in housework.

It may take some time to change the dynamic in your marriage around sex. Meanwhile, it's important for you to

“Stop bringing up the topic of sex for the next three months. Completely.”

wait six years after the onset of problems before they see a counselor. Sometimes that's too long. Not to be an alarmist, but long-term damage can be done in marriage if you let things fester. You don't sound like you're there yet, but it's not something to wait on. You can always go for a few sessions and then stop if you both decide you don't need more help.

Show appreciation

Tom, you've got to recognize that you're making your wife feel pretty darned rejected. Why are you so disinterested in sex these days? Is it that you have shut down because you feel so bugged by her? If that's the case, it's critical that you talk to her about this in a way that doesn't leave her feeling devalued, unattractive or unimportant to you. Has she changed in other ways since the birth of your twins that you're not talking about with her? Some common areas that men complain about once their wives become mothers are:

- ▶ Feeling neglected
- ▶ Weight gain

address how rejected she feels. Therefore, even if you're not feeling terribly sexual toward her, give voice to your appreciation for how much she does for you, the twins, or the household—tell her what you love about her, tell her how attractive she is (even if you don't like her weight, talk about some aspect of her that you find sexy or pretty); do a few of the little things you did when you were courting her. Sure, your mind is on different things, and you're feeling nagged and probably unappreciated yourself. But the best solution is give voice to what's great about her.

Let me know how this goes and what you both do to work together on this. ♥

Joshua Coleman, Ph.D., is a psychologist in private practice in the San Francisco Bay Area. He is the father of twin sons and a daughter and the author of *Imperfect Harmony: How to Stay Married for the Sake of the Children and Still Be Happy* (St. Martin's Press). Visit his Web site at www.joshuacoleman.net.

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Being a new mother of twins, my years of being frugal started coming in handy. Saving 10 cents here and there might seem minuscule to others. For a mother who suddenly had to use two shopping carts just to buy diapers and formula, saving any amount of money was worth my efforts.

It soon became a game. I felt like some sort of superhero when I could walk through the front door after my shopping experiences and proudly proclaim that I had saved \$4. That would buy another hour's worth of diapers. Diapers and cans of formula measured everything in life that first year. Being frugal meant if I saved enough on diapers and formula my husband and I could actually rent a movie. Not go to the theater. No, that was reserved for our yearly date on our anniversary. The only problem with going out to the movies was, we were so tired from parenthood that we slept through half of it. But who cares? It was uninterrupted sleep and that was priceless.

We experienced three miscarriages before God blessed us with twins. Those words from our doctor changed our whole life. We have never slept the same since then, and we wouldn't change a day of it.

Those babies had it in for us, though. I just know they could sense when we were down to half a bag of diapers. It was then that they teamed up and soiled their diapers repeatedly, but never at the same time. They of course waited until I had changed the other one, sat in a chair and let out a sigh of tiredness. When they heard me sigh, the next one took over and did the deed. I try to tell myself that maybe they were just being gracious, for they could sense my need to get out of the house more.

One day, after my husband returned home from a long day at work, I announced we needed more diapers and formula. Obviously my words came as no shock; he just nodded his head. He simply asked for the

feeding and diaper schedules and bid me goodbye. My husband surely had to wonder if I was feeding the kids prunes, just so I had an excuse to leave the house. I grabbed the car keys, my purse and ran out the door. I loved being a stay-at-home mom, but those winter days when I couldn't take the twins outside seemed very long. I jumped in my car, turned on the radio and basked in my moments out of the house. The grocery store was only half a mile away so I had to drive slowly if I wanted more than five minutes alone.

I waltzed up and down the aisles, wandering aimlessly through the grocery store. I knew exactly where the diaper aisle was; I could buy diapers in my sleep. After going down several aisles, looking at nothing in particular, guilt crept in. I knew my husband was tired and the babies probably were crying. I figured I would speed up, get what I came for and head home.

As I walked to the diaper aisle, an older woman smiled at me, like she hid some secret. I smiled back, wondering what she could be harboring. Must be good I thought... wish she would share. I sure could use a good laugh. If she would tell me, I could share it with my husband. Aisle after aisle, strangers had the goofiest looks on their faces. My word, what was I missing? Must have been on an aisle I missed, I determined.

I bought the usual amount of supplies and greeted the cashier. Cashiers loved me. I was job security. As long as I had those twins, I needed their store. The cashier casually smiled back and busied herself with the task at hand—more coupons than she cared to see. The frugal thing again.

I hurried home to rescue my husband. Once inside the house, I went to the coat closet to put away my coat. The closet door



Illustration by Deborah Zemke

had a full-length mirror inside, which I had not bothered to look into before I left the house. Obviously my husband had been so tired he never noticed a thing. What I saw in the mirror almost brought tears to my eyes. Tears of laughter, that is. I was a woman who had been in lovely, expensive, evening gowns strutting the stage of beauty pageants in my earlier years. But today, I was not wearing an evening gown, adorned with sparkles. I was wearing a long sleeved shirt, adorned with vomit. Both of my shoulders were white from multiple episodes of spewed baby formula. I looked like I had turned on a blender full of buttermilk and flour and forgotten the lid. No wonder people were grinning. In my rush to save a few cents and run out of the house like a wild woman, I now paid the price. Well, I hope the grocery store patrons needed a good laugh, too.

Instead of changing, I showed myself to my dear husband. From the screams filling the house, I knew he could use a good laugh.

My beauty pageant days were over. My life now was measured in diapers; I never got more than two hours of continuous sleep and those babies ruled the house. But, my life had never been more satisfying. Those miracles from God gave me much more than any crown ever could! ♥

Andra M. Barker is a freelance writer who grocery shops with her twins in Warsaw, Ind.

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It's been three years and counting since I heard those words—"four sacs!"—from my doctors as they looked at my ultrasound. I should have been prepared for the events that would follow those words. My maternal grandmother had a set of triplets and four sets of twins, but my mom was not even a twin. My older sister Mary had twin girls. It didn't occur to me that I would be the one to break family history.

I grew up in Los Angeles, the youngest of four children, three girls and one boy. In school, I was very involved in scholastics, speech competitions, creative writing and poetry. I was always the overachiever, the standout, so it's really no wonder that I would be the one to have something no else had. Unlike other girls, I never dreamt of having lots of babies. I never babysat, other than for my sisters, and I was not paid for it.

My first pregnancy was a single birth, but not without drama on the first ultrasound. The technician thought he saw twins! I was elated to learn later that I was having only one baby—a son, Austin Ryan.

As Austin grew, I began to long for a girl. I felt Austin would be lonely growing up as an only child. I soon put it out of my mind, and said I was happy with my one child.

At a routine doctor's appointment, a blood test revealed that my sugar was elevated. The lab did a second test and determined that I had stage-one diabetes, which runs in my family.

The doctor asked if I was pregnant; I replied with a definite and defiant "no!" Nonetheless, he said he was required to run a pregnancy test before dispensing medications. I said fine but that it would be negative. It was positive! The hormone levels were still very low, indicating that

it was a very early pregnancy. They said they would test in a couple days to confirm, since they do sometimes have false positives.

Two days later the hormone level had doubled. Then, when they tested another two days later, my hormone level had tripled. Over the course of the next two weeks the numbers soared off scale. The doctors were shocked to find such high hormone levels.

On the first ultrasound, it was still too early to see a baby, but we did see two little sacs... then three sacs and three little hearts beating. It was soon confirmed that there were three babies—triplets!

A week and a half later, a zealous doctor asked if I would mind her doing an ultrasound as she had never seen triplets before. I said sure, and to our surprise we saw four large sacs with beating hearts. The fourth baby had been hiding behind the three. All bets were off. Routine ultrasounds were called baby soup, matching heads to hinds.

I had gestational diabetes in the pregnancy and had to be followed closely. At my routine appointment at 27 weeks, I was hospitalized with preterm labor. I felt nothing—not uncommon in multiple pregnancies. I was given medication to stop the contractions and labor. My doctors hoped for two weeks, at best.

The overachiever in me lasted two months! I went into labor at 34 weeks and delivered three adorable girls and one strapping boy by Caesarean section. Their weights were amazing: 4 pounds, 3 ounces, for my son Nikolas; 4 pounds,

5 ounces, for Ashley; 4 pounds for Alexis; and 2 pounds, 2 ounces, for Cambria, the smallest. I was told initially to expect the babies to stay in the hospital for a month. Not me, not my babies! All four babies were home by the second week.

Since these events, life has not been the same. We have gone through thousands of diapers, many loads of laundry and there have been many needs that were not



l. to r.: Alexis, Ashley, Nikolas, and Cambria, 8 months old

met by freebies, as most people had expected. We received no new van, no new house, no year's supply of diapers.

We basically winged it for the first year. I was forced to go back to work at the University of Southern California. If it weren't for the kindness of dear friends—some old, some new—we would never have made it. In fact we still nurture and cherish those friendships. Life remains a challenge for us as we struggle through the many woes that feeding and clothing four extra mouths can bring, along with potty training and preschool. Through it all—the sleepless first year, the 80 to 100 diapers a day, the countless loads of laundry, the sympathy cries, the colicky nights—we would not trade a single moment with our quad squad. ♥

Valerie Childress-Kelley lives in Los Angeles with her five children, including her quads who are now 6 years old and her husband.

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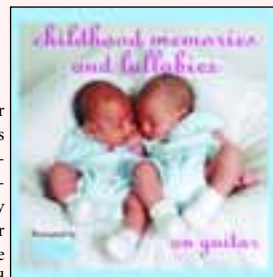
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A sentiment every parent of twins can relate to! This handcrafted ceramic plaque will tickle your funny bone and keep your sense of humor charged when you most need it. Leather hanger. 5 3/4" H x 7 1/2" W.

SF90092 \$17.99 each



18" x 18"

◀ Twin Sisters Hand-in-Hand

Colorful, high-quality print exudes the warmth of twin sisters' special relationship, and the strength and support they gain from their twinship. This picture belongs on the wall of every twin girl's bedroom. Verse surrounding print says, "Little girls are precious gifts, Wrapped in love serene, Their dresses tied with sashes, And futures tied with dreams." Framed print is 18"x18" overall, double-matted in dusty blue and rose, then beautifully surrounded in 1" gold leaf frame. Comes with glass.

SF90033 \$43.99 each



11" x 14"

▲ Multiples of Love

Your love is doubly deep when you have twins, in spite of the challenges they present and the amount of work you do while they are tiny babies. And this plaque expresses the perfect sentiments. You are filled with joy, and your heart overflows with love, but there are times when you are ready to tear your hair out! Hang this on your wall, or on the wall of your darlings' bedroom as a reminder of the wonder of having multiples and the beauty they've brought to your life. The colorful, heartwarming art is a print of a watercolor original by renowned California artist Jerianne Van Dijk created exclusively for TWINS Magazine and TWINS Shoppe. Oak frame, glass included. Creamy parchment mat, pale gold liner; 11" x 14" overall.

SS03002 \$31.99 each; two or more \$29.99 each

◀ Photo Frames

Exclusive to us! Collect your twins' special pictures in these keepsake frames. Designed especially for families with twins. Choose from a 12"x15" blue-painted frame with 10 openings in the matching mat, or a 10"x12" blue-painted frame with four openings in the matching mat. Both frames are beautifully lettered to say, "Twins are one of life's special blessings." Adorable Noah's Ark two-by-two illustration appears in one opening of each photo frame.

SF90031 12" x 15" \$23.99 each

SF90032 10" x 12" \$19.99 each



12" x 15"



10" x 12"

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B. 11" x 14"



A. 11" x 14"

▲ A. To a Mother of Twins

Creamy parchment mat, pale gold liner; 11"x14" overall.

SW00022 \$31.99 each

Two or more \$29.99 each

◀ B. Pardon Our Mess... Twins Live Here

Creamy parchment mat, pale gold liner; 11"x14" overall.

SW00021 \$31.99 each

Two or more \$29.99 each



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Lucky Leprechauns

You don't need the luck of the Irish to turn simple pots and a saucer into a St. Patrick's Day leprechaun. He can be made in any size; simply choose larger clay pots than the ones we've used. A large one would make the perfect lucky charm for your front porch. Use our smaller version as a centerpiece, party decoration or gift.

By turning the pots right side up or upside down, each pot becomes a piece of the body. Add foam arms, a few buttons, gold ribbon for his belt—and a pot of gold if desired—to complete your leprechaun. If you're lucky, this leprechaun won't try to run away! ♡

Julie Huffman, a fraternal twin and the mother of three, including twin girls born February 1998, lives in Aurora, Colo.



Adam and Breanna, age 4 1/2 years

For one leprechaun:

- ▶ 5 2½ inch clay pots
- ▶ 1-2 inch clay saucer
- ▶ Acrylic paint—black, green, flesh, yellow, light orange
- ▶ Paintbrush
- ▶ Green and flesh colored craft foam
- ▶ Gold paper squares
- ▶ Squiggly eyes
- ▶ Black buttons
- ▶ Glue gun or quick-drying glue (Only adults should use the glue gun.)

Directions:

1. Paint the pots in the following order:
Pot #1—Paint all black on the outside.
Pot #2—Paint the outside all green.
Pot #3—Paint all the base of the pot green; paint the lip with a yellow strip.
Pot #4—Paint the base a light orange, except for a 1" center square for the face.
Pot #5—Paint the lip of the pot yellow.
2. Paint the entire saucer black. Glue gold squares for buckles to hat brim and belt lip of pot#3.
3. For the arms, cut a 1- x 4-inch rectangle out of green foam. Cut out two hand shapes from the flesh foam. Glue the hands to the ends of the rectangle. Place glue in the center of the rectangle and glue to the back of pot #3. The hands will stick out from the pot.
4. On pot #4 glue eyes on the flesh square. Paint a nose and smile.
5. When completely dry, stack pots in order beginning with pot#1 upside down. Alternate turning pots over to build leprechaun. Place saucer upside down between pots 4 and 5. Glue pots together.

Enjoy!



1 Paint all the pots.



2 Paint the facial area with flesh-colored paint.



3 Glue on buttons, eyes and a gold square for the buckle and hat.



4 Draw the facial features.



5 Attach the arms and hands.



6 Assemble and glue together pots.

Infants held during immunizations cry less



There may be an easy and inexpensive way to make shots less painful. A new study in *The Archives of Pediatrics & Adolescent Medicine* found that infants receiving their 2-month immunizations who were given a bottle containing a sugar-water mixture two minutes before injections and then held by a parent and given a

bottle or pacifier during the injections cried for two-thirds less time than infants who were placed on the examination table for the injections. Visit www.medem.com for more information on immunizations.

Children with high fat diets could be at an increased risk for developing allergies and asthma, according to allergy researchers.

The Easter bunny's basket

Make sure the Easter bunny's basket of eggs stays as fresh as a spring breeze. Eggs are a potentially hazardous food, in the same category as meat, poultry, fish and milk—capable of supporting the rapid growth of disease-causing bacteria like salmonella.

Follow these guidelines to make sure your Easter bunny's basket doesn't bring unwelcome guests:

- ▶ Keep fresh eggs refrigerated until it's time to cook them.
- ▶ If you won't be coloring your eggs right after cooking them, store them in their cartons in the refrigerator. Refrigerate them again after they've been hidden and found.
- ▶ Don't eat cracked eggs or eggs that have been out of refrigeration for more than two hours.
- ▶ If you plan to use hard-cooked eggs as a centerpiece or other decoration, cook extra eggs for eating and discard the eggs that have been left out for many hours or days as a decoration.



Four-step stress buster for moms of multiples

Smile.

Smile and make your eyes sparkle.

Slack.

Then, take a deep breath. As you let it out, let your jaw hang slack.

Sag.

Let your shoulders sag.

Smooth.

Let your forehead relax and smooth out.

Repeat.

Are they twins?

A few months ago while I was shopping I spied a familiar scene. An elderly lady stopped a mother of twins. "Are they twins?" she asked. The tired mom was somewhat rude, giving her a quick answer.

"It's OK," I said to the elderly lady. "I'm a mother of twins and it is hard to keep a smile on your face when you haven't slept in a month."

I discovered early on that answering dozens of questions with each shopping trip is a part of the blessing of being a parent



Ella and Garret, 7 months

of twins. Here are some ways I dealt with the interruptions.

- ▶ I allowed ample time to get my shopping done.
- ▶ I grinned and accepted the curiosity of others. A smile always made me feel better.
- ▶ I realized that twins are unique and they would draw extra attention.
- ▶ I tried to be courteous and kind when others wanted to share their twin stories. I discovered that everyone is either related to a twin or knows someone who is a twin.

When I felt impatient after being stopped a dozen times, I thanked God for the blessing He gave me. In a lonely world, twins can bring a smile to even the longest face or joy to the saddest heart.

Nancy B. Gibbs, a freelance writer who lives in Cordele, Ga., is the mother of adult twin sons and author of *Celebrate Life...Just for Today*. Visit her Web site at www.nancybgibbs.com.

Give me-e-e-e o-o-one, too-o-o..."

If there is anything worse than a whining kid, it is whining in stereo. Since twins have a tendency to imitate each other's behavior, whining—which typically peaks between 3 and 5—is something you want to nip in the bud. Here are a few strategies.

Listen to yourself. Do you whine? "Co-o-ome o-o-on. I toold you to geet dr-e-e-essed."

Respond to your kids' whining in a matter-of-fact manner. Offer empathy, such as "I know you want to eat another cookie, but one is the limit for afternoon snacks." If you give in, your children learn that whining works.

Telling a 3-year-old "No whining," is somewhat pointless, because a 3-year-old probably doesn't understand what whining is.

Play deaf, suggests Charles Fay, Ph.D. of the Love and Logic Institute. Explain what a big boy or girl sounds like, and then do not respond to whining. You might say, "I only hear big voices, not whiney voices." After your child understands, you might respond with only silence.

Twins are like snowflakes

Twins are like snowflakes. No two are exactly alike. Identical twins may look alike, act in a like manner, and enjoy some of the same activities, but each one is unique in his or her individual ways.

Many times, playmates, teachers and neighbors see only the likenesses that the twins share. Parents of twins, however, are quite aware of the differences. And it is up to them to encourage each twin to use his or her specific talents and abilities. If one twin enjoys playing football, the other shouldn't feel like he should have to participate if he doesn't enjoy the sport. He should find a sport that he enjoys. On the other hand, if both enjoy a sport or activity, there is not any reason why both can't or shouldn't pursue it.

With the encouragement to be individuals, your twins will be better equipped to discover their own specific talents as adults. Permit their individuality and encourage their distinctiveness.

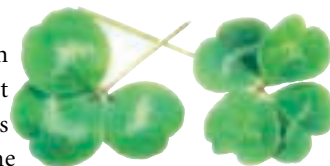
Nancy B. Gibbs, a freelance writer who lives in Cordele, Ga., is the mother of adult twin sons and author of *Celebrate Life...Just for Today*. Visit her Web site at www.nancybgibbs.com.

Irish twins

"I have two babies 14 months apart. When I tell people that they are 14 months apart they call them Irish Twins. Are they Irish Twins?"

Your babies are not Irish twins since they were not born less than 12 months apart. Historically, the English often referred siblings born within 12 months of each other as Irish twins. They originally used it to express disdain for Irish Catholic women whom they believed to have one pregnancy on the heels of another. The term has long since lost any stigma it might have held. You will even find a Yahoo e-group for Irish twins.

But your babies will be Irish twins one day, as will we all... on March 17. Happy St. Patrick's Day.



Thomas and Jamie, 14 ½ months

Little Houdinis

Twins' reputations as climbers, monkeys and little Houdinis are well-deserved. Fortunately—or usually—they outgrow their drive to bulldoze, climb, tinker and improvise. Until they do, bolt their furniture (and any other heavy household items they could pull over onto themselves) to the walls and clear their bedrooms of any potential "tools" or "weapons." The doorway gate keeps them in their room, but how do you prevent them from shutting you out or pinching their fingers in doors? You can install foam stops that slip over the edge of the door or install a hook-and-eye latch high on the back of the door and the wall.

According to an NOMOTC survey on discipline, praise and reward were consistently cited by the 860 respondents as routine disciplinary techniques. Visit www.nomotc.org to find out more about the discipline survey and other surveys.

DoubleTakes

Boy/girl twins are (almost) always dizygotic (DZ, "fraternal").
Can you guess whether the same-sex multiples are monozygotic (MZ, "identical") or dizygotic?

1



Rishan and Devan
Age in photo: 6½ months
East Windsor, New Jersey

2



Abbie and Holly
Age in photo: 2½ years
Rockville, Maryland

3



Erynn and Emile
Age in photo: 5½ months
Ione, California

4



Nelson and George
Age in photo: 2½ years
Acworth, Georgia

5



Vitalis and Donatus
Age in photo: 6 months
Spring, Texas

6



Taylor and Lexie
Age in photo: 12 months
Lizella, Georgia

7



William and Claudia
Age in photo: 2 years, 2 months
Scottsdale, Arizona

8



Maggie and Nicole
Age in photo: 3 months
Dolton, Massachusetts

9



Ryan and Mallory
Age in photo: 2 years, 3 months
Overland Park, Kansas

10



Maryssa and Moriah
Age in photo: 3½ years
New Rochelle, New York

11



Julia and Cole
Age in photo: 2 years, 9 months
Schaefferstown, Pennsylvania

12



Rayna and Hallie
Age in photo: 5½ months
Summit, New Jersey

13



Hannah and Camryn
Age in photo: 4 years
Missouri City, Texas

14



Ryan and Sean
Age in photo: 12 months
Highlands Ranch, Colorado

15



Brett, Ben, Katie, Sara, Joe and Brad
Age in photo:
Brett and Joe, 9 months; Ben and Brad, 8 years; Katie and Sara, 5 years
McKinney, Texas

Photo Tips

What we are looking for:

- Sharp focus
- Crisp, clean, vivid color (no blue or yellow cast)
- Good, attractive lighting (no high shadow contrasts, no "red eye")
- Uncluttered backgrounds
- Happy children interacting with each other

We select photos for an upcoming issue three months prior to its distribution. Because of the volume of photos received, we are unable to respond individually. If your photo is selected and you have not included a release form with it you will be contacted to sign a photo release. **See Release Form on page 44 of this issue.**

Please be sure to:

- Place your address label on the back of the photo (or write softly with permanent ink pen) along with a phone number.
- Include the names of the children, their age in the photo and their twin type (dizygotic, monozygotic or unknown).

Send your twins' photograph to:

TWINS Double Takes
Attn: Art Director
11211 E. Arapahoe Rd., Suite 101
Centennial, CO 80112-3851

NOTE: We are unable to use any professional photographs. Photos will not be returned.

All photos become the property of TWINS.

13 - UNK	14 - UNK	15 - All MZ
9 - DZ	10 - DZ	11 - DZ
5 - DZ	6 - DZ	7 - DZ
1 - MZ	2 - MZ	3 - MZ
		4 - UNK
		8 - DZ
		12 - MZ

Based on parental reports.

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My little man and the moon

While my 3-year-olds Austin and Kyle are in the process of expanding their vocabulary, “mama” remains an old favorite. Following a long day at the park and an even longer day of hearing “mama” times two, I was looking forward to their bedtime, so that I could retreat to a warm bath.

After eating dinner, bathing and reading books, their bedtime finally arrived. As I closed their bedroom door, I thought “tadah!” The rest of the night finally would be mine.

John works in the evenings, and often wonders what I “do” when the kids go to bed. I tell him that after a day with twin toddlers, all I “do” is relax. And relaxing comes easy in my bathroom.

That night, I added bath salts to revive my legs tired from running in two directions all day. I dipped two cotton balls in cold aloe vera to place on my red, puffy allergy-ridden eyes that came from smelling all the flowers my sons had given me at the park. And—the finishing touch—a glass of cold water sat beside the bathtub to replenish my fluids because, no matter how often we go out, I manage to pack everything but the kitchen sink for my sons but leave my drink behind.

A softly burning eucalyptus candle filled the bathroom with soothing scents. I was settled in my bath, cool cotton balls covered my eyes and bath salts soothed my legs.

Then, I heard “mama” coming from the boys’ bedroom. We do not live in a mansion, but if we did, I am convinced I could be in a far wing and still hear a quiet “mama” drifting through the rooms. We do, however, live in a home where, if I speak loudly enough, I can be heard across the hall and into my sons’ room. (John says I speak loudly enough to be heard in a mansion, over the mountain or in a different time zone... basically just about anywhere.)

So, I spoke loudly enough for Austin and Kyle to hear me say, “Go back to bed.” I waited a few minutes and it got quiet. I resumed relaxation. Then “mama” drifted back into my consciousness. It wasn’t a 9-1-1 or a scared-of-the-dark cry; it was just a “mama” that I knew would not stop until I made an appearance.

Reluctantly, I got out of my bath and made my way to their room. As I turned on the light, I saw Austin standing at his bedroom window and pointing. My heart raced. Was someone outside? I darted over to him, pulled up the blinds and looked out. No one was there. I looked for Kyle and saw him fast asleep, cuddling his stuffed monkey. I put Austin back to bed, gave him his pacifier and kissed him good night.

I was about to turn out the lights when Austin got up and went back to the window to look through a small corner section of



the blinds—a peephole that he and Kyle had made for occasions such as this. Austin was peering out from his little window to the world and pointing. He had his pacifier in his mouth but was trying to say something.

When I bent down to where he stood and looked out I saw why he was pointing. A huge, glorious full moon was glowing in the night sky. Austin took out his pacifier and said his new word, “Moon, mama.” Moon.

My world had been hectic and crazy that day and I looked to soothe my tired body and find comfort in bath salts, aloe vera and a eucalyptus candle. Initially, I felt deprived that my time alone for relaxation had been interrupted by the never-ending cry of “mama,” but those feelings evaporated the minute my son introduced me anew to the moon. My little man and the moon rejuvenated my spirits and made me proud to answer to “mama.” ♡

Mary Billiter Thomas is a freelance writer who lives with her husband and twin boys in Alpine, Wyo.

Twin Vision

by Brian and Brad Jones





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