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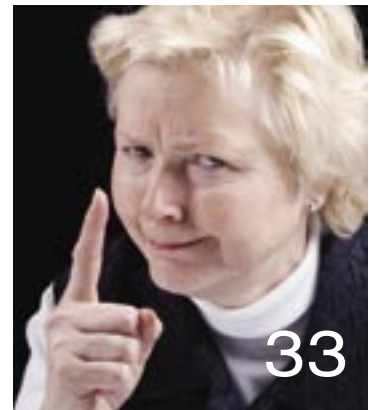
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COVER-KIDS



Annalise and Josephine Barrett live in Denver, Colo., arriving in Stephanie and Mike's lives on Feb. 24, 2005, at 37 weeks. Anna loves animals and Jo is especially fond of beaded jewelry.

Cover Photography by Covalli Photography



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Setting rules ... ME-Monsters ... Question-of-the-Month!

As you'll see in the MailBox section starting on page 8, we've received some incredible responses to the question I posed in the November/December issue about "Setting Rules" for twins. You're wonderfully participative readers, and I love hearing from you! One mom of twins whose girls are now 21 and who's been reading our magazine since they were babies wrote to us—she's an example of many subscribers' longstanding loyalty to TWINS™! Most gratifying of all, however, was the letter from a father of twins who is a foremost child and adolescent psychiatrist in the New York City area, Kai-ping Wang, MD, who explains clearly why so many people have a gut-feeling these days that our world is "going to hell in a handbasket," (my words, not Dr. Wang's). If you want to understand the consequences of not taking charge and being "the parent"—i.e., The Boss—to your kids (and a fairly tough one, at that!), read his letter on pages 9 and 10, please. I hope every parent of multiples posts this on the refrigerator door as a daily reminder of how important our jobs are, and to not simply cave in because we get tired of whining, begging, coaxing, cajoling, tantrums, and other torture devices used on us.

In this same vein, the TWINS™ Magazine's own Super-Nanny—if I can call Michelle LaRowe that—tackles the subject of the ME-Monster ingrained in all of us from birth. On page 20 she presents real-life tactics that work in your never-ending task of taming the ME-Monsters in your twins. Notice how kind and gentle but firm and assertive her language is when she suggests what to say and how to say it to your kids. Having helped raise twin kiddos in four different families now, Michelle really knows what it means to be the boss and make her words stick. She and the parents she's worked for and with also see the fine results of using firmness, civility, consistency, and keeping the decibel-levels low. Our Super-Twins-Nanny is amazing!

In some issues we deliver pretty equal portions of heavy-duty articles about heavy-duty subjects that affect your twinnny families (medical-related info, clinical issues, disabilities, etc.) and lighter material that I place in the broad category of fun / funny /entertaining. I have to admit, this issue is overloaded with sober articles, because parents of twins have been calling, writing and asking for more, more, more about these subjects ... asthma in twins (page 16), understanding and managing Tourette's Syndrome in young identical twins (page 22), maintaining balance and sanity when one twin is disabled and has extensive needs for added care (page 26), and keeping twins safe when out in public (page 30). Yes, we've given you some fun stuff, too, that'll give you an inner chuckle. Most of all, this is a high-value package because many of you face daily challenges with which we want to help.

Here's our Question of the Month for March ... When you praise your children, what words do you use? Now, I'm talking about praise for absolutely anything...behavior, learning something new, finishing assigned tasks, eating food that's put before them, saying Please and Thank You, winning a game, getting good scores, or performance in school. Do you ever praise them for nothing at all, hoping to "build their self-esteem" and make them feel good about themselves by simply saying, "I'm so proud of you because you're so smart"? See our Poll at the TWINS Message Board in the "Parenting Styles" Forum and give us your answers ... go to <http://www.twinsmagazine.com/vbulletin/showthread.php?t=61454> and read more on this subject by clicking the link there to see the entire article about how to praise children—and why—versus the wrong kind of praise that can produce consequences you almost certainly want to avoid. AND, let me know what you think ... send me an email at twins.editor@businessword.com



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Family now has 2 sets of identical (MZ) twins; it's rare

Cynthia Greene and her husband Rob received special deliveries Feb. 6—a second set of identical (MZ) twins, William and Clayton, each

weighing exactly 5 lbs.14 oz. Cynthia, 36, whose dad had twin sisters, has a set of MZ twin daughters, 13, from her first marriage. Rob had a set of grandparents whose siblings were twins. These are his first children. The family lives in Huntingburg, Ind. Rob had a premonition early in Cynthia's pregnancy that they'd have twin boys, and told his wife so. Three months later an ultrasound confirmed his hunch. MZ (identical) twins account for only about 1/6 of all twin-sets born, and having two MZ sets in one family is relatively rare. The chance of having twins in general is about 1 in 320; the chance of having one set of MZ twins is about 1 in 640; the chance of having two sets of MZ twins is about 1 in 1280.



Firefighter's training comes to the rescue

Sheila Patterson's husband, a firefighter in Fort Worth, Tex., was working a 24-hour shift when Sheila called and said she needed him at home right away. Feeling very pregnant at 33 weeks, Sheila had awakened in the middle of the night with an upset stomach, feeling strange. He arrived 25 minutes later after a long, fast drive to his rural home, delivering the first of his twin sons within three minutes of running in the door, praying for the paramedics to arrive. They didn't. Within minutes, Twin B emerged, foot first. Dad, seeing he was in a breech position, turned the baby and helped him out. Paramedics swept in 15 minutes after the events ended. Both boys are fine, says Sheila, who also has a daughter, 2.



Happy Easter, babies!

Michele Beaver's husband heated up some non-toxic paints and went to work painting this artistic masterpiece on his very-pregnant-with-twins wife's belly. He then created a clever sign labelling her large, round abdomen "Double yoker." Michele recalls she was "really miserable at the time" and needed comic relief. The Beaver twins were born at 6.3 and 6.4 lbs., respectively. "This was just so much fun...it actually felt good on my belly!" says Michele.



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Dr. William Sears
Author and child care specialist



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Poison ivy and poison oak **myths abound**



Few of us escape the ravages of poison ivy, poison oak, and poison sumac. Experts believe about 70% of us are sensitive to oils found in the sap of this noxious plant family. Parents of twins face twice the likelihood one of our children will return from a romp in the woods with an intensely itchy, oozing rash that takes a week or two to resolve. Haven't seen it yet? Just wait. Your time will come. And we're heading into poison ivy (and oak and sumac) season right now!

Myths abound regarding the plants, the rashes they cause, and effective treatments. Common misconceptions (keep in mind all three plants share these characteristics) include:

Myth 1: Poison ivy is contagious.

The rash caused by poison ivy is an allergic reaction to the plant's oil, uroshiol. It isn't caused by infectious agents such as virus or bacteria. As a result, poison ivy rashes cannot be passed on to others—neither the rash nor the fluid from weeping sores are contagious. However, the plant's oils can be spread indirectly on clothing or pet fur.

Myth 2: Dead plants are safe.

Not so. Uroshiol, the offending oil in poison ivy, stays active for years after the plant dies. So, if poison ivy is in the area, be as careful about allowing your twins to walk through dead brush as you would among live bushes. Be cautious when burning brush you've raked from the back-40—the oil becomes aerosolized in smoke when poison ivy is burned. It can cause significant reactions in anyone who

happens to breathe it into their lungs.

Myth 3: Scratching poison ivy blisters spreads the rash

Poison ivy rashes often weep and ooze, and the blisters are extremely itchy. Scratching the blisters and thereby spreading their fluid to other areas on your (or your child's) body doesn't cause new blisters or rashes. This myth lives on because of the normal progression of any rash. Depending on the amount of uroshiol contact, and the body parts affected, poison ivy rashes emerge one day to one week after contact. As new areas develop a rash, we mistakenly assume we spread the rash by scratching.

Myth 4: Once you are allergic to poison ivy, you will always be allergic.

Our immune systems age and become stronger. Hence, allergic reactions, which are simply an overreaction to a foreign agent, tend to lessen (in most people, that is). Your twins, who may be exquisitely sensitive to poison ivy as children, will tolerate exposure much better as they grow older.

Myth 5: Once you are in contact with poison ivy, nothing can stop it from turning into a rash.

Not true. Steps you can take include:

- Immediately remove all clothing, shoes, and hats that may have come in contact with the oil.
- Immediately wash all areas of the body that may have come in contact with poison ivy with plain soap and tepid (not hot) water.
- Pay special attention to the palms of your hands and those of your children, where thicker skin slows binding of the uroshiol, but allows the oil to be spread easily to other areas of the body.
- Be aware that after uroshiol binding has taken place—within 5 minutes and

2 hours after contact—washing with soap and water won't remove it from your skin.

- Medicate affected areas with Zanafel, the only product proven to eliminate uroshiol from the skin after binding has taken place. Zanafel is a body wash available over-the-counter. (Common remedies like calamine lotion may soothe an itchy rash but will not displace uroshiol oil from the skin.)
- Avoid topical creams containing antihistamines (benadryl) or anesthetics (benzocaine)—they may actually worsen a rash. Most medical experts doubt their effectiveness.
- No scratching! Bacteria may enter open sores and cause a secondary infection. Scratching also prolongs the rash and symptoms. Try putting socks on your twin's hands at night to prevent scratching while asleep.
- Consult a physician if the rash is severe, or you suspect secondary infection. Working in a college town near several poison oak-laden hiking trails, my ER is often populated by miserable, itchy students in dire need of relief. I often prescribe steroids, given orally or by injection, which decreases the severity of symptoms, but involve certain side effects and risks as well. Some other medications help with itching and sleep.

The best course of action with poison ivy (oak, sumac) is prevention. Learn which poison plants live in your area, and identify them. Keep yourself and your twins far, far away. Moments of prevention are worth pounds of itching and oozing. ♡

Steven Sainsbury, San Luis Obispo, Calif., is the father of eight in a blended family, including three surviving quads, 21. He's been writing medical articles for TWINS since 1986, and has worked as an emergency physician since 1985.

Twins? No Way!

"If anyone had ever asked me if I thought I would have twins, I would have replied, 'No way!' ... The day before my ultrasound, my mother-in-law... said, 'I really think you need to have four children because we love the other ones so much, and you two make great parents. I don't think you should stop at three, so I'm going to put a hex on you so you have twins.' ... The thought of twins never even crossed my mind. ... My twin boys are beautiful, wonderful children. I can't imagine my life without them. My sister has the most adorable identical twin girls. How wonderful it was to share our twin pregnancies!"

—Excerpt from Barbara Mettler's story in "Family Ties" chapter

How Lucky I Am...

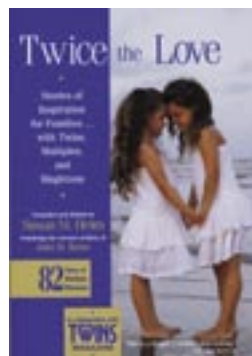
"When my twin boys were born, I was amazed at how much easier it was to care for two newborns than I had expected. They were five weeks premature, and so they slept a lot. ... Fast forward four months. ... My sons started to cut teeth, and suddenly I was holding two screaming babies all day

and waking up seven times a night to put someone else back to sleep. I started to lose my sanity... at some point in the middle of a particularly stressful night, I realized that all this must be easier than when the twins start walking and can run away from me in opposite directions. I sobbed and sobbed. Suddenly I remember the last time I had sobbed through the night ... I had been trying to have another baby for the better part of a year. ... I felt like the only woman in the world whose body had betrayed her. ... Finally when we got pregnant, it was a blessing... when we discovered we were having twins. ... I vowed I'd never forget how lucky I am to be the mother of twins."

—Excerpt from Katie Tatton's story in "Treasured Moments" chapter

Surviving Toddlerhood

"My life has been a series of back-to-nature adventures and close calls with disas-



ters: tornadoes on my wedding day, earthquakes and ant attacks while working overseas, camping with alligators on vacation. You name it, I've probably encountered it. But nothing could prepare me for the forces of nature called twins, or, more specifically, the chaos created by 15-month-old twins. ... Together, the two create a trail

of destruction that rivals herds of drunken elephants. ... Steve and I have been left to our own devices for coping ..."

—Excerpt from Monica Ulewicz's story in "Mischievous Multiples" chapter

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Being “the boss” to your children

Amen, Susan!! I completely agree with your opinions (Editor’s Letter, Nov./Dec. 2006) regarding how children are being raised. I’m a 35-year-old mom of three boys: Will, 5, and 9-month fraternal twins, Chase and Luke. My husband and I could easily take the go-with-the-flow parenting mentality with three boys in order to avoid too much conflict—especially with our oldest, who is very strong-willed (his name suits him!) and independent.

We often tread just as blindly as any other relatively new parents when it comes to discipline; there can be a fine line between teaching and stifling. But, that said, we come from Midwestern roots where (children are taught to) have respect for adults, and understand the concept of responsibility and consequences at a very early age. I think that’s the key today.

Everywhere we turn, our kids are being fed the message that, “If you are in the wrong, by all means, don’t admit it. Rather, defend yourself, make excuses, pass the buck.” It’s no wonder that our youth have trouble with respect and humility.

It all starts in the home. We are Christians who believe in having a close relationship with God and our church family. We practice daily manners such as, “Yes, please,” “No, thank you,” and “May I...?” to name a few. Our 5-year-old is expected to do daily duties like cleaning off his dishes and silverware from the table, putting dirty clothes in the clothes hamper, picking up his toys at the end of the day, etc. In return, we give him an allowance corresponding to his age. He now knows that a portion goes into his bank, a portion goes to his offering at church, and a portion is put into his “spending jar.” He’s learning (sometimes ever so slowly) that he does not use “sassy-talk” to Mom or Dad, and does not talk back when told to do something.

If it sounds like we have all the answers, we certainly do not. Each day brings new challenges. We believe a swat on the bottom is sometimes necessary, although often it’s more painful to take away a toy or (have Will) stop watching a favorite program.

We plan to use the same approach with the twins, although with each child comes a unique personality. We understand some “tweaking” may have to be done. We often lean on God, our families, and church friends for help. We hope that with love, open communication, and good old-fashioned discipline, we will be as prepared as we can be for adolescence and beyond. Thank you for your thoughts, and for your insightful and helpful magazine.

Abby
Fort Lauderdale, Fla.
Via email

Editor’s note: Thanks, Abby. When we think seriously about the buck-passing lessons many kids are taught by their parents, it seems many children are, indeed being taught the wrong lessons entirely. When it comes to taking personal responsibility for our actions—everything from crossing streets at crosswalks, stopping for yellow and red lights, obeying speed limits, paying fines for traffic tickets when we’ve been issued them, being honest on our resumes and job applications, being faithful to spouses and partners—so many of us are found to be liars and cheats.

Numerous disturbing studies have revealed the extent of our duplicity over decades. Now the findings of these sociological studies may be catching up with us as a nation. No wonder our kids behave similarly. Just look at the results of recent studies of school children, age 7 up to age 21, and the percentages of them who’ve learned cheating on tests pays... teachers are now dealing with generations of children who have absolutely no respect for tests, and feel entirely free to cheat with impunity.

Many parents are reluctant to assert themselves as in-charge bosses—maybe they’ve shirked responsibility (accountability) and rebelled against authority, and are uncomfortable passing along certain values to their children. It’s great that you’re a Christian family and live your values—there are many, many families and individuals who live their lives with superb honesty, integrity, charity towards others (which includes displaying good manners), respect for laws and elders and authority who are members of many other religions and belief systems, as well. To me, religion doesn’t necessarily have to be the basis for living a good life—although it often helps. In the development of civilized societies and civilizations throughout history, what seems aparent to me is that the handing down of “societal norms” and the teaching of personal integrity by responsible parents to children, passed from generation to generation, is necessary and important. Religion may indeed play a role in this, for some people, it may not be absolutely essential to living a moral life. In other words, ethics, morality, and integrity as personal virtues, coupled with kindness towards others and charity towards all may well be able to stand entirely separate from religion or religious belief—despite the linkage that seems inherent among these values and behaviors for many people. I’m not advocating disdain for religion, just taking a clear-eyed look at history.

Our children, when grown, may indeed choose new paths and develop their own new “norms”, rules and traditions if they wish. But humans are relatively uncivilized when born, and must learn somehow how to behave properly in society, with adequate respect for the people who’ve preceded them, who often endured agony and anguish to establish the very patterns, laws, rules, norms and traditions every child seems genetically programmed to challenge and overturn.

Raising twins...think about rules ahead of time



My twin girls, Samantha and Jessica Early were on the cover of your May, 1991, issue. In April, 2007, the twins will turn 21!!! With a lot of hard work and a lot of luck, I raised two great gals. The best advice I can give to anyone just starting out as a MOT is to think about the rules you want to set way ahead of the day you need to set them. Think about what rules you’ll have for chores, dating, grades, friends, driving, etc., now when the kids are just babies and can’t talk back, challenge you or break you down.

You can always make adjustments.
Teresa Graven
Toledo, Ohio
Via email

Editor’s note: Teresa, thank you so much for your years of loyalty. What beautiful girls! Good advice, too.

Setting rules for your little twins

I read with great interest your editorial in the most recent issue of TWINS™ Magazine regarding parenting (Editor's Letter, Nov./Dec., 2006). When we evaluate and treat children with disruptive behavior and attention difficulties, impaired parenting approaches consistently emerge in my patients. Even in cases where a distinct biological element is primarily implicated in symptoms (such as bipolar disorder, ADHD, or autistic spectrum disorders), less effective parenting styles are always a problem that makes the child's condition worse.

Overly permissive parenting is usually a result of inadequate experience and knowledge, emotional immaturity, reaction to an overly strict childhood, failure to model ideal behavior, or a general inability to maintain limits and boundaries. Regardless of origin, the absence of clear rules and consistent structure can cause or worsen several problematic behaviors you've mentioned. For example:

The R-Rated Child. Children attaining exposure to more "adult" material behavior may behave crudely, engage in early sexual behaviors, experiment with alcohol and drugs, address conflicts with violence, and falsely glorify criminal behavior. Younger children do not possess the cognitive and emotional capacity to fully process these exposures.

The Manipulative Child. All children test the limits placed on them. This is what children are supposed to do as part of their developmental growth. Rewarding (often inadvertently) their attempts at negotiations and their tantrums, and being inconsistent in applying rules effectively trains children to continue their maladaptive behavior. This can be especially pronounced with public displays and "shaming" their parents.

The Hedonistic Child. A healthy work ethic, sense of responsibility, and moral values are much more difficult to instill if, from the child's perspective, causes are divorced from effects. It's often easier in the short term for a mother or father to deal with a child's mess or mistake by oneself. But the implicit message is to teach your child good avoidance techniques. Additionally, while constantly modeling ideal behavior for your children is an admittedly tough and draining task, it is a necessary one.

The Willful Child. Children may show less regard for social and legal customs if parents themselves routinely ignore laws or customs, and children simply copycat their parents, or if they are also subject to capricious punishment or even the lack thereof. A common difficulty is separating the emotional content (anger) from the punishment (severity and type). Letting anger guide discipline may often teach a child that "might makes right."

Your boss analogy is an excellent one. Effective bosses know that crossing the line of friendship can create difficult or compromising situations. Employees work best when they clearly understand expectations and rules. They greatly appreciate the fair and consistent enforcement of those rules. (As many may notice, workplace dynamics often echo family dynamics.) Providing a

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strong and stable structure within which children can grow may provoke immediate grumbling, but children will ultimately respect parents who are good “bosses.”

The balancing act with being loving and nurturing is a little more tricky, but achievable. For some people, however, the use of the term “strict” may have negative connotations—to some, this means taking a rigid, unyielding, and stifling parenting approach, perhaps even bordering on being overly critical or obsessive or applying excessive disciplinary measures that might be construed as punitive/ retributive.

I think sticking with the good boss analogy also works well here. A good boss sets clear rules and regularly and fairly applies them, but can also create a supportive and collegial environment by making the rules and consequences fair and appropriate. For children, this may also mean regularly revisiting the rules and expectations according to their developmental level.

Such a parenting approach requires significantly more work, planning, constant vigilance, and regular review, but can encourage the values a parent holds dear, instill a sense of respect and responsibility, foster a relationship built on love and trust, and prevent more serious behavioral problems and later work attitudes.

Kai-ping Wang, MD
Child & Adolescent Psychiatry
Hudson Psychiatric Associates, LLC
Hoboken, NJ
Via email

“TWINS is outstanding!”

I’ve been a subscriber to TWINS™ for the last three years, my wife and I. I just got your latest issue. You guys have an outstanding product. There are a lot of things we read, my wife and I, related to our children—our twins and our older 5-year-old son. We have two beautiful twin boys turning 3 this month. Your magazine has been not only a crutch to lean on, but also an outstanding source of information and general knowledge for people even without twins. I felt obligated as I am sitting here in my office browsing through the issue with my coffee, to mention this to you, that you’re doing a great job. We’re one family that definitely appreciates what you’re doing. Thanks much.

Frank Matula
Tinton Falls, NJ
Via phone; voicemail message

Potty Seat Users BEWARE!

We are in the beginning stages of potty training our 2-year-old twins. Because they love Dora the Explorer, we decided to purchase the Dora soft potty seat manufactured by Ginsey Industries, to help with the transition. During their introduction to this, the girls were very interested in the soft potty and enjoyed carrying it around, placing it on the toilet, sitting on it—everything except actually using it!

In my presence, on September 13th, my younger twin slipped the soft potty seat over her head and it would not come off. The

thickness and composition of it kept it from being cut off or broken. We had to soap her head and even then it was extremely hard to remove.

As a result of the struggle, the top of her ear and skin above her ear became spotted with purplish-black bruises. Not only did this cause her physical harm, she was so traumatized by the event that she now wants nothing to do with potty-training or the soft Dora seat.

I wrote to Ginsey Industries, as well as the Consumer Product Safety Commission, suggesting that a modification be made to the hard plastic inner ring. If this ring had been more flexible, we could have removed it more easily from my daughter’s head. Although Ginsey promptly contacted me, I was politely told that no improvements would be made to the seats, and that this was the first complaint they have ever received regarding such a situation. I want to make other parents aware of the dangers of this product.

Wendee Gabby, Mom of Kennadee and Kassidee
Via e-mail

In love with ‘*Twice the Love*’

I am Marla Feldman, a contributor to the book “*Twice the Love*” (page 139 is my story). Due to “twin brain”, I have forgotten where I placed the copy of the release form.

It just so happens that the “*Chicken Soup*” series is doing a book on adoption. I have a rewritten/different version of the story with a different title; it focuses on the exact day we adopted our twins. It tells about only the exact moment I laid eyes on them. This is a writer’s technique used in school (I am a teacher) of zeroing in on an exact moment and making it more detailed. I would like your permission to submit this story. *Chicken Soup* books take a minimum of 2-3 years before being published. The deadline for submission is June 30, 2007, so publication more than likely would not be until 2009 at the earliest.

By the way, I love the book “*Twice the Love*.” And you know when I get to read it? When I am on “sentry duty” each night—in order for my son to stay in his room, I have to sit in the hallway until he falls asleep. So I have taken up reading, and have read several books this way!

Marla Feldman Vecchio
Via email

Editor’s note: Permission granted. And thanks for your glowing review of our latest addition to the literature for families with multiples!

‘*Twice the Love*’—uplifting, inspirational!

Just a note from the U.K. to thank you so much for the honor of being associated with your book *Twice the Love*, which I received from Susan Heim. As a parent (not of twins—just one son already has me running in circles!) I found the stories tremendously touching and inspiring—a tribute to your own and to Susan’s skill in selecting them.

As sometimes happens, it has been a while since I drew the cartoons, so having forgotten them in the meantime, one or two actually made ME smile! They are presented as part of such a

generally uplifting and inspirational volume.

Thanks again for allowing me to be part of the book, affording me the chance to work with my best transatlantic friend and colleague. (Congratulations, too, on picking Susan Heim to edit the project—even if she wasn't a friend, I'd marvel at her talent and productivity while parenting four kids!)

I wish you both every success with this and all of your current projects

John M. Byrne
London, England
Via email

Happy contributor to 'Twice the Love'

I am sorry it took me so long to write you, but you know how busy things can get at home. I wanted to thank you for including my article in your book. You have no idea how excited I was to have the article even published in the magazine. Then to see it in print in a book—me, actually listed in a Table of Contents! Well, it sounds silly, but I was just so happy to see one of my dreams come true.

I wanted you to know how much it meant to me.
Jill Riddle
Via email

M&Ms are still a mystery

I have (dizygotic/fraternal) twin 5-year-olds, Abigail and Ashlynne. I am writing to tell you some of our experiences having a child with allergies. My daughter Ashlynne is allergic to peanuts. Abigail has no allergies that we have discovered. Ashlynne was diagnosed with the allergy at 2 1/2 when she had a severe anaphylactic reaction to her first peanut butter exposure.

We now have to watch everything that comes into our home and into our mouths. Her allergy is only to peanuts, but her allergist warned us against giving her anything with tree nuts as well, because apparently some products will have peanuts in them in addition to tree nuts as a cheap filler—these include ice cream and bakery items.

Obviously any label that states the product contains nuts, or was processed on machinery or in a factory that processes nuts, has to go back on the shelf.

We have to carry around an Epi-pen and a supply of Benadryl wherever we go. When we go out of town, we make a point of finding a hotel near a hospital and fire station, should we need an ambulance. Eating in new restaurants is an ordeal, because often we find that the waitstaff is unwilling to make sure a dish doesn't contain nuts or any cross-contamination happening in the kitchen. Now we usually speak directly to the manager as soon as we arrive at a restaurant and explain the severity of the allergy.

Catherine and Benjamin, 8 months



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So far we have not had any problems.

Ashlynn's twin Abigail, as I said, doesn't have any allergies, but is limited in what she eats as well, because of the severity of Ashlynn's allergy. The holidays were difficult at first, just because of the very limited variety of candy and chocolate available to us. The problem is mostly that although a candy itself doesn't have nuts, it is all made in the same facility. My husband now makes chocolate bunnies for them on Easter. Fortunately, most neighbors know of her allergy and have "safe" candy available for them when they go trick-or-treating on Halloween. That really helps—I hate having to take away their candy as it comes in the door!

As far as the emotional impact of Ashlynn's allergy, I don't really think it bothers them at all that there are foods they can't have. Abigail is wonderful about not making her sister feel bad when there is food she wants but can't have. I personally have some guilt, because when Ashlynn had her first reaction the doctor in the emergency room said studies have shown that the more peanut products a woman eats during her pregnancy, the more likely there will be an allergy.

Because of having twins, my doctor had me on a special diet and I ate peanut butter every day toward the end of my pregnancy as part of my evening snack. I felt terrible when the ER doctor told me about eating peanuts during pregnancy and how it might translate into an allergy for the baby or babies!

"What a bad mother I am, I made her this way!!!!" I thought, initially. However, the allergist reassured me there was no basis for the ER doctor's statement, and there was nothing I did wrong to make her have a peanut allergy.

I choose to believe that, but I do still feel guilty sometimes, like when my girls see all the other kids get a free cookie at the grocery store, but they can't have one because of the potential cross-contamination. We got a funny look from the person behind us in the check-out lane one day, because the girls asked what a particular candy was. I told them it was M&M's, and they both asked "What's an M&M?". It occurred to me at that point how much they don't and can't try because of the allergy.

Ashlynn's allergist said there is always a chance she will outgrow her allergy, of which I am hopeful for her sake. She has (antibody levels in) her blood checked each year—this past year the allergist said her (antibody) levels aren't improving, and (not to) bother checking them for another two years at least because they are so elevated.

Holly M. Webb
St. Louis, Mo.
Via email

Editor's note: This letter is particularly important because of the mention of eating peanuts (or any food) while pregnant that might trigger allergies in fetuses and carry over into their lives after delivery. We learned from several physicians that clinically, this theory of generating allergic reactions while pregnant is not borne out by research. We've received dozens of excellent letters from parents of twins about one or both of their kids having food allergies that give the kids (and their parents) fits. We've

scheduled a major article on food allergies in TWINS in the May/June, 2007, issue. Stay tuned.

Out and about, with food and EPI pens

I was excited to see a letter about twins with allergies. I have 4-year-old twin girls with severe peanut, egg, and milk allergies. A year and a half ago we took our daughters to National Jewish Medical Center (Denver) to see why they had such bad eczema. We had already figured out they had allergies, but did not know the extent of it.

Milk just touching their skin is enough to cause hives. Now, we pack food almost everywhere we go, read labels every time we grocery shop, and carry Benadryl and EPI pens with us. At times it can feel overwhelming.

Our daughters began preschool this year. I made sure the teachers were informed about the girls' allergies and provided information on what to do if the girls have a reaction. EPI pens and Benadryl are kept in the classroom in case of emergencies. They only eat what I pack for them and sit at a separate table at lunchtime (too much spilled milk!). I am grateful they are twins and always have a friend/sister to sit with!

Also, I attended a food allergy support group run by Linda Coss, author of the book "How to Handle Your Child's Life-Threatening Food Allergies." At the group was another mother with a set of twins who also had matching food allergies. Neither of us know if our twins are identical or not; we just know that each set of twins has the same food allergies.

I have learned a lot. I've found cake and cookie mixes free of peanut, milk, and eggs, and now ask at restaurants about how their food is prepared when we eat out. Many places will use all clean pans, make sure they use peanut-free oil, and in general help us as much as they can.

I'd love to learn more about twins and food allergies also. What are the odds of siblings having the exact same allergies unless they are identical twins?

Patricia Fournier
Via email

All OBs should know about Dr. Luke!

I noticed in a recent TWINS e-newsletter the info about Barbara Luke. Her advice is fabulous. I followed her suggestions for nutrition, vitamins, minerals, etc., from her book and was able to deliver my twins full-term—healthy and happy.

I know TWINS Magazine is a great place to share her information because we all care so much about twins—but most subscribers already have their babies. Is there a way to get her advice out to newly pregnant mothers of twins?

My doctors didn't know about her information. That includes at least six doctors I asked about nutrition and special advice for twin pregnancy. The only reason I got the info was my Mom bought me all the books she could find on twin pregnancy. I read Dr. Luke's book and promptly called her and got specific advice.

mail box

Anyhow—just a thought for you. I think all OB docs should know about Luke's book and suggestions, and (should) steer twin pregnancy patients to (this book) as soon as the multiples are discovered! I know several other twin moms who delivered early—they didn't get specific advice to "eat early, eat often" and take supplemental calcium, etc.

I also would like to know if you are aware of a resource on thyroid conditions as a result of pregnancy? My doctor thinks I might have an unresolved thyroid issue. I'd love to find the national resource on this (much like Luke was my resource for my pregnancy!).

My twins are almost 2 (Jan 5, 2005 birthdate) and are doing really well and becoming small people—not babies! Thanks for your magazine. I get useful information (from) every issue!

Kathryn Grohusky
Frisco, Colo.
Via email

Editor's note: Our Jan./Feb., 2007, issue contained a major article about Dr. Luke and her continuing research at the University of Miami. She has generated documentation that her recommendations and regimen really works...the essential factor appears to be adequate (rapid) weight gain during the first 28 weeks of pregnancy when expecting multiples. We're currently trying to develop a program to inform more OBs across the U.S. of Barbara Luke's regimen for women pregnant with multiples, because all indications are that few OBs and family physicians adequately communicate the need to eat 3,000 to 5,000 calories a day when women are pregnant with twins. In the meantime, we ask all of you to spread the word and tell everyone you know to read her book, When You're Expecting Twins, Triplets or Quads: Proven Guidelines for a Healthy Multiple Pregnancy by Barbara Luke, ScD, MPH, RD & Tamara Eberlein (HarperResource, \$19.95). Available at the TWINS Bookshelf at http://www.twinsmagazine.com/when_expecting_twins_triplets_quads.html. I've asked our medical resources at TWINS for information about the thyroid condition you mention, KathRyn, and we'll address that in an upcoming issue.

Husband gets confused...Help!

Thank you for the e-Newsletter. It was great to take time from my busy workday and read about upcoming articles in TWINS Magazine. I have identical twin boys, 3 years old, and I am EXHAUSTED!!

Please keep the good advice coming!

P.S. How can I keep my husband from asking my boys "which one are you?"

Carmella Cofrancesco
Via email

Editor's note: Try color-coding the boys (t-shirt, clothing pieces, a pin on each, etc.) so your husband can quickly tell them apart—he's not with them as much as your are, and therefore, doesn't find it as easy to tell which is which. Believe me, a lot of moms and dads of twins who look a lot alike have this problem. It'll be a lot easier on you, too, Carmella. Lots of parents have each twin always wear an outfit—or at least one piece of clothing—of a certain color. Parents sometimes leave the choice of "personal color" up to each child, if they're older like yours are...so each boy can choose his favorite and be happy wearing it. Sometimes the



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color relates to the kids' names...blue for Brendan and gold for Gregory; or lime for Lisa and cerulean (blue) for Carrie. It'll help teachers or day-care providers tell them apart, too, when that time comes.

Twinstuff: ID twins x ID twins + baby twins

As Dan Blitz mentioned in his letter in the Jan./Feb., 2007, issue, there is a situation where ID twins married ID twins and one couple had ID twins. Craig and Mark, are the creators and administrators of www.twinstuff.com. They married Diane and Darlene, respectively. Craig and Diane have ID twin boys and another son. Mark and Darlene have two singleton girls. I remember seeing something about this also within the past year, although I do not remember where.

Christa James

Via email

The story involving two sets of identical twins who married, and one couple gave birth to a set of identical twin babies appeared in Nancy Segal's recent book, *Indivisible by Two*. I'll bet you received thousands of phone calls about this question. I'm sure lots of people have read Segal's fascinating book.

I'm a subscriber and I love your magazine!

Carol Galindo

Gambrills, Md.

Via phone; voicemail message

Editor's note: Thanks so much, Carol! I couldn't locate the story in our TWINS archives, but you solved the mystery. Nancy Segal's book, Indivisible by Two, is available on the TWINS Bookshelf for \$24.95 at <http://www.twinsmagazine.com/psychology.html>.

Anybody experienced rhabdomyosarcoma?

I am writing for my friend and neighbor who has identical twin girls, 2½. One of the girls has been diagnosed with rhabdomyosarcoma. Since the girls are identical there are concerns whether her sister will also be affected with this. Has anyone ever had any experience with this, or know if this is a possibility or not?

She is still breastfeeding her twins and is wondering if, once the chemotherapy begins, can the affected twin secrete any of the chemicals through her saliva onto the breast? If so, can this be ingested by the other twin? Does she need to wash her breast area before nursing the other twin or should she just be weaned? Any suggestions on this?

Her doctor has not heard of another twin being diagnosed with this as well, but we are in a small area so who knows? We live in Peru, NY, which is about an hour from Lake Placid, NY, Burlington, VT, and Montreal. My neighbor is seeing a physician in Burlington, which has the closest children's hospital to deal with situations like this.

Could you please post this for me or run it in your magazine to help us find the answer. We value the information from your magazine as we both have sets of girl twins and know that you might be able to help with this situation.

Kim Chamberlain

kchamberlain@avcsk12.org

Via email

Editor's note: We sent this message off to our panel of medical experts for their suggestions. One physician said our friend should definitely consult a pediatric oncologist. She might want to ask her doctor for a referral to a pediatric geneticist as well if there's one in her area. The best person to ask about the breastfeeding question would be the oncologist. This TWINS™ expert said she can't imagine chemotherapy chemicals passing to the other twin in the way described, but knowing the name of the particular drug would be helpful. "I'd fight like anything to continue such a comforting activity (breastfeeding) for both twins—the one with cancer needs the comfort, and the one without needs the reassurance of a continued close bond with mom and twin," this physician advised.

Another physician on our panel offered this information: An extensive search for information regarding the genetic susceptibility of twins and siblings to childhood cancer rhabdomyosarcoma revealed there appears to be no significant increased risk to a twin or sibling. The only genetic link I could find was in those causes of the rhabdomyosarcoma being associated with other congenital syndromes (such as Li-Fraumeni Syndrome or Beckwith-Wiedemann's Syndrome). A website link to help confirm this is www.stronghealth.com/services/cancer/aboutcancer/rhabdomyosarc.cfm.

An experienced lactation consultant with whom we frequently consult said she tried to find some studies on the transfer of toxic chemicals from baby to mom and her breastmilk, (or from mom to baby) but hadn't found anything. She offered, "I know when I take care of cancer patients on chemo, I have to double-glove when I touch any bodily fluids, including saliva. Just to play it safe, I'd probably recommend that this mom give her daughter with rhabdomyosarcoma pumped breastmilk, and nurse her other twin at the breast until chemotherapy is complete. That way, both twins get the benefits of breastmilk without worrying about contamination from chemo."

TWINS for the blind; saving lives

I need to know if the TWINS Magazine electronic subscription delivered via the Internet is readable by an automatic voice-reader. I am a reference librarian in Los Angeles, and several women who come to our library who are blind are having twins soon, and I want to refer them to TWINS Magazine. They are only able to read magazines that can be read by an automatic reader.

I am a mother of twins (my daughters Margaret and Georgina are now 24 years old) and I want to thank you for your wonderful magazine. TWINS saved my life many years ago, and I still think so highly of your excellent publication. Not only did I use the magazine constantly when my kids were young, but I found myself turning to it years later as well when they were adolescents.

Let me tell you how TWINS literally saved my life years ago: The magazine had a very detailed, graphic article in the 1980s about tummy-tuck surgery for women who'd given birth to multiples and had a lot of extra skin. The article went into a lot of detail, and convinced me I didn't want to go through the agony of that surgery, even though I had been tempted. If the article had been any less detailed, I wouldn't have known what the surgery

involved. You probably need to run an article on the topic again because I understand more women than ever are having that surgery now.

Mary Jane Kayes

Via phone; voicemail message

Editor's note: Indeed, the electronic version of TWINS™ is readable by an automatic voice-reader for the blind. And we're working on another story right now about tummy-tuck surgery for moms of twins-and-more who dream of regaining their svelte silhouettes.

My experience exactly!

With tears in my eyes, I am writing to thank you and Susan Carney from the bottom of my heart for the article, "It's too early!" in your Nov./Dec., 2006, issue. The author's experience mimicked my own almost exactly!

My twins (Shane and Dylan, now 9 months) were also born three months prematurely (at 28 weeks' gestation). Susan's very honest description of her thoughts and feelings during the experience of giving birth and leaving her babies behind in the NICU took me right back to last spring when I lived through it myself. She left no stone unturned as she reported so candidly the various ups and downs, the feelings of helplessness and isolation, the depth of concern and anxiety...wow!

It was surprisingly reassuring to know another couple lived

through the same ordeal we did. I had been planning to write my own story, to help people understand what I went through, but now I'll just hand out copies of Susan's piece—she is truly a gifted writer.

Like Susan, both of my boys have defied the odds and are healthy and strong, without any sign of developmental challenges. The only remaining reminder of their prematurity is high susceptibility to contracting RSV, a virus that may appear as mild cold symptoms to a healthy adult but could easily prove fatal to the underdeveloped lungs of a preemie. We only leave the house for doctor appointments and have strict limitations on visitors.

Which brings me to my final point: I love TWINS™ Magazine! I get so excited when a new issue arrives in the mail! I don't know many mothers of infant twins, so the magazine really helps me feel part of a larger community. During the three months after my boys' birth, between visits to the NICU, I pumped breastmilk every 2½ hours (still am, actually!). I spent much of my pumping time reading issues of TWINS™ cover to cover, including the ads. I've ordered several books from the TWINS Bookshelf to get me through this winter. Thank you for helping me feel connected!

Amy Edwards
Sacramento, CA
Via email



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THE GIANT WHEEZE:

Is it asthma?

By Jane Polizzi

My daughter, Jessica, was diagnosed with asthma at age 3, prompting me to do a lot of research into causes and treatments. I've talked with many other parents of twins whose children have asthma. Their experiences and advice helped me a lot—I'm hoping by sharing information about three families we can help others, too.

Jessica:

"My daughter is having difficulty breathing!" I told the pediatrician on the phone, trying to remain calm. "I can see her belly moving with each breath from across the room!"

I had treated my toddler twin for cough and cold. Her labored breathing continued. Then she vomited mucus. The doctor directed us to the closest emergency room where we were guided by a triage nurse. I wheeled Jessica and her twin brother in their double stroller past waiting patients at the ER. Jessica was lifted onto a table and started on intravenous fluids, oxygen and medications. Her airways were so constricted she could no longer cough and one side of her lungs was already shutting down.

My husband sped to meet us after running a mile in pouring rain to his car parked at the U.S. Open golf tournament in Bethpage, N.Y. Doctors told us Jessica would be transported by ambulance to pediatric intensive care at a sister hospital better equipped to meet her needs.

Jessica had contracted RSV at 6 months and already had been diagnosed with pneumonia twice, once at 13 months and again

a month before this event. Now in ICU, her pediatrician was reluctant to diagnose asthma. He called her condition reactive airway disease. Our son, Jessica's twin brother, has shown no signs of asthma symptoms that might be red flags for asthma.

Darren:

Darren Lage contracted RSV at 13 months. He experienced five cases of severe croup within his first year. He's had nebulizer treatments, steroid injections and other medications. Darren also suffered a "severe respiratory response" when given antibiotics for strep infection.

Darren and his twin, Sarah, just turned 5. Sarah is symptom-free. Darren, meanwhile, sometimes "grunt breathes" and is easily winded when active. His mom, Cheryl Lage (author of the book *Twinspiration*) wonders when a child can or should be "officially" diagnosed with asthma.

Cheryl wonders if Darren will be diagnosed with asthma at his next well-child visit. She intends to proactively question her pediatrician about Darren's health history. Cheryl was told Darren's respiratory challenges may be a byproduct of his slight prematurity and that he might outgrow them. Although allergy medications helped Darren last summer, Cheryl headed into the winter season trying to anticipate the usual round of colds and flu.

Matthew and Isaac:

Matthew and Isaac Dunlop, 2, are identical twins and survivors of Twin to Twin Transfusion Syndrome (TTTS). They've

Eden, Erin and Emma, 2 1/2 years



ASTHMA'S RED FLAGS

- Persistent coughing
- Wheezing (whistling or labored breathing)
- Recurrence of deep coughing or "bronchitis" with every cold
- Coughing (especially at night) that lingers for weeks
- Shortness of breath around allergens or during exercise
- Nighttime waking from cough or shortness of breath
- Vomiting mucus
- Repeated pneumonia diagnoses

both been treated for asthma with medications since being hospitalized at 4 months. Their brother, Dominic, 3, also has asthma, but their older sister, Samantha, doesn't.

Having some experience with Dominic's asthma helped their mom, Melissa Dunlop, cope with the twins' asthma, though each child had different experiences. At 2, Isaac is doing well on Flovent, a leading asthma med. His twin, Matthew, struggles—the drug is ineffective for him.

The twins also have esophageal reflux. Although Isaac's reflux is almost fully resolved, Matthew's has worsened during and after a recent bout with pneumonia. After a round of steroids and antibiotics, Matthew's mom took him back to the doctor for an adjustment in medications.

These four cases in three different families give a clue to the difficulties of dealing with constant respiratory problems in

babies. They also indicate how diverse are symptoms and treatments for different children, even when they're twins.

Although our daughter Jessica's asthma remained undiagnosed until much later, hospital staff (respiratory therapists, nurses, medical residents) termed her condition asthma early on, spurring me on. Asthma, I learned, is typically triggered by allergies, exercise, cold viruses, sudden temperature changes, smoke, excitement and stress, and heartburn.

Jessica's breathing problems and hospitalization probably resulted from a cold virus. However, my husband has numerous allergies that are sometimes severe and he had childhood asthma as well.

Jessica returned home with a nebulizer for inhaled medications several times each day. A month after her hospitalization, we saw an asthma/allergy specialist after being referred by our pediatrician. The specialist disagreed with Jessica's pediatricians, who had taken her off all medications by then. Her airways remained swollen from the hospital episode, and he prescribed daily maintenance

drugs to minimize inflammation. He also prescribed Singulair and Pulmicort twice a day by nebulizer, as prophylactic (preventive) treatments, and provided a "rescue" drug, Xopenex, for more severe coughing and wheezing. The specialist tested Jessica for allergies—fortunately, Jessica shared only her dad's dust mite allergy, not his full array of seasonal allergies. Jessica's earlier pneumonia diagnoses were very likely asthma-related events, the specialist told us. He therefore diagnosed asthma.

Two family friends—an emergency room pediatrician in Orlando, Fla., and a physician's assistant in Warwick, R.I.—listened to my recap of Jessica's medical history and advised us to follow the specialist's advice. Months later, at a pediatric asthma program given by North Shore/Long Island Jewish-Huntington Hospital's Dolan Family Health Center, I learned about the National Heart, Lung and Blood Institute's (NHLBI) Expert Panel Recommendations for diagnosing and treating asthma (www.nhlbi.nih.gov/guidelines/asthma/index.htm). I was

pleased to know the specialist I consulted for Jessica was following published protocols with Jessica's asthma action plan. (Earlier, Jessica's hospital discharge included instructions for near-term care, but she lacked any type of longer-term plan.)

It's four years later and Jessica is thriving. She is a fantastic swimmer, a great student, and has her asthma well under control. We reduced her dose of one maintenance drug last summer and we're hopeful she'll stay at the lower level throughout this cold season.

Asthma rates & genes

Nationally, the rate of asthma diagnosis has dramatically increased. Some 9 million children 18 or under (12%) have asthma. More than 80% of asthmatics have their first episode by age 5. Children under 5 are the fastest growing group of diagnosed asthmatics.

There is definitely a genetic link to asthma, but causality goes beyond genes. Fully 6.5% of families in which neither parent has asthma have an asthmatic

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child. In families where one parent has asthma, 28% have a child with asthma. In families where both parents have asthma, 63% have at least one child with asthma.

Twin studies have long confirmed the genetic aspect of asthma. If an identical twin has asthma, for example, the co-twin has an 80% chance of being diagnosed with asthma. When a fraternal twin has asthma, the chance of the co-twin having asthma is between 5% and 20%.

A recent study of preschool 4-year-old twins concluded asthma is 68% due to heredity, 13% due to shared environment, and 19% due to unshared environment. Environmental factors such as allergens have long been known to contribute to asthma; this study clearly showed the strongest factor is genetics.

In recent years researchers identified three specific genes contributing to asthma—PHF11, DPP10 and ADAM33. Geneticists hope to crack the asthma causality code, paving the way for a cure.

A physician's advice

Our family's specialist, Bruce Edwards, MD, pediatric asthma specialist, Plainview, N.Y., advises parents to consider whether their children with recurring deep coughs and respiratory ailments might have asthma.

Persistent, chronic coughs are the leading warning signs. It's normal for a child to cough for a few days with a cold. Coughing that lasts two to three weeks, or repetitive cases of bronchitis or pneumonia (i.e., four times or more during a single winter season) warrant consultation with a specialist.

RSV, if well treated and managed, doesn't necessarily mean asthma will follow. Croup, an illness of the upper airway (e.g., larynx, voice box, upper area of the trachea) if properly diagnosed and treated, doesn't necessarily mean asthma will follow.

Asthma primarily involves the lower airway and the lungs. Sometimes asthmatic coughing (deeper in the airways than croup) can sound like croup-coughing, making it difficult for parents to tell the difference. In any event,

repetitive instances of deep coughing aren't normal and should be considered potential asthma cases.

Premature infants, particularly infants born extremely premature, may have lung disease associated with prematurity. Babies who were on ventilators or had significant respiratory distress may develop scarring of the lining of the lungs, or have lungs that aren't healthy. Respiratory difficulty during infancy and toddlerhood isn't the same as asthma. Some children outgrow these complications, while others may develop



chronic problems—it depends on the child.

Reactive airway disease and airway reactivity are other terms for asthma—they're interchangeable. Asthma is recurrent—three or four incidents of wheezing are usually necessary for a physician to effectively diagnose.

Specialists and medications

Patients are usually referred to a pediatric allergist/asthma specialist (like Dr. Edwards) or a pediatric pulmonologist by their family practice doctor or pediatrician. Pulmonary function tests are helpful in diagnosing asthma, but are usually reserved for older children (generally age 6-7+, but a mature 5-year-old may be able to complete the test). Pulmonary function tests require a forceful, sustained breath into a tube. For younger children, parent information about frequency and severity of symptoms, and conditions under which

symptoms occur (allergens, cold virus, exercise, etc.) is used.

Medications for asthma treatment and prevention are complicated, but highly useful. Parents need to know the pros and cons of each possible treatment, side effects (often minimal, but important to understand) and benefits.

Oral prednisone is very effective against asthma symptoms, but is an oral steroid that produces long-term side effects most physicians and many parents prefer to avoid. If a physician prescribes more than three or four courses of prednisone during a year parents should ask why this treatment is being used so often, and ask about other options.

Inhaled corticosteroids have fewer side effects because they are inhaled (i.e., considered topically applied) and not ingested as oral steroids are. Inhaled corticosteroids can be used in many different dosages or can be used in combination with one or more other drugs in a treatment plan.

Nebulizers are the best method for delivering asthma medication to young children (from infancy to school-age). Nebulizers deliver medicine directly to the lungs very effectively. They take about seven minutes to use and are seldom portable. Usually at about ages 6-9, children with asthma can begin to use inhalers and spacers for convenience.

Childhood asthma tends to become less severe over time, as children age, studies show. As many as half of children with asthma show no symptoms by adulthood. This may have something to do with the maturation of the immune system, since most asthma in infants and children is induced by infection.

"Most kids who have infection-induced asthma, as time goes by, do better," says Dr. Edwards. "I'm not going to say they become totally asthma-free, but a lot of them—many of them—do very well...because they just get fewer infections." ♥

Jane Polizzi is a freelancer in Northport, NY, with two children, 6 and 7. Her sister is a mom of very busy twins. Jane has an MBA in finance, is a retired banker and a former teacher.

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Taming the ME-Monster

Have you ever heard the lyrics of a song, and thought, “Wow, this is the story of my life!”? A popular tune released in the ’90s certainly seemed to tell the story of most twins I know—the chorus was even repeated twice—“It’s just me, myself and I.”

How creative—your young twins’ innermost thoughts put to song. Think back to your twins’ first expressions of vocabulary. “I want.” “Give me.” “Mine.” As your kids grow and develop, their view expands and the realization sets in: “Gosh, what a surprise! The world doesn’t revolve around me after all!”

But this life lesson sometimes takes quite a while for kids to learn, and even longer for them to adjust. Can we help twins come to grips with this realization, and lessen the shock? Is there a “best way” to tame the ME-Monster?

Gone are the days when children automatically respect their elders. In some homes, parental respect seems a thing of the past as well. Teachers have lost respect for their students and students for teachers.

Yet, teaching respect is a lesson we can’t afford *NOT* to teach our children. Teaching respect, in fact, tames the ME-Monster. Respect means to have regard for others and show consideration and appreciation for people and things around you, by word and deed. So, how can you teach respect in practical ways? By role-modeling. Kids learn most naturally by observation—your behaviors, by default, will eventually become those of your twins.

Teaching manners and polite behavior ingrains respect in your children. The most powerful tools in teaching your twins to be respectful are these: Teaching your twins to say “Please” and “Thank you” as first words. Teaching your twins to listen to others when they speak. Teaching your

twins to keep their hands to themselves. Modeling behaviors such as holding the door open for other people.

Teach your twins that using unkind words is unacceptable—this also roots your child in respect. So often, teachable moments arise very naturally in the lives of young twins. Don’t let a single teachable moment pass without using it to the fullest. When Alex calls Max “stupid,” resist the urge to scream at him. Instead, try, “Alex, that word is unkind, and in our home we use only kind words.” Then, hold him accountable for his actions by guiding him towards an apology to his brother.

Teaching your twins to handle disagreements by role-modeling appropriate behaviors and problem solving is another opportunity to demonstrate respect. “We don’t grab toys from our brother; we need to ask for a turn when he is finished.” “Let’s see if we can get something to trade.” Equipping your twins with practical problem-solving skills helps them develop respectful relationships with each other, with older or younger siblings, and with friends.

True freedom comes from having parameters

Establishing boundaries and expectations teaches children respect for authority. If your twins don’t learn to heed to your standards, how can you expect them to adhere to the standards of the world?

In today’s world, children seem to have an increased sense of entitlement. Entitlement is when a child expects to get things just because they exist. When children grow up believing things should be handed to them on a silver platter, just because they are alive and deserve it, they have a tough time later in their lives. Feeling “entitled” is very destructive, and prevents kids from maturing properly.



Blake and Ian, 6 years

There is a pretty simple explanation of how this came to be. Think about it. With credit cards, computers and FedEx, things “magically” arrive at our homes everyday. Gifts, toys, clothes, games—today, we can have everything delivered to our door. Our children grow up thinking everything, magically, arrives, because they seldom see any behind-the-scenes process: Mommy and/or Daddy working at their jobs, money being earned, money deposited in the bank, Mommy shopping online, Mommy paying for merchandise, and Mommy evaluating the cost of having products delivered to our home. They just see the “Voila! It’s arrived!” part of the process.

Teaching your twins about money is a great way to tame their ME-Monsters. Entitlement is much less of a problem when kids are taught they have to work for things. In life, there are many things people need to work for. As adults, if you want to own a house, you need to earn money and save to pay for it. We have to teach children the value of working for the little things so they can achieve the big things.

A good way to teach the connection between work and the things children have—and want to have—is by assigning your twins age-appropriate tasks from a very early age (putting their toys away, putting their dirty clothes in the hamper, help-

ing set the table, etc.) and rewarding them for completing their jobs. If your daughter wants a special toy, you can develop a plan with her to earn it. This teaches your twins the difference between earning something and receiving something—surely a great lesson to learn.

Tame the ME-Monster by teaching your twins to be generous and compassionate. How to teach these values? You can teach them that no matter what their circumstances are, there is always someone less fortunate than them in the world. For example, when Cassie complains, “I don’t like eggs” the opportunity presents itself to say, “I’m sorry you don’t like eggs, but I’m happy I can provide you with something to eat. Some children have nothing.”

This may spark concern or compassion in your child. How can you help those for whom you feel compassion? Act. How can you act? Be generous with what you have—whether it is little or lots. Maybe

each time your twins find loose change on the floor, they learn to put it into a special jar and you send it to a charity. Maybe you have your twins recycle their clothes and toys, for delivery to a shelter. You can model generosity by sponsoring a child, giving to Goodwill, and buying toys at Christmas-time for Toys for Tots. What great values to instill at a young age.

Teaching good sportsmanship is yet another way to tame the ME-Monster. How often do we hear that a winner never quits and a quitter never wins? I interpret that statement to mean that losing is inevitable. So how do we teach kids to learn to lose? We teach the value of good sportsmanship. Instead of asking “Did you win?” as the first question when your kid walks off the field, ask “How did you play? Did you try your hardest?” That is what counts. “Did you play fair?” “Did you shake hands at the end with members of the other team?” “Did you cheer on your team while

you were benched?” “Did you pass the ball?” “Did you listen to your coach?” “Did you have fun?” “Did you respect the referee?” “Did you take pleasure in your victory but not gloat when you won?”

If you can get your sons and daughters to a point where they can answer all of these questions affirmatively, you’ve taught them how to be good sports—and that is what counts in the end.

Your kids need to know there will be times when they win and times when they lose. It is important to learn how to do both with grace.

The ME-Monster resides in us all, to some degree. But teaching these lessons can keep it from rearing its ugly head destructively in the lives of your twins. ♡

Michelle LaRowe lives on the East Coast with the fourth family in which she’s helped care for twins. She is author of two *Nanny To the Rescue!* books and was named 2004 Nanny of the Year nationally by her peers.



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Mikayla and Madeline, 16 months

TWINS AND TOURETTE'S: when one twin has tics

By Deborah A. Ein

When one of my identical twin sons developed Tourette's-like tics, I looked to his brother and waited. After all, if this were Tourette's Syndrome, a condition known to be passed genetically, these boys of mine—developed from the same fertilized egg—must both have it.

The longer I waited, the more concerned I became. One school-age son had no tics at all, while the other's tics were increasing. I needed to research this, for my own peace of mind as well as to help my offspring.

Tourette's Syndrome develops in childhood and is characterized by multiple motor and verbal tics. Motor tics are brief, rapid, repetitive movements of muscles that are only partially under voluntary control. They can be "simple," involving individual muscle groups (eye blinks, head twitches), or "complex" (jumping, complicated motions of the trunk, flailing of the arms.)

My son started with eye blinking before his second birthday. Vocal tics can be simple noises such as throat clearing or sniffing, or more complex—words, phrases, even complete sentences.

If you're a parent who thinks your child might have Tourette's Syndrome, your worst fear is that he or she will start swearing. Indeed, Tourette's is sometimes called the "cursing disease." My husband and I worried about what casual conversations my son might hear and repeat. But statistics show that although 200,000 people nationwide are diagnosed with Tourette's, the socially unacceptable utterances (coprolalia) are extremely rare.

Causes of TS

"In most cases, TS is thought to be a genetic disorder, which is influenced by the environment," says Romaine Schubert, MD, Chief of Pediatric Neurology at New York Methodist Hospital in Brooklyn, N.Y. Oddly, in Dr. Schubert's 15 years-plus experience treating pediatric neurobehavioral disorders including Tourette's, she has never seen a twin or twins with the disorder.

However, a number of studies have been done on twins with Tourette's or Tourette's-like tics. Twins, in fact, are perfect for studying Tourette's. Many studies were done in the 1980s, with the goal of determining whether Tourette's is solely genetic, or

whether other factors (birth weight, stimulant medications for ADHD, autism, etc.) play a role in development of TS.

Dr. Schubert directed me to summations of studies at e-medicine.com: "Genetic factors are implicated in twin studies, which show that the ratio of concordance in MZ versus dizygotic twin pairs is approximately 5:1 (Price, 1985).... TS is known to be familial; prevalence in first-degree relatives is 5-15%, or at least 10 times prevalence in general population. ...Nongenetic causes also must exist, because discordant MZ twin pairs are known ... greater severity in twin with perinatal complications than in co-twin (Hyde, 1992)."

Interestingly, I'd had no perinatal complications with my boys. I carried them to term and delivered naturally. My affected son, born second, was larger at birth than his brother, checking in at 8 lbs. But he was in utero and in the birth canal 12 minutes longer.

I was attended at their births by my midwife, but the obstetrician on duty literally had his hand in the delivery, "turning" the second baby after the first was born. Hmmm.

Dr. Schubert says, "Most scientists believe TS is caused by dysfunction of [brain] circuits, but it has been difficult to prove this. Many neurotransmitters are involved, particularly dopamine, but it has been hard to pin down exactly

how they are involved. Dopamine receptor antagonists suppress tics while dopamine agonists (such as stimulants for ADHD) may make tics worse. Serotonin systems are probably also involved. PET, SPECT and MRI studies have shown involvement of many different systems without any clear answers."

In some cases, TS may have an auto-immune basis, Dr. Schubert said, "triggered by an excessive antibody response to infection, such as a streptococcal infection.

A challenge with TS is diagnosis. On the one hand, you may want a diagnosis for proper placement in school; but you don't want to label or medicate your child unnecessarily. Laboratory tests to diagnose TS don't exist, so the opinion of a clinician experienced in managing patients with TS is the only way to confirm a diagnosis. Diagnostic criteria include onset before age 18; the presence of tics for more than a year; a replacement of old symptoms with newer ones, and absence of other medical explanations for the presence of the tics.

If you're a parent who thinks your child might have Tourette's Syndrome, your worst fear is that he or she will start swearing. Indeed, Tourette's is sometimes called the "cursing disease."

Some TS children may have other neurobehavioral problems such as autism, obsessive/compulsive disorder, or ADHD. Also, tics tend to increase during emotional periods and may decrease during intense concentration on a task. Amazingly, tics may also disappear on a visit to the doctor.

Many cases probably go undiagnosed, since motor tics are often brushed off as something the child is doing to annoy others, and vocal tics may be misdiagnosed as allergies (repetitive coughing, sniffing, etc).

Tourette's Syndrome and tics are seen more often in males than females, who tend to have OCD (obsessive compulsive disorder) more often than tics. However, Dr. Schubert says most people now believe OCD is an alternate manifestation of TS.

Age of onset for TS and tics is usually 6 years with very few onsets beyond 13. The good news: in up to 70% of children with TS the tics significantly diminish or disappear by late adolescence.

Treating TS

Tourette's is most often treated with medication (neuroleptics, anti-psychotics), behavioral management, and counseling.

"I emphasize evaluation and treatment of the associated behavioral disorders and try to avoid treating tics," says Dr. Schubert. She uses medications only if tics cause physical discomfort (painful neck twisting, blinking interferes with reading, etc.) or embarrassment or lowered self-esteem for a child.

Dr. Schubert sometimes prescribes risperidone. "I might use neuroleptics for a few months and then try to stop. Alternative therapies reported to be effective include hypnosis and biofeedback, but I don't have any experience with that."

Some parents, myself included, find diet modification helps control tics. A proponent of this is Bruce Semon, PhD, Medical Director, Wisconsin Institute of Nutrition, board-certified psychologist, and PhD in nutrition. He describes a boy diagnosed with Tourette's (mostly facial tics), and experiencing side effects from medications including fatigue, mood swings, thoughts of suicide. He'd had TS symptoms "four years...and had suddenly become worse with coprolalia...saying four-letter words

Tic Toc: Our story

My son has not actually been diagnosed with Tourette's Syndrome. He has exhibited Tourette's-like symptoms, from slight to moderate, throughout his seven years. His identical twin brother has not shown any such symptoms. Living with his "affected" brother has been an experience—sometimes scary, sometimes hilarious—for the whole family.

My son's first symptoms, excessive blinking and widening his eyes, were exhibited at around 18 months. Our pediatrician dismissed these as ways of getting our attention. Okay, if I were a twin with an additional older sibling, I might look for ways to get Mommy's attention, too. So life went on, through potty training, through toddlerhood, pre-K, kindergarten.

When our twins were in kindergarten, we moved across town. I would hate to think the stress of uprooting from a familiar environment triggered new symptoms, but since then, it does seem like stressors bring on an increase in tics. This is when I noticed my son touching the wall, the table, the floor, anything twice or thrice before moving on. He also shrugged his shoulders and turned his head a lot.

I'll never forget the night my husband looked up Tourette's Syndrome online. There, on the home page, was a grown man exhibiting this classic symptom. "You gotta see this!" my husband exclaimed. Yes, it was our son, all grown up and bearded, craning his neck over his shoulder again and again.

About this time, my son started calling out my name or his brother's name in a chanting sort of way. I automatically answered, "What?" and he would say, "Nothin', Mommy." His brother found this very frustrating, especially at bedtime. Many nights, I had to send my chanting, grunting son down the hall to my bed.

My daughter, 10, in her room across the hall, wondered what was up with her brother.

During the day, the tics progressed to touching the floor, then licking that hand, even bending over and licking the floor. Horrified, I asked his teacher if he was behaving this way at school. She hadn't noticed anything, but once alerted began seeing some tics (thankfully, nothing the other 5-year-olds were noticing or teasing him about). His New Year's resolution that year, printed out on a paper that came home from school, was "to stop punching myself in the face."

At the beginning of first grade, I alerted his new teacher to the tics. She had seen some in the first few days, and said she'd keep me posted. As my husband and I packed for our first trip away from the kids (another stressor), I got notes from his teacher that he was distracting the rest of the class with his "noises." By the time we returned, it was time for Halloween and a few more notes from the teacher that the "noises" were "severe." I was about at my wit's end, but from what I had read, knew that he couldn't even be diagnosed until he had been vocalizing for a year. And even if I were to take him to the doctor, I dreaded my son being labeled or treated with meds.

Then, I found a website (www.nutritioninstitute.com) that recommended gluten-free foods for Tourette's, ADHD, autism, and a host of other conditions. I ran out to the store, bought gluten-free cereal, got back home, threw out the Halloween candy, and ... my son's tics disappeared so fast that his teacher wondered what had happened from one day to the next. I have never had to keep him on a strict gluten-free diet, but when I see the tics reappearing, I at least try to get him out the door in the morning gluten-free.

Also about this time, I watched the HBO special, titled "I have Tourette's, but Tourette's doesn't have me." I realized Tourette's kids are aware, if not totally in control, of their tics. So I had a talk with my son and suggested he "save" the tics as much as possible for home. That way, I can monitor the tics and it saves him all the embarrassment and self-esteem issues at school. I suspect we are not out of the woods yet, with Tourette's normally peaking in the teens, but I am thankful for how we are overcoming hurdles and living with Tourette's. And I can't help but love him all the more when he chants, "Nothin', Mommy!" I am saving that New Year's resolution of a couple of years ago and plan to take it out when he's 18, when we'll both have a good laugh.

—Deborah Ein

continuously.” Semon started an anti-yeast diet and nystatin to kill existing intestinal yeast. In four weeks, moods improved and he was off both medications. He still had facial tics, but no more cursing. A year later, his mother said motor tics dropped by about 95% and vocal tics by 98%. The few tics remaining don't interfere with this 12-year-old's life.

Researching this article, I searched for parents of twins or for adult twins willing to share their TS experiences, using online message boards for TS and for families with twins. What I learned was that families in the throes of TS may be either too tired or intimidated to talk with anyone but their doctor. Before long, their TS child is grown and the tics are a fading memory many parents don't recall; yet a sibling or other parent sometimes laughingly remembers all the details.

Other twins with Tourette's are out there, I know. I hope they contact us at twins.editor@businessword.com. Research helped me understand I should relax and enjoy the ride and monitor both sons for tics as they become teens. I now have the support groups and tools to deal with TS. As always, a little knowledge goes a long way. ♥

Deborah A. Ein lives in southern New Jersey with her husband, daughter, and twin boys. In 2004, she co-authored a book, *Birthdaze: Stories For Moms*, available through her website at www.writermomz.com.

RESOURCES

- HBO special: "I Have Tourette's, But Tourette's Doesn't Have Me"
- Wisconsin Institute of Nutrition, LLP (www.nutritioninstitute.com): All about treating Tourette's and other medical conditions with a yeast-free diet.
- Tourette's Syndrome, Now What? website (<http://tourettenowwhat.tripod.com>): Has a great message board
- Tourette's Syndrome Association: National voluntary organization with 35 chapters and 300+ support groups. Call 1-888-4-Touret (<http://tsausa.org>)
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When one twin is disabled:

HOW FAMILIES MANAGE DISPARATE NEEDS & NURTURING OF BOTH TWINS

By Dawn Zamanis



Parents who experience unmitigated joy and excitement when they learn they're expecting twins, then find themselves plunged into the depths of distress and weariness when one twin is born with a devastating illness or disability, while the other twin is perfectly healthy. They face an alarming array of troubling questions, not the least of which is financial burdens. But the childcare challenges—the physical requirements—are sizeable, as are the desire to satisfy the emotional and intellectual needs of two children who are often far apart in their capabilities.

Preparing for a shock; watching for trouble

The unthinkable news that one twin will be born disabled, critically ill, or mentally handicapped triggers a whirlwind of emotions for parents—ranging from fear and worry over the prognosis for their sick twin, to unfeigned joy that at least one baby is healthy. This roller-coaster of reactions swings wildly from that pint until long after the twins are delivered—elation one moment at the miracle of twin births to sorrow, anxiety and depression the next.

Many parents of a one-healthy-one-damaged set reluctantly admit experiencing some guilt, as well, as if something they did or didn't do caused them to not have two perfectly healthy children.

Preparing for the shock of learning a twin will have (or has) a disability, whether minor or major, is nearly impossible. Each parent silently wonders how their healthy twin will relate to their sick (or delayed, or physically handicapped) co-twin.

Parents struggle to envision how their healthy twin will cope with other kids' reactions to the family's situation, particularly when the twins reach an age where social interaction within a group is a normal part of everyday life.

"Parents will probably begin to notice their healthy twin having the most difficult time coping with his or her twin's disability

during adolescence, when all children question their identity and self-concept," says Nancy Segal, PhD, psychologist and researcher on twins and twin development, as well as author of several books about twins. "Parents need to provide their healthy twin with the facts and let it be known that both twins are equally loved."

Lissa and Scott Allman of Seymour, Ind., were blessed with twin girls, Kendall and Karsen, now 2. Karsen was born with Angelman Syndrome, a condition that causes severe mental illness and neurological disorders.

"Karsen may never walk," said Lissa. "And with therapists in and out all day tending to Karsen, it is imperative we share some quality time alone with Kendall," says Lissa.

"This is very important," Dr. Segal advised. "Special days out and unique clothing are some of the ways to make your healthy twin feel special."

Kendall babies Karsen and is very overprotective of her twin sister, Lissa says. "She acts motherly toward her sister and takes care of her when she needs something."

Dr. Segal cautions, however, "Healthy twins should be encouraged to spend time away from home, with friends and other family members, if they begin to worry excessively about their ill twin." Some children may begin emulate the behavior of their disabled twin to gain attention or empathy. If this occurs, Dr. Segal points out, "Periods of separation are always encouraged."

Parents need to observe carefully and notice if their healthy twin becomes anxious or worried that he or she might "catch" what their sick twin has—particularly when they are very young, unable to grasp what might be very frightening for them. "While this could happen if the condition is contagious, or if the twins are identical, parents need to explain to the well-twin that it will not happen—and that it is not his or her fault that the other child is unhealthy."

Focus on the present, hang in there

Despite very trying times ahead, Lissa and Scott are committed to focusing on the present.

"I can't think too far ahead into the future," said Lissa. "I can't sit and dwell and cry all the time or I'll never thoroughly enjoy Karsen for who she is. I concentrate on the happiness we have now, and that Kendall will always be here. I think they will grow up to be best friends." Lissa admits, however, that she has concerns most parents of twins have when one is disabled, about what experiences and emotions will govern the twins as they get older.

"It will be hard on Kendall if Karsen is exposed to children who make fun of her disability. But Kendall is strong and hard-headed—God made her strong—so I believe that will help her deal with it," Lissa says.

Dr. Segal advises, "It will probably always be difficult, but happy moments do occur when you see your child's progress."

The healthy twin will need extra experiences and special occasions starting at a very young age, advises Dr. Segal. "This is a key issue." In doing so, parents help build a solid foundation and let their healthy twin know that she is loved equally.

Lissa has advice for parents going through a similar situation: "Hang in there. There are many good support groups for twins with disabilities. It really helps to be around other parents who understand what it's like and who are experiencing many of the same feelings you are."

"Parents need support from others—the best idea is to hook up with other families in similar situations. Parents, too, can also benefit from some time away, like everyone else," said Dr. Segal.

Lisa and Karl Held of Tampa, Fla., describe their ordeal when doctors discovered during an ultrasound that one fraternal twin, Hunter, has spina bifida, a debilitating neurological disease. Lisa was 22 weeks pregnant when she and Karl received the devastating news.

"Hunter would be born with a disease that has no cure, but his twin sister Rachel would be perfectly normal. Hunter would have no feeling below his knees for the rest of his life. One of his legs would be shorter than the other, due to dysplasia—a condition that leaves the baby without a hip socket," said Lisa.

"Hunter would need three invasive surgeries, the first on the day he was born, to repair the hole in his spine. A second would take place the next day, to place a shunt in his head to prevent hydrocephalus, caused by fluid from the spine backing up into the brain and creating pressure. A third surgery would replace the original shunt, and the replacement would remain in place for the

rest of his life," Lisa said.

Hunter would have to deal with a host of other devastating medical problems. But his twin sister, Rachel, was a healthy happy baby girl.

As if raising multiples weren't difficult enough, families raising a disabled twin must alter their lifestyles dramatically to adjust to life with twinfants, coupled with caring for a seriously handicapped or ill

For information and support about twins with special needs, and to talk with other families in your situation, go to www.TwinsMagazine.com for the TWINS Message Board Forums for "Challenged Parents" at <http://www.twinsmagazine.com/vbulletin/forumdisplay.php?f=130>

twin who has significant physical and emotional needs. These families' lives revolve around doctor visits, therapists, medical interventions, hospital stays, and surgeries for their sick twin—a prospect that sometimes seems insurmountable.

Support for parents, particularly those coping with a disabled child, is usually available from family, friends, church organizations or other support groups specific to a child's handicap or illness. As the twins

Nancy Segal, PhD, is author of "Entwined Lives: Twins and what they tell us about human behavior" and "Indivisible by Two: Lives of extraordinary twins," both available at the TWINS Bookshelf, <http://www.twinsmagazine.com/psychology.html>

grow and socialize with other kids, parents need many answers from these and other support networks.

Hunter and Rachel Held, now 3, are beginning to interact with other children. Their older sister, Anna, 4 1/2, has been very helpful.

"Rachel gets a lot of attention," said Lisa, who is anxious over how Rachel will adjust to Hunter's disability now that they are interacting more.

"Sometimes Rachel gets upset when she has to get things for Hunter or help him

with something. But for the most part, she likes to go to the doctor's office with us. It's an outing for her. We make sure each twin always gets individual attention and time alone with us."

Lisa and Karl have taught their children that Hunter was born with different needs. Some people need glasses, and others need wheelchairs, they explained. "Hunter's legs don't work like everyone else's," Lisa

told Rachel and Anna. "Everyone has problems. Hunter's problems are just more visible."

"Right now, little kids don't give him a second thought," Lisa said. "But I worry

that as he gets older and realizes he can't do the things other children can do at the playground, for example, he will become frustrated. And other children will see that he is different." She fears that Rachel, his co-twin, will become discouraged, too.

"Many times she becomes tired of walking at a slower pace, since Hunter is unable to walk. She will be faced with teasing from other kids about her brother, and that would be hard to deal with. But Rachel is

never mean to him, and she never says anything to hurt his feelings," Lisa explains.

Dr. Segal suggests giving a healthy twin some

suggestions for quick and clever lines to use as a swift response to kids' taunting, or when playmates ask questions. "Prepare them beforehand so they are ready with answers," Dr. Segal says.

Few studies have been done on socialization skills of a healthy twin versus a sick twin, so Dr. Segal bases findings on legal cases with which she has worked involving injuries to one twin. Dr. Segal cites various situations in which the uninjured twin may become very overprotective of his injured twin or may feel guilty that he is not the

injured child. Guilt is very common in an uninjured child, or the one without any disabilities.

In situations involving a disabled twin and a healthy twin, the healthy twin may have unexpressed anger and sadness, feel guilty that he or she is well, and may show signs of unhappiness. The healthy twin's behaviors might indicate the child isn't coping well, which needs to be addressed.

"While it's possible the healthy twin may experience depression later in life (as a result of these experiences growing up), it's not a foregone conclusion," says Dr. Segal. "It all depends on the child's support system and personality."

One day at a time

Maria and Mike Lewis of Gainesville, Fla., have four children, including 4-year old twin sons, Andy and Billy. Billy is autistic. "Although Billy is considered highly functional, there are many instances where he is unable to do ordinary things with his siblings, and especially with his twin, Andy. Billy speaks very little and until two months ago, did not socially interact with his twin brother, Andy, at all—or any children, for that matter. Andy seemed to draw him out a little, encouraging him to play and get involved in activities. Billy started to respond, and now they are able to communicate more. It's wonderful to see," says Maria.

Billy has sometimes experienced what Maria called "meltdowns," where he becomes highly agitated if he cannot maintain control. "He was and is very much a perfectionist, in that if he tries to do something, he wants to get it right the first time. When that doesn't happen, he acts out and becomes very frustrated, which affects his twin brother, Andy, who would also become upset and feel sorry for Billy."

Billy now attends a facility called the Center for Autism and Related Disabilities (CARD). This has given Maria and Mike quality time with Andy. CARD provides workshops and resources for parents of children with autism.

"Billy attends classes, and visits the library to look at pictures in books because he is unable to read. It is a good experi-

ence for him because he is able to absorb some of that," said Maria, who admits she worries about mainstreaming Billy as he grows older.

"I worry about how he will interact with other kids and learn. And about his outbursts, and the meltdowns he may have."

All of these feelings are quite normal, according to Dr. Segal, who feels strongly about making special time for each twin and doing different things for / with each child. "Encourage periods of separation, special days out, unique clothing for each of them." These are steps all parents can take to make each twin feel confident and loved.

Amanda and Jim Langston, also of Florida, have twin sons, 1 1/2. "The day Ian and Ryan were born, we learned Ryan had Down's syndrome. We've just celebrated his first birthday, and I can tell you this was the most challenging year of our lives. Ryan had open-heart surgery at 3 months, and various other health issues. But today he is a vital, bright, active and curious 1-year-old. Life is challenging enough," she said. "But life with twins, especially one with a disability, is very challenging," said Amanda.

Dr. Segal suggests that parents whose kids have different needs "Take pride and pleasure in each child. Think of yourself and the other family members. Hook up with others (in the same situation) and do some public outreach. This will help you gain a different perspective and learn from others who are going through the same situations."

Amanda and Jim Langston's insight is inspiring. "Some people are just given a much more difficult life—we don't claim to understand it. We know we just do the best we can each day, as any parents would. Parenthood is selfless, but being a parent of a child—a twin—with a disability is a lesson in humility, patience, determination and flexibility." ♥

Dawn Zamanis lives in Valrico, Fla., and is a single mom with five boys under 14, including 8-year-old twins. She's been a freelance writer for 20 years and is a columnist with The Brandon News/Tampa Tribune in Florida. She's faced plenty of challenges as a parent, with her twins and her single-born kids.

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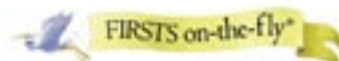
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What a deal!

“Oh, you’re so lucky to have twins!”

“I’ve always wanted twins.”

“It must’ve been nice to get two at once.”

I’ve heard lots of these types of comments from parents of singletons or childless friends. While the comments are well-meant, I get irked by the misinformation surrounding multiples.

Sure, it was nice to only have one nine-month stint of pregnancy and receive two babies at the end. It wasn’t so nice, though, to have more frequent doctor check-ups and ultrasounds. Nor was it much fun worrying about a c-section or premature birth, either.

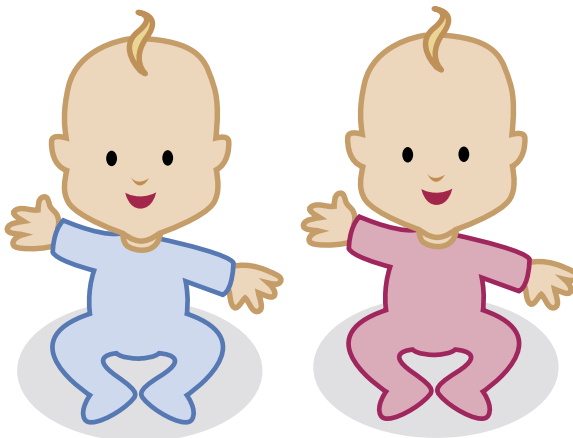
It was no fun delivering one baby, have about 30 seconds to bond with her, then have her whisked away so I could get working on delivering baby number two.

I know they’re clueless, but...

Once the babies were here, I loved them, of course. But I can’t fathom how people might think having two (or more) could be any easier than having a singleton child. At bedtime, for example, I’d put the second baby in bed for the night only to have the other instantly awoken at the sound of me quietly climbing into bed. Naptime was the same. Babies have an uncanny ability to sense when a parent is about to have some free time.

I understand that people without experience with multiples are curious (and clueless) about what it’s like to raise them. I actually enjoy their curiosity and some questions. Still, I wonder where some of their ideas about twins come from.

Like the idea that a quick glance at



twins enables you to determine they’re identical. Many brothers and sisters look alike, but that doesn’t mean they have identical DNA.

Or that every woman with twins has had a c-section—or, that it is okay to ask, loudly, in a public area, whether or not I had one!

Or that because my kids are twins, they’ll be so much closer than other siblings are. I’m asked questions about telepathy, shared pain, and other phenomena that I am not even convinced exist.

I guess that’s why I sometimes feel twinges of resentment about outsiders’ conjectures regarding my twins. I answer what questions I can, then smile and go about my business. I know I’m not alone in feeling the ways I do; other parents of twins understand.

We don’t look enviously at families with triplets and think, “Gee, I’ll bet that was easy!” or “What a deal, three for one!” Nor, I suspect, do parents of triplets ever enviously eye those with quadruplets and think...

Laura Munion is a freelance writer and copywriter. She lives in central Ohio with her twin daughters, who have autism.



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MY TWINS HAVE SEPARATE BIRTHDAYS

Neat timing...but what about birthday parties?

By Chantal Meijer



To some sharp-eyed person reading my family's medical card, it looks like a typo—two kids with the same surname, born ONE day apart. That can't be right, they invariably say.

For years, I've been tickled pink to tell them—and anyone else who'll listen to my tale—why isn't a typo at all: They're identical twin boys, born on either side of midnight.

So, how did this birth happen—the timing, I mean—and just how did we handle our boys' birthdays over the years, as brand-new parents with everything to learn?

Easy—we held one birthday party, with one double-sized cake. And we always celebrated on the first-born's birthday. Why wait another day! At least, that was the plan. Most of the time.

My boys rushed into this world after my water broke as I answered the front door one morning, three weeks before my due date. My startled dad, who had stopped by while on his way to a jobsite, stood transfixed. "Perfect," I said, as I ruminated on the saying "the child born on the Sabbath day is bonnie and blight", or words to that effect.

My husband Rick was hundreds of miles away, not due back until the next day. "Phone Rick, Dad," I blurted as I wobbled towards my suitcase.

For the entire day, my eyes were riveted on the hospital-room clock, first at the small local facility where I was admitted, then at a larger regional hospital requiring an hour-long ambulance ride. As the hands closed in on midnight, the doctor called for forceps.

I braced myself; sometime later I heard his voice ring out: "It's a boy! Congratulations. Time of birth ... 11:59!"

Moments later: "It's another boy! Time of birth ... 12:04!"

My husband arrived the next day, after being grounded by fog for a day. He grinned from ear to ear.

On our sons' first birthday, I invited half the town—every mom from my prenatal group, every person I had ever met. The party was as much for me as for the boys; validation that I'd survived the ordeal. The cake, awash with both names, was as big as the baker dared make it.

Years later, one birthday party for the twins required two cakes, the exception to my birthday-party mantra. The boys, in Batman and Superman mode at the time, had individual Batman and Superman cakes.

But in general, we stuck to my mantra: one party, one cake. Why mess with a good thing? Besides, the boys thought having one party was perfectly fine.

Gigantic Cake

Over the years, we took a gazillion photos—our twins and our other two (singletons), six and nine years younger. For the twins' photos, I used a little trick: I positioned the first-born on the right, so over the years we'd always know who's who in photos.

For their 16th, each had a separate party. The first-born had his first, with his friends, and invited his twin brother, with the brother's friends. The next day, the second-born did the same thing again. Same group.

We returned to the tried-and-true format.

Recently, our sons graduated from university. As fate would have it, convocation ceremonies fell on the first-born's birthday.

Wow, try and beat that!

My maternal antennae were twitching with double delight. Their cake, an impetus for the baker's retirement, again was as big as he dared make it! It included everything: Congratulations for their birthdays, their graduations, their golden retrievers (that's another story), and on and on.

Every now and then, someone, someplace still asks me the timeless question about their separate birth-dates: "Is that a typo, ma'am?"

My chest puffs, almost to its old nursing size. A smile spreads across my beatified face. My words flow sweet as chocolate syrup on vanilla ice cream: "They're identical twins, born either side of midnight," I gush.

That won't ever grow old. Unlike cake. ♡

Chantal Meijer and her husband Rick live in Terrace, B.C., with their two younger children.

TWINS Bookshelf Spotlight



The Early Birds:
A Mother's Story for Our Times
By Jenny Minton **\$23.00**

At 31 weeks into her pregnancy, Jenny Minton delivered her twin boys Sam and Gus. Immediately, the premature boys weighing just 3.5 pounds each were placed on life support in the neonatal intensive care unit at a New York City hospital. "The Early Birds" is Minton's personal story of her courage and love during 64 days of uncertainty, when she would become teary eyed when stepping into a pediatrician's office or into the preemie clinic, often expecting the worst. This intimate story provides a moving and powerful narrative about the triumph of life that all parents will appreciate and understand. Hardbound, 272 pages.



Twin Tales:
The Magic and Mystery of Multiple Birth
By Donna M. Jackson **\$10.95**

"Twin Tales" is a well-illustrated discussion of twins that includes both scientific research and interesting personal stories. It appeals primarily to inquisitive elementary-school age readers, but parents will also find it to offer insight into twinning. Colorado author Donna Jackson, whose mother is a twin, explores twins and their similarities, as well as their differences. Hardbound, 48 pages.

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Keeping your twins safe in public places

Parents of twins know for a fact: No matter how vigilant they are, or how well-behaved their children are, one kid (or both!) most likely will get lost in a public place at least once during the first five years.

More than 2,000 American children are lost each day in all kinds of public places—beaches, amusement parks, fairs, airports. When yours are missing, it may be the result of

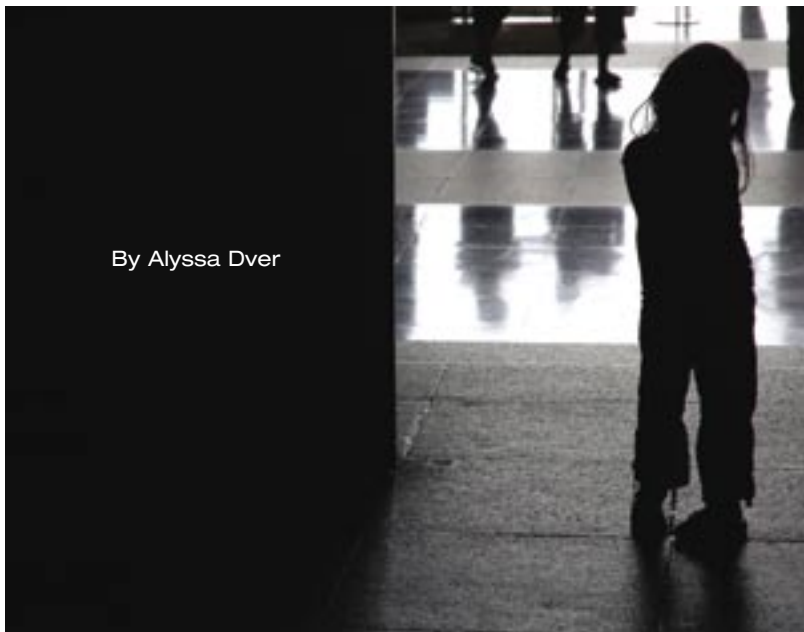
one twin egging the other on to go exploring, or a seemingly innocent game of hide-and-seek. But have no doubt, twins are, indeed, double-trouble when it comes to their chances of getting lost.

Knowing this makes it no less frightening when your kid disappears into thin air. The panic you feel is indescribable. Your adrenalin pumps. Grabbing the other twin, you drill her on the last time and place she saw her brother. You order her to stay with you and help look for her missing brother. You make an effort to push aside your fear he's been harmed or abducted. You run around screaming your child's name. You listen for a suppressed giggle from beneath a nearby bench or clothing rack.

Luckily, most times your child is found physically unharmed. However, even these momentary accidental wanderings leave you and your children emotionally drained and frightened.

Parents of twins quickly learn to plan ahead and not take everyday activities for granted—like going out to crowded places. But I've learned that by making use of the following simple tips, we can help keep our children safe wherever we go.

By Alyssa Dver



- **Dress children in bright, special “away-from-home” clothing**

To help spot children easily, dress them in brightly colored t-shirt, hat, or jacket—very bright yellow or green works best. Pick colors or one color you'll spot easily. Bright apparel also serves as a key identifier for others helping find your missing child. Some parents of twins dress both twins in the same bright

color to help each remember what the other is wearing should they need to recall that in a panicked moment.

- **Put safe, easily-accessible contact information on each child**

While there is no substitute for parental/caregiver attention, the best preparation is to put a note or tag with your cell phone number on each child in a visible place. This allows another adult to see and use it to quickly contact you (or the caregiver who is out with your children). Use a laminated card, a sticker, or one of the various ID products on the market. Never put your home address or other personal information on the ID.

Very young children, and some special-needs children who cannot speak, should have the ID visible so an adult can access it without needing to undo the child's clothing. If your child fidgets with the ID, attach it to the back of their clothing between their shoulder blades—this can be especially helpful when one twin plays with the other twin's ID. Remind your children they should leave their own ID tag and their twin's ID alone. If necessary, sew or pin it on the outside of each child's clothing. Older children can carry cell phone information in a pocket if you are confident they will be able to produce the information when needed.

- **Carry recent photos and descriptions of each child**

Always keep a recent photo of each child in your pocket or with your credit cards—this is one of the most important things you can do for your children's safety. If you are assisted by other people in finding your child, having a photo and information available makes a real difference in a quick and successful reunion. On the back of each photo, note the child's eye color, hair color, height, weight, and any birthmarks or other distinguishing marks. If your child is one of identical multiples, note that as well—you don't want a search called off when an authority believes the missing twin to be the one standing next to you. Include your cell phone number on the back, too—it is one less thing you need to remember while stressed and looking for your lost child.

- **Teach your children to ask another mommy for help**

A frightened child may be unable to

locate a trusted authority quickly. It is difficult to even describe a typical guard or officer to a small child. Teach your children to enlist help from another mother. Children intuitively know that a mommy is a woman with kids—one type of stranger you do want your children to talk to if they need help. You can role-play this with them any time you are out and about in public places. Also, when you arrive at a public place, remind your children what to do if he becomes lost.

▪ **Reinforce good behavior**

When you go to a public place, even the supermarket, and you return without your children wandering off or becoming lost, praise them for being good and staying with you the entire time while you were out. Positive reinforcement elicits the behavior you want from your children.

▪ **Act immediately when a child is lost**

Many public places—retail stores, amusement parks, beaches—now have specific lost-child procedures such as lockdowns. If

your child is lost, remain calm and quickly find an onsite employee to trigger the lost-child process. Remain near the spot where you last saw your child. Often the child is still nearby. If you sense that your child is more than just temporarily lost, call the police (911). It is better to call back to report you have found your child than to lose precious time that can make a critical difference in safely finding your child.

▪ **Celebrate—don't berate—when you're reunited**

Once reunited with your child, congratulate her for following the instructions you taught her to follow in case she got lost. Don't yell at your child for getting lost—if you show anger following these incidents, your children may decide they'd prefer to remain lost rather than be yelled at if they ever wander off again. If your child couldn't remember what to do when he got lost, discuss the incident seriously but calmly with both twins and recall precisely how sad and frightened you all felt while you were separated. Often, a child doesn't even think he was missing at all—the child may

think you were the one lost! Remind your children how important it is that they not wander off, and remind them about finding another mommy for help.

▪ **Twice the fun—half the worry**

Twins are notorious for being mischievous. This often results in one getting lost. In today's world, it is inevitably a scary situation. Prep them before taking them to busy, public places. Teach them to work as a team. Remind them to stick together and stay near you. When you go out and come back without incident, praise them for not getting lost. Empower them with tools and knowledge so they can help to be found quickly if they do become lost. ♥

Alyssa Dver, a national family safety expert, is CEO of Wander Wear® Inc. (www.wander-wear.com), a parent-run company that advocates child safety in public places. She speaks frequently to twins clubs and is a resource for lost-child prevention for parenting organizations. Wander Wear® develops practical information and affordable products that can quickly and easily reunite lost children with parents or caregivers. She is the mother of two boys, 7 and 3.

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PARENTS ALWAYS ASK:

I know a lot of twins who share a bedroom. This can often be difficult because twins are usually together so much anyway. Is there any advice that you can offer to help twins feel as if their shared bedroom is a place where they can express individuality?

JENNIFER'S TAKE:

For twins, sharing a room is almost as unavoidable as sharing a womb. It is as if there is an unwritten rule stating that twins must stay in the same place; bunk beds were made for us. This unwritten rule certainly applied to my twin sister and me.

From the time we were born until we were 12, we shared a room. Even though our family had a spare bedroom in our house—one that either of us would have happily occupied—this room was used as a place to keep our toys. When we were 4, this spare room was given to the new addition in our family, our younger sister. The fact that she got her own room and my twin sister and I had to share one seemed, in our opinion, to go against everything good and pure in the world.

Our parents, however, didn't see it this way. Whenever we asked why we had to share a room, they would utter the monozygotic mantra, "Because you're twins." This, to them, was based on logic. To my twin and me it was based on lunacy: Each of us should have had our own room and our younger sister could go live in the garage.

But, alas, our request wasn't granted. At first, sharing a room was no big deal. However, at about age 5, when we started to develop our own identities, sharing a room seemed to hold us back from being individuals.

Now, the fact that a room can hold back twins may seem odd. A lot of siblings, twins and otherwise, share a room when they're young. But, for twins, sharing a room further compounds the lack of individualism they already face. For my twin and me, we could never get away from each other; we were each other's stalkers. We went to school together, played together, had the same friends. Even when we fought—pulling each other's hair or calling each other names—our parents would punish us by sending us to our room, where we would, once again, be stuck together. There was simply nowhere to go to be an individual. Kids use their rooms as a way to express themselves, hanging up pictures on the wall or arranging stuffed animals in a certain order. For my twin and me, however, we really could only express ourselves together, discarding completely any concept of self-expression: We could only decorate our room in a manner upon which we both agreed.

To this day, I can remember being 7 years old and wanting to hang up a poster of Steve Watson, a Denver Bronco's receiver. Because my sister hated sports, I wasn't allowed to hang up my poster on our bedroom wall and instead had to hang Steve up in the corner of my closet, a crevice so dark I couldn't even stare into his dreamy eyes. I remember thinking the only reason Steve was consigned to the closet was because my sister and I were twins and our room had to contain only things we *both* liked.

For parents whose twins share a room, keep in mind that twins need their own space, probably even more than other siblings do. Some twins might be okay with sharing everything, and may even prefer it, but those who exhibit even the slightest desire for separation should not be ignored.

One good thing to do is give each twin a corner of their room to use for whatever they want. Whether they want to decorate their corner with stuffed animals or decorate it with pictures they have drawn, their corner is where they are allowed to go for self-expression. This individual corner is each person's "own room" in the room that they share.

If twins ask why they need to share a room, avoid answering, "Because you're twins." This isn't what twins want—or need—to hear. It's a saying that makes twins feel as though they are being punished for something they can't control, and didn't ask for. Instead of uttering this statement, ask them what they think a good alternative to sharing a room would be. You might be surprised at what they come up with. If their alternative can't be met (e.g., if the garage proves too cold for their younger sibling) ask them what can be done to make them happier with their rooming-in situation.

Let your twins know they don't have to agree on everything; if one twin wants a red comforter and one wants blue, let them know that's okay. Twins are often geared to believe that they must do everything the same, in lockstep.

It's as if twins are taught that having differences will somehow shatter their "twin pact." However, twins who express differences and embrace these differences will have a much easier time than twins who are under the impression they must be identical in every aspect. If twins possess differences of opinions in how they want their room to look, allow them to express these differences in a positive manner.

Teaching twins they don't have to agree on everything is one of the most valuable lessons a parent can offer. ♥

Jennifer, 27, lives in Aurora, Colo. Her twin Kimberly, is now nearby, having recently returned to Aurora from Portland, Ore.

....And that's how I forgave my mother

By Dasha Braverman

For years I have carried a grudge against my mother. It seemed to me as if all my life she was just there as an instructor—"Don't do this" and "Don't do that." I can never remember her cuddling with me or taking me to dance lessons—if she did, she would always find a way to criticize me about how and what I should do and what I shouldn't do.

What I hated the most was how she made me study mathematics. She was a math professor herself at a major university. She made me solve algorithms over and over until I was so good I could solve one in my sleep. She always said, "mathematics is the foundation of everything, you will see..."

Most disappointing of all was that she completely failed to talk to me about being a woman. For the longest time I did not know about menstrual periods, sex, or making babies. I had to learn from my friends and other strange people who misinformed me about nearly everything.

In spite of those omissions, she never failed to remind me to sit straight, not to pick my nose in public, to cover my mouth when I yawned. I took all as further criticisms.

I was never good enough for my Mom. I achieved a 95% on one very difficult test and came home glowing that she would be proud this time. She said: "How come not 100?" No, nothing was ever good enough.

She controlled the way I dressed, not



allowing me to wear things I liked. She made me wear what she called appropriate (even if it was itchy and hot.) She wouldn't let me wear my hair down, saying it was "too promiscuous" and banned me from piercing my ears until I was 16.

My mom constantly interfered with my dating, leading to endless tears. One boyfriend for a long time would cause her to become so angry I thought she'd break the phone in half. I once left the house and wandered the streets for a day—my poor Dad came after me and begged me to return home.

I recall a lot of yelling that night between my parents. I was turning into a rebel. Yet at the same time I was slowly turning into a fine young woman—I played the piano relatively well; my ballet classes taught me grace.

I graduated from college and started work on my postgraduate degree, and

met my future husband. At first I was not attracted to him at all, but later saw a kind and intelligent man who was much older than me and who'd had one tough life, much tougher than mine. In spite of our age difference, we hit it off—and my mother actually liked him!

We were married, and before our third anniversary I was very pregnant with twin boys. On May 17, 2004, the most peculiar thing happened. In the hospital with severe contractions, as two babies struggled to escape me, guess who held my hand? My mother!!

My husband was stuck in traffic but Mom stayed alongside me from early morning until evening. I bruised her hands from squeezing so tightly, but she never complained. She was just there ...being my Mom.

She awaited us when we brought our babies home and came nearly every day to help. She was, strangely, the only person I trusted for a long time with my young children.

Now, when the doorbell rings, my boys run screaming, "Grandma! Grandma is here!" I look at them, see their joy, feel love and forgiveness. ♡

Dasha Braverman arrived in the U.S. from Russia 12 years ago and lives in New York City with her husband, Eric, and their sons, Steven and Daniel, now 2. She owns and operates a nutritional supplements business.

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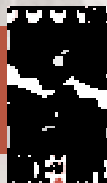


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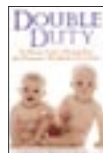
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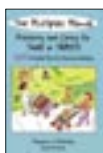
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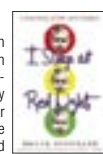
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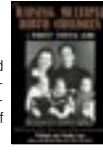
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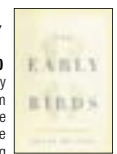


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Newly revised and updated, Dr. Barbara Luke of the University of Miami School of Medicine and mother of twins Tamara Eberlein provide specific, empowering information for parents of multiples about health care providers, diet, activity and rest restrictions, preterm labor, and post-pregnancy feeding and care. Also included are 50 nutritious recipes for optimal birth weight of the multiple children, and numerous charts, graphs and illustrations. Appendices include helpful resources for new parents of multiples and a detailed glossary.
Paperback, 420 pages.



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Elizabeth Noble \$18.95
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Paperback, 562 pages.



PREGNANCY/EXPECTING

Expecting Twins, Triplets And More

Rachel McClintock Franklin, MD \$14.95
Oklahoma family physician Rachel McClintock Franklin is the mother of twins born in 2001. A frequent media contributor, Dr. Franklin provides the "girlfriend's guide to twin pregnancies" in this informative and often humorous book. Includes information on nutrition and exercise and helpful reference guides. A reassuring book about twin pregnancies from someone who has been through the experience. *Paperback, 208 pages.*

Your Pregnancy Packet

Twins Magazine \$15.00
Two practical pocket guides by Dr. Gladice B. Curtis and Judith Schuler provide new mothers of multiples detailed information on specific pregnancy and postpartum concerns. First-time mothers find these quick guides particularly useful. *Paperbacks, 442 pages.*

Everything You Need to Know to Have a Healthy Twin Pregnancy

Gila Leiter, M.D.; Rachel Kranz \$15.95
Dr. Leiter is a mother of twins and an OB/Gyn herself. Offers practical information, and detailed resources when expecting twins. *Paperback, 330 pages.*

PREMATURITY

Your Premature Baby: Everything you need to know about birth, treatment, and parenting of premature infants

Frank P. Manginello, M.D.; Theresa Foy DiGeronimo, M.Ed. \$17.95
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Your Premature Baby & Child

Amy E. Tracy; Diane I. Maroney, R.N. \$17.95
Written by experienced premie parents and medical professionals, this book answers your questions about the NICU, homecoming, bonding, medical, developmental, school years and more. *Paperback, 327 pages.*

Breastfeeding Your Premature Baby

Gwen Gotsch \$5.95
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The No-Cry Sleep Solution: Gentle Ways to Help Your Baby Sleep Through the Night

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Nighttime Parenting: How to Get Your Baby and Child to Sleep

William Sears, M.D. \$9.95
Vigorous opponent of letting babies cry it out, Sears offers dozens of tips to help you get your babies (and toddlers) to sleep and stay asleep. Revised. *Paperback, 204 pages.*

Solve Your Child's Sleep Problems

Richard Ferber, M.D. \$14.00
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Kim West and Joanne Kenen \$13.95
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The No-Cry Sleep Solution for Toddlers and Preschoolers: Gentle Ways to Stop Bedtime Battles and Improve Your Child's Sleep

Elizabeth Pantley \$15.95
Targeted especially for parents of children age 1 to 6, parenting expert Elizabeth Pantley provides positive approaches to help children go to bed and sleep soundly through the night. Without resorting to negative punishments to encourage children to sleep, this child-friendly book provides effective, loving solutions to common problems ranging from evening melt-downs, nightmares, night walking, and nighttime visits to a parent's bed. *Paperback, 400 pages.*

Book bargains for parents of multiples!
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TWIN PSYCHOLOGY

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
The title of this book refers to twinship being like a dance in front of a mirror—each twin constantly reflects the other. These marvelously accomplished identical twins take a look inside their twinship, and help a reader take a fresh look at their own personal relationships. Gain new and valuable insights into your twins and yourself. *Paperback, 244 pages.*

The Psychology of Twins: A practical handbook for parents of multiples.

Herbert L. Collier, Ph.D. \$13.95
Twins differ from singletons and, just as importantly, from each other, whether monozygotic (identical) or dizygotic (fraternal). Dr. Collier, a psychologist and father of twins, draws experience from rearing his twins who are now well-adjusted adults and also from counseling hundreds of families with multiples. Offers compassionate wisdom seasoned with patience. Practical and down-to-earth, a must-have book for parents who want to understand and value each child as an individual. *Paperback, 120 pages.*

Entwined Lives: Twins and What They Tell Us About Human Behavior

Nancy L. Segal, Ph.D. \$18.50
Leading twin researcher and fraternal twin, Segal sheds light on nature vs. nurture debate, shows how twins hold the keys to understanding physical and intellectual capabilities. Excellent resource for parents of twins. *Paperback, 396 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. These stories provide a fresh look into twinship. *Paperback, 188 pages.*

Indivisible by Two

Nancy L. Segal, Ph.D. \$24.95
A fraternal twin herself, Dr. Nancy Segal is a professor of Psychology at California State University. The author of *Entwined Lives: Twins and What They Tell Us About Human Behavior*, Dr. Segal brings us the stories of the lives of twelve sets of multiples. *Hardcover, 280 pages.*

TWIN PHOTO COLLECTIONS

Twins

Mary Ellen Mark \$35.00
Mark is one of America's leading photographers. Her work has been in *New Yorker*, *Rolling Stone*, *Vanity Fair*, *Vogue* and *Life*. She attended the popular "Twins Days" festival in Twinsburg, Ohio, for 2 years photographing twins with her large-format camera, producing this amazing book of 80 stunning images that depict the bond between twins and captures their unique individuality. *Hardcover, 96 pages.*

Little Thoughts of Love

Anne Geddes \$19.95
Anne Geddes captures the magic of twins, triplets and singleton babies sleeping in the petals of roses, popping out of tuliped, nestled among feathers and cradled in a father's hands. Beautiful photography and inspiring quotes fill this gorgeous keepsake. *Hardcover, 110 pages.*

TWINS Children's Bookshelf



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Your child will learn the letters A to Z with pictures and words. There are more than 20 places for you to write in personalized information about your child. Illustrated by Jerianne VanDijk, the same artist for our popular *TWINS Lifetime Memory Book*. *Paperback, 32 pages.*

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\$7.95
Your child will be delighted with the chance to play the major role in telling his or her own personal story. Illustrated by artist Jenny Campbell, this book allows your child to include important information about their lives. *Paperback, 32 pages.*

Two for \$15.90

Buddies

A Story About Twins \$5.95
Michelle Donaldson, illustrations by Robert Peltz
Brother and sister buddies discover how differences can create a special bond for twins. For ages 2-5. *Paperback, 16 pages.*

Grandpa's Twins

Vanessa Welsh, illustrations by Mary Peterson \$5.95
Grandpa shows his twin grandsons a farm that is full of animals that come in pairs too! Ages 2-5. *Paperback, 16 pages.*

The Twin Team

Sandi S. McLaughlin, illustrations by Jerianne VanDijk \$5.95
The boys of the Twin Team fight together to battle bedtime fears. Ages 2-5. *Paperback, 16 pages.*

The Bobbsey Twins: Freddie and Flossie and the Train Ride

Laura Lee Hope \$3.99
The Bobbsey Twins have long entertained children with their wide-ranging adventures. There's now a new line of early reader books for young children featuring twins Freddie and Flossie. While taking the train to Grandpa's house, Freddie lets their kitten Snoop out of his box. Where's Snoop? Let the fun begin! *Paperback, 32 pages.*

The Bobbsey Twins: Freddie and Flossie

Laura Lee Hope \$3.99
The Bobbsey Twins have long entertained children with their wide-ranging adventures. There's now a new line of early reader books for young children featuring twins Freddie and Flossie. Though they look alike, Freddie and Flossie are similar, but are also different; one is loud, one is not. Freddie likes to play fireman, Flossie likes to play store. *Paperback, 32 pages.*

The Bobbsey Twins: Freddie and Flossie and Snap

Laura Lee Hope \$3.99
The Bobbsey Twins have long entertained children with their wide-ranging adventures. There's now a new line of early reader books for young children featuring twins Freddie and Flossie, who have a dog named Snap. The three like to play catch, until Snap decides to play chase. *Paperback, 32 pages.*

The Bobbsey Twins: Freddie and Flossie and the Leaf Monster

Laura Lee Hope \$3.99
The Bobbsey Twins have long entertained children with their wide-ranging adventures. There's now a new line of early reader books for young children featuring twins Freddie and Flossie. While raking leaves one fine autumn day, Freddie and Flossie notice that their huge pile of leaves is shaking! Looking closely, they see eyes and a tail. Is it a monster? *Paperback, 32 pages.*

The Bobbsey Twins: Freddie and Flossie at the Beach

Laura Lee Hope \$3.99
The Bobbsey Twins have long entertained children with their wide-ranging adventures. There's now a new line of early reader books for young children featuring twins Freddie and Flossie. One day, they have fun at the beach with their dog Snap, splashing in the water, building sandcastles and playing tag. *Paperback, 32 pages.*

Sketches From a Spy Tree

Tracie Vaughn Zimmer, illustrated by Andrew Glass \$16.00
Anne Marie is an artist who draws pictures of people, places and things on her street and in her neighborhood. She also writes her story as a series of linked poems providing details about herself and her family, including twin sister Mary Anne. Author Tracie Vaughn Zimmer and illustrator Andrew Glass are both twins who bring a vivid portrait of a year in the life of a twin. Ages 8-12. *Hardcover, 64 pages.*

The Twins Take Turns

Nickole Shyne-White \$16.00
Dennis and Derek are twin brothers. They look alike, but have different interests. Dennis likes to draw, while Derek likes to talk. Sometimes, these interests can lead to conflict over who gets to spend more time with their mother. Mommy has a solution to their problem, however—they should take turns as she has plenty of time and love for each. For ages 2 to 4. *Paperback, 32 pages.*

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Two Times the Fun

Beverly Cleary **\$11.99**
Award-winning author and mother of twins Beverly Cleary, provides delightfully entertaining stories featuring 4-year-old twins Janet and Jimmy. Janet and Jimmy don't always act alike or even like the same things. Janet likes to use her imagination in playing, while Jimmy is more practical and enjoys digging holes. Janet has a collection of "thingamajigs" but they each have a dog biscuit to give to neighborhood dogs. For ages 4 to 8 or for reading to younger children. *Hardcover, 96 pages.*



Sweet Jasmine, Nice Jackson

Robbie H. Harris **\$16.95**
Jasmine and Jackson are two-year-old twins and are out to explore the world. A delightful and entertaining story for young toddler-aged twins that also includes informative short sidebars with information for parents about twins. *Hardcover, 40 pages.*



My Best Friend

Margie Fincher **\$5.95**
Book of rhyme teases readers with the question, "Can you guess who my friend can be? I'll give you hints and you will see." *Paperback, 16 pages.*



Simon Says

Diana Hamilton Geller **\$5.95**
Firstborn Simon flaunts his seniority over, Max, who finds a new way to handle the issue. *Paperback, 16 pages.*



One Was Not Enough

Lori Menning **\$5.95**
Mama tells her 5-year-old twins she had two babies because "one was not enough." *Paperback, 16 pages.*



You Can't Trick Me

Yvonne Field-Bagwell **\$5.95**
Identical twins playfully trick friends, teachers, and even Grammy about who's who—but can never trick Mom. *Paperback, 16 pages.*



Wishing on a Star

Dori J. DeGennaro **\$5.95**
As 5-year-old dizygotic twins gaze at the stars, Mom tells them of her wish every night when she saw the first bright star. *Paperback, 16 pages.*



Michael's Brothers

Crystal Forsberg **\$5.95**
Older sibling is jealous of the constant attention the twins receive, but learns to get over it. *Paperback, 16 pages.*



Twenty Wiggly Toes

Cynthia Johnson **\$5.95**
Twins wiggle 20 toes, race with four feet, clap their four hands, use 20 busy fingers and two big bedtime yawns. *Paperback, 16 pages.*



One to Three

Nancy Griffin **\$5.95**
Older sibling learns to accept twin babies. It's confusing and hard, but with time, love grows. *Paperback, 16 pages.*



The Twins & the Birthday Party

Marcia Murphy **\$5.95**
Lucy is invited to a party, but her twin isn't. Boo hoo. Then he has a special day alone with Mom. *Paperback, 16 pages.*



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, self-directed play. *Paperback, 16 pages.*



One Baby, Two Baby, Three Baby, Four

Christi Rober **\$5.95**
All multiples will giggle when they see quads crawling, visiting a zoo, crying, taking a bath and, finally, falling asleep. *Paperback, 16 pages.*



Always Zany ABCs for Twins

Dawn Mitchell **\$2.98**
Romp through the alphabet with playful rhymes. Great for teaching twins the ABCs. *Paperback, 16 pages.*



Twinship is in Your Heart

Stacy Dye **\$5.95**
On a day at the park, mom poses a riddle: Can twins find other twins? Dispels twin stereotypes and teaches individuality. *Paperback, 16 pages.*



Kevin and Ben

Gail S. Coleman **\$5.95**
Identical twins see differences emerge as they get older...yet feel so lucky to have a twin. *Paperback, 16 pages.*



Family Reunion

Lynn Burgess **\$5.95**
Twins dislike having their heads patted by relatives who can't tell them apart and who always ask who is older, who is smarter. Story helps twins learn to handle adult silliness. *Paperback, 16 pages.*



My, You Have Your Hands Full!

Amber Lappin **\$5.95**
Simple rhymes tell how full life is with multiples, and what is most full is Mommy's heart. *Paperback, 16 pages.*



It Takes Two

Tammi Blackburn **\$5.95**
Twins complement each other: One draws pictures, the other writes words, but to get the whole job done, it takes two. *Paperback, 16 pages.*



The Little Green House

Beth Covino **\$5.95**
Twins introduce "our two beds, two blankets, two pillows for resting our heads." But some things differ...one likes to read, the other loves music. *Paperback, 16 pages.*



Where Are the Twins?

Maegann M. Struble **\$5.95**
The twins are playing hide-and-seek. Daddy and Mommy find their older sister, the dog, the bird and the cat, but where are the twins? *Paperback, 16 pages.*



His Sister, Her Brother

Wendy Black Mancarella **\$5.95**
Boy/girl twins have dissimilar personalities, like different foods and activities, but figure out how much they love each other. *Paperback, 16 pages.*



Imagination Collaboration

Doris Goldstein **\$5.95**
Twins turn the couch into an airplane and imagine forks and spoons having a party. *Paperback, 16 pages.*



Twins Go to Bed

Ellen Weiss **\$3.99**
Twins get ready for bedtime by brushing their teeth, getting into their pajamas and settling down for the evening. Illustrated by Sam Williams. *Paperback, 24 pages.*



Twins Have a Fight

Ellen Weiss **\$3.99**
There are new toys for the twins, but both want to play with the same one! British illustrator Sam Williams helps bring this story to life. *Paperback, 24 pages.*



Twins in the Park

Ellen Weiss **\$3.99**
Story of twins on an afternoon trip to the city park. Charming images by British illustrator Sam Williams, story tells of fun, games and discoveries. *Paperback, 24 pages.*



Twins Take a Bath

Ellen Weiss **\$3.99**
Kids splash and splash, get clean and ready for bed. Features images by British illustrator Sam Williams. *Paperback, 24 pages.*



By My Brother's Side

Tiki and Ronde Barber **\$16.95**
One summer day, while riding bikes in a special secret place, one brother falls and badly hurts his knee. Although the doctor warns he may never play sports again, the support and comfort from his twin brother and his mother helps him recover from his accident in time for the first football game of the fall. *Hardcover, 32 pages.*



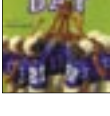
Game Day

Tiki and Ronde Barber **\$16.95**
Twins Tiki and Ronde play together on their Pee Wee League team. Ronde blocks, and Tiki runs for the big scores. Coach Mike introduces a special play for the brothers to use in their big game against the toughest team in their league. *Hardcover, 32 pages.*



T is for Twins: An ABC Book

Mary Bond **\$15.95**
Rhyming book pairs each letter with a photograph of twins or triplets engaged in activities from tree climbing to napping. Space to insert own photo on last page. *Hardcover, 32 pages.*



Twin to Twin

Margaret O'Hair **\$15.95**
Rhymes and playful illustrations depict an exciting day with rambunctious twins, who play and learn to walk. *Hardcover, 36 pages.*



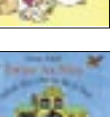
Twice as Nice: What It's Like to Be a Twin

Nicole Rubel **\$16.50**
What's it like to be a twin? Nicole knows because she is a twin. A potpourri of facts, witty little riddles and history, the book will appeal to all families with multiples. *Hardcover, 32 pages.*



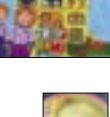
Jan and Ann are Twins

Barbara Sherwood **\$5.95**
Look-alike twins switch places. Mom takes Jan to Ann's favorite place, and Dad takes Ann to Jan's favorite. Ooops! *Paperback, 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 give Fluffy, the pet rabbit, a shower instead. *Paperback, 20 pages.*



Never Mind! A Twin Novel

Avi and Rachel Vail **\$15.99**
An entertaining novel about twins Meg and Edward, who clearly don't see eye to eye. In fact they are as different as night and day, polar opposites who constantly rub each other the wrong way. An easy novel for twins in the 3rd grade or older...children of this age will identify with the characters and the situations. *Paperback, 208 pages.*



Twin Tales

Donna Jackson **\$10.95**
Including both scientific research and interesting personal stories, this well-illustrated energetic discussion of twins will appeal to inquisitive younger readers. Donna Jackson's book explores twins and their similarities, as well as their differences. *Hardcover, 48 pages.*



My Twin My Friend

Lynne Crump **\$16.95**
The joy of being a twin is explored in this entertaining, rhyming story. Twins have a special friend who is both alike and different in their own way. Together they make a great pair. *Hardcover, 32 pages.*



Boing! No Bouncing on the Bed

Jane Seymour, James Keach **\$12.99**
Big Jim Cat becomes agitated when twins bounce on the bed, the chairs, the sofa, the bed again. *Hardcover, 30 pages.*



Two is for Twins

Wendy Chettyette Lewison, Illustrations, Hiroe Nakata **\$16.99**
Twins are two as two can be. Each one has someone else to share, to help, and to play a game. They are two times the hugs, two times the fun. Wendy Chettyette Lewison's rhyming book is a celebration of the joys of twins. With colorful watercolor illustrations by Brooklyn artist Hiroe Nakata, this is a book that toddler twins will find irresistible and fun to read. *Hardcover, 40 pages.*



Hello Twins

Charlotte Voake **\$15.99**
Twins Simon and Charlotte don't look much alike nor do they like doing the same activities. Charlotte likes to build things, while Simon likes to make things fall down. Both love books, but while Simon looks at the pictures, Charlotte likes to put her own pictures in the books. They're two of a kind. *Hardcover, 32 pages.*



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 falls on the cat and so on. *Paperback, 16 pages.*



Tiny Tired Twins

Elizabeth DeArmond **\$5.95**
Bedtime story filled with illustrations of twin animal babies, book delivers a peaceful sleepy message. *Paperback, 16 pages.*



Splat! The Tale of a Colorful Cat

Jane Seymour, James Keach **\$5.99**
Big Jim gives twins permission to paint him while he naps, if they don't get paint on themselves or the floor. And that's what they do—paint dad! *Paperback, 30 pages.*



Yum! The Tale of Two Cookies

Jane Seymour, James Keach **\$12.99**
Twins can't resist the smells coming from a basket of cookies mom has made for their hungry dad, whose fishing isn't going well. *Paperback, 30 pages.*



I Love You the Purplest

Barbara M. Joosse **\$15.95**
"Who do you love the best?" asks one of mama's children "I love you the reddest," she answers. "I love you bluest," she says to another. Story about the unique love a mother has for each of her children. Perfect for parents with twins! *Hardcover, 24 pages.*



Just Like Me

Barbara J. Neasi **\$4.95**
Simple story written by a mother of twins, describes how twins are alike and yet different. Vocabulary list helps children learn new words. *Paperback, 32 pages.*



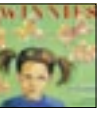
Twinnies

Eve Burling **\$6.00**
Older sister says life with "twinnies" isn't always easy. Sometimes the older child is ignored and frustrated, but being a big sister has its special rewards. *Paperback, 30 pages.*



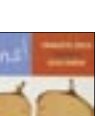
Twins!

Charlotte Doyle **\$10.98**
Illustrations, Julia Gorton
In this simple to read book for babies and toddlers, twins need double in the bottles and twice the swing pushes, but they also give twice as many kisses. *Hardback, 32 pages.*



Guess Who Needs Glasses? Bumpy and Boo Visit the Eye Doctor

Shen Manson **\$15.95**
Illustrations, Marcela Cabrera
Teacher Miss Hannah and Bumpy and Boo's mother take the class and the twin brothers on a field trip to the eye doctor. Dr. Grant gives each of the boys an eye examination, and discovers that one of the twins needs to wear eye glasses. This is a lavishly-illustrated, entertaining book for young school-age twin children who may experience a similar situation. For ages 4 to 8. *Hardcover, 32 pages.*



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Twice the Love: Stories of Inspiration for Families...with Twins, Multiples and Singletons
Compiled Edited by Susan M. Heim
Cartoon artistry by John M. Byrne

\$13.95

"Twice the Love: Stories of Inspiration for Families ... with Twins, Multiples, and Singletons," published in conjunction with TWINS™ Magazine, is a compilation of 82 inspiring stories written by parents and other family members about the joys and challenges of raising multiples. These true tales reflect a variety of topics, such as the special bond between multiples, typical crazy days in the life of a family with twins, challenges encountered in pregnancy or childhood, humorous situations created by multiples, adopting twins, and much more. If you're the parent of twins or triplets, you'll love these heart-warming and encouraging stories. This book also makes a great gift for those who are expecting or raising multiples!
Paperback, 222 pages.

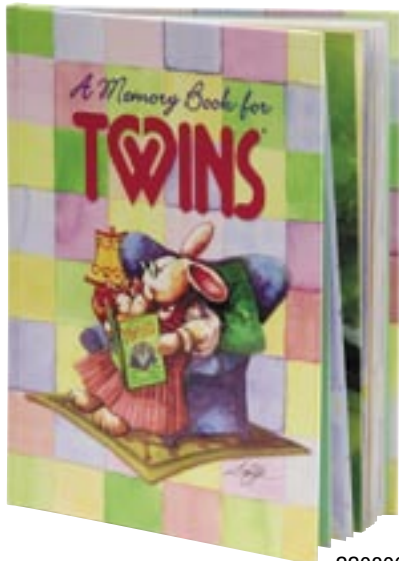
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SS03003 \$31.95 for a set of 2 books

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TWINS Exclusive! Created especially for families with twins. Vibrant colors and adorable critters adorn this chart designed to hang on the wall. A unique accent piece for your children's room. Celebrate your children's growth milestones during their early years. Your family will enjoy this lifelong keepsake. Printed in full color and laminated for long-lasting durability. Use a permanent marker to write each child's name in the banners at the top, and then note your darlings' heights at important moments in their young lives. Ribbon hanger and adhesive hook-and-loop tabs included. When your children outgrow the chart, each one gets to keep a brightly enameled customized wooden ruler to use with school projects. 40" H x 12" W

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Twin Hearts

Brush away your tears after reading this heartfelt poem by Teri Harrison, a mother of four. Twin Hearts tells of the gift of twinship and the promises and encouragement a mother gives to her children in return. Available with blue, pink or yellow border, with matching ribbon. 11" x 14" matte print comes with a gift envelope to save a special letter for each twin. Also available: SS05003 5" x 7" card for \$3.25. Available in three colors: blue, pink and yellow.



TWIN HEARTS

Awed to be expecting twins,
A mother's journey now begins
Blessed with heaven's gift of two,
I fell in love with both of you.

As days passed and months moved on,
I prayed for two, born safe and strong.
Thrilled by the promise of the joys to-be,
Like two voices joined in ABC's.
Shared sweet kisses on cheeks and lips,
Two toddlers riding atop two hips.

I promise to see you each as one,
Two connected, yet free lives begun.
Both loved completely, for all they are,
Following their own bright star.

I promise to encourage your treasured bond,
From babies to children and beyond.
Partners, soul mates and best friends,
The love of each of you will depend.

At last I stroke each newborn face,
I knew my heart was touched by grace.
My hands now full-as most will say,
Yet my life never richer than today.

Awed to hold my little ones,
Our lives together have begun.
Blessed with heaven's gift of two,
I forever love the both of you.

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A. 12"-x-15"



B. 12"-x-15"

Twin Blessing Photo Frame

Show off your darling twins with this charming photo frame from Laura Leiden Calligraphy. The rich mahogany-colored frame includes an oval opening in a moss-colored mat for your favorite photograph of your twins, plus a thoughtful verse that celebrates the differences in your children. Their arrival is a true blessing in your life! A wonderful gift to celebrate the birth of your twins for yourself. 10" x 12" frame holds one 6" x 4" photograph.

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Melissa and Doug

Noah's Ark and Circus Train Photo Frames

Popular children's toys and accessories manufacturer Melissa & Doug has created these colorful hand-painted Noah's Ark and Circus Train solid-wood table-top frames. These beautifully crafted frames will compliment any nursery or home. (Overall size of Noah's Ark is 11" x 9½". Circus Train is 14" x 10½") They each hold three, 2 1/8" x 2 1/8" photographs.

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Twice as Nice Photo Frame

This unique ceramic frame from Russ Baby will look fabulous on your dresser, bookcase, shelf or fireplace mantle. The frame has glass insert and is flocked backing, providing an unique opportunity to show off your twins. A beautiful, wonder-

ful gifts to celebrate the birth of your twins for a close family member or even for yourself. Frames are individually boxed. Twice as Nice Photo Frame is 4½" x 6" and holds two 1¾" x 2¾" photographs.

SF04002 Stars and Hearts \$12.99 each

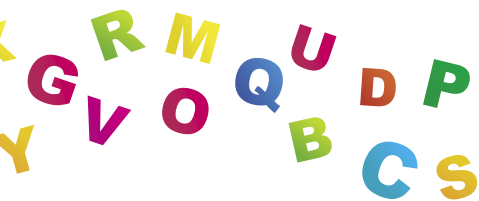


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SPEECH DELAYS IN TWINS



Help promote speech development and prevent speech delays in your toddler twins by speaking with them often. Providing plenty of opportunities for them to practice. Speech language pathologist, Karlie Geiser, recommends using speech therapy techniques to help stimulate correct sound production. If your twins frequently

mispronounce or omit sounds when speaking, try to incorporate the following tips into your conversations with them:

- If your twin is omitting the final sound of a word or words, stress all final sounds (e.g., c-a-T. I see a c-a-T).
- If your twin has trouble pronouncing a specific sound, stress the sound when it is presented (e.g., C-a-r, C-r-a-C-K-er, tr-u-C-K).

Incorporate these activities during playtime, through reading books together, and when talking about the things you see and do in your daily activities. With twins it is especially important to provide each child the opportunity for one-on-one individual practice—each child's skills may be different. Games that facilitate great speech and language opportunities for early developing sounds include: bubbles, I Spy, and rhyming activities.

Play the loser

Being a toddler, especially a toddler twin, can be a frustrating battle. Toddlers are weaker, slower, less coordinated and can't speak as well as older children. Add twin competition to the mix and at least one of your twins is bound to feel inadequate. Harvey Karp, MD, best-selling author of *The Happiest Toddler on the Block*, recommends helping your toddlers win "little victories" throughout the day. Some suggestions: Ask your twin to give you a high-five, and pretend he is so strong it hurts. Or point to your foot and pretend to have forgotten the name of the clothing item you put on it—until your twin exclaims "Shoe!" Play the loser throughout the day and let each toddler experience a few victories. Remember to play the loser for each twin separately. "Everyone likes to win, especially a toddler, because winners feel like confident players in our society."



Ryan and Gabor, 21 months

Gossip is good!



Raelee and Conner, 4 years

Normally we are taught that it is rude to whisper. However, "gossiping" to a child means speaking our opinions in a whisper to make our children pay closer attention to them. Overhearing a comment makes it many times more powerful, says Harvey Karp, MD, in his best-selling book, *The Happiest Toddler*

On the Block.

For this technique, begin with your twin close by. Loudly whisper some praise about him to someone else (your spouse, his teddy bear, his twin). Don't look at your child when you do this and be sure to heighten his interest by making the conversation look like a really big secret. Later in the day, repeat the same compliment, but this time to your child directly.

Your toddlers will begin to believe in the phrases that have been "accidentally overheard," because we humans tend to believe the things we accidentally overhear, more than the

Never skip a nap

Establishing a nap-time routine is tough for any mom, but quite a challenge for a mommy of twin infants! The key to good napping is consistency and predictability. Schedule naps for the same time every day.



Sidney and Cohen, 2 1/2 months

In doing this your twin infants will adjust their sleep schedules and eventually learn to depend on—and possibly look forward to—their daily naptime. Don't make naptime overlap with a lunch period. And don't plan it for too late in the day, or you'll push bedtimes too late. Some twins require different amounts of sleep, but because they are the same age, most times moms can get their twin infants to nap simultaneously. Try playing the same music during every nap. This will teach even the youngest child that when she hears this soft music it means naptime. Be sure the room is dark, and eliminate noisy interruptions—turn off your phone ringer, put the dog outside, turn off the TV. Create a naptime ritual and stick to it! Babies respond well to predictability and adapt accordingly.

SUN PROTECTION

Spring and summer sunshine are just around the corner. For those living in higher altitudes, even winter sunshine can be damaging to skin and eyes. Did you know that protecting your twin infants and toddler twins from too much sun exposure can actually help prevent skin damage as they get older? The American Academy of Pediatrics recommends lightweight long pants and long-sleeved shirts when outside in sunshine for babies younger than 6 months, and only minimal sunscreen to small areas such as the face.

Children of any age should wear a brimmed hat for eye protection as well as sunglasses if they are old enough to keep them on. (There are great kiddie-sunglasses available now for small children!) Sunscreen with an SPF of 15 or greater should be applied at least 30 minutes before going out in the sun and should be reapplied every two hours (and immediately after swimming and excessive sweating.) Remember to apply sunscreen on the backs of your twins' hands, tops of their feet, behind their knees, the tips of their ears and the backs of their necks. A good habit to get into is to apply sunscreen year-round before you go outdoors. Form the habit early, same as wearing seatbelts.

Your goal: Never allow your children to become sunburned, at any age. Not healthy.

Send Growing Stages questions to mom of twins Kelly Woods at kwoods@lightblast.net. Kelly is a pediatric and family nurse practitioner who works in a pediatrician's office doing primary care. In each issue, she addresses topics of most interest to readers. She has identical boys, Aidan and Bailey, 2. Kelly and her husband, Matt, live in central Minnesota.

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∴ *Where's the chocolate?* >>



Double Takes

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

1:: Jacob and Emma
8 months
Bellevue, WA



2:: Jonathon and Ella
2 years
Maineville, OH



3:: Shane and Kyle
6 months
Simi Valley, CA



4:: Claire and Elena
3 years
Edgewood, NM



5:: Tierney and Josie
3 years
Manitowoc, WI



6:: Deven and Aiden
4 months
Menomonie, WI



7:: Alissa and Teresa
2½ years
Oxford, CT



8:: Victoria and Jessica
3 years
Hermansville, MI



9:: Alyssa and Julia
3½ years
North Reading, MA



10:: Taylor and Brooke
1½ years
Canton, MA



11:: Audrey and Ivy
8 months
Warren, MI



12:: Sierra and Trinity
7 months
Wilmington, CA



13:: Thomas, Isabel, Sophia and James
4 months, 4 years
New Orleans, LA



14:: Kofi and Rio
3½ years
New York City, NY



15:: Aiden and Conner
6 months
Chicago, IL



16:: Chase, Audrey, Brianna and Dane
4 years, 2 years
St. Cloud, FL



17:: Gabriella and Adin
1 year
Rockville, MD



18:: Julia and Leah
20 months
Milford, MA



19:: Keifer and Keigan
2 years
Decatur, TX



20:: Lauren and Katie
1½ years
Holmdel, NJ

Photo Tips

What we are looking for:

- Sharp focus
- Crisp, clean, vivid color (no red, 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 39 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:

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Attn. Art Director
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ZM - 19	14 - DZ	9 - MZ	4 - UNK
ZM - 18	13 - UNK	8 - DZ	3 - MZ
ZM - 17	12 - DZ	7 - DZ	2 - DZ
ZM - 16	11 - MZ	6 - UNK	1 - DZ

Based on parental reports:

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Stuck in the zero-percentile

From the get-go, we've been trying to get our children to eat. Despite all of our aggressive strategies and innovative ideas, it's never been easy. When I asked my pediatrician about their lack of weight gain for the eighth time in two years, he said, sounding a bit desperate, "Look, somebody's got to be in the zero-percentile; otherwise there couldn't be a percentile system. They're probably never going to be sumo wrestlers."

I told him I just wanted them to be closer in size to their peers. I realized, however, that I was driving him nuts, so I made a deal. I asked him to promise me that if he were worried about their height or weight, he'd tell me. If he didn't, I wouldn't ask. Since then, we sometimes have talked about their iron, calcium or protein intake, but I keep my fears about their size to myself.

Well, that's not entirely true. My husband and mother hear about them. When friends express concern about their kids' weight, I join in, but I try not to obsess over my inability to nudge Adrienne and Julian into a higher weight bracket.

That's not to say that my husband and I have given up. We spend a ridiculous amount of time urging them to eat, and we've come up with a variety of eating games, some quite successful. We learned one from my sister-in-law, who pretended the kids' favorite relatives were on the spoons of food they were eating. "You're going to eat your cousin Luci," she said. "Here she comes!" Then she'd go through a dozen different family members, and before long they were done with all their food. Soon, however, our two lost their initial excitement.

Then we tried word games. We asked the kids to think of a word they wanted to spell. Each time they guessed a letter, we wrote it down on a piece of paper so they could see it, and their reward for guessing the letter was a bite of food. If they guessed a par-

ticularly difficult letter, a silent "e" in the word "home," for example, they could eat two bites. This game held their attention for months, and improved their spelling. Suddenly, they lost interest.

A few weeks later, I sketched a clock, and I put the big hand on the 12 and the little hand on the 3. If they guessed the time, they could have that number of bites. When it was 3:00, for example, they could have three bites. This was their favorite game, and they were learning how to tell time. Eventually, the novelty wore off.

I began to read a lot about children and nutrition, for more ideas. Most nutritionists and pediatricians urge parents not to bribe children at meals; we shouldn't use dessert as a reward. Some experts believe dessert seems exciting to kids simply because it's always the prize for eating the other stuff, which the kids assume must be bad—or at least not as good as the treat at the end.

We admit it. We often use dessert as a reward. We try not to. We've even tried putting dessert on the plate with other courses, as one nutritionist recommended. We found our kids were so distracted by the dessert in front of them at the beginning of the meal that they couldn't concentrate on anything else.

One night when I'd reached the end of a long, trying dinner with the kids, their dad walked in from work as I was handing each of them a dime. "Congratulations!" I said. "Both of you did a great job eating your broccoli, noodles and ham."

"You're paying them to eat?" my husband asked, astonished.

"Yeah," I said. "What's the difference

between rewarding them with ice cream and pudding versus rewarding them with money?"

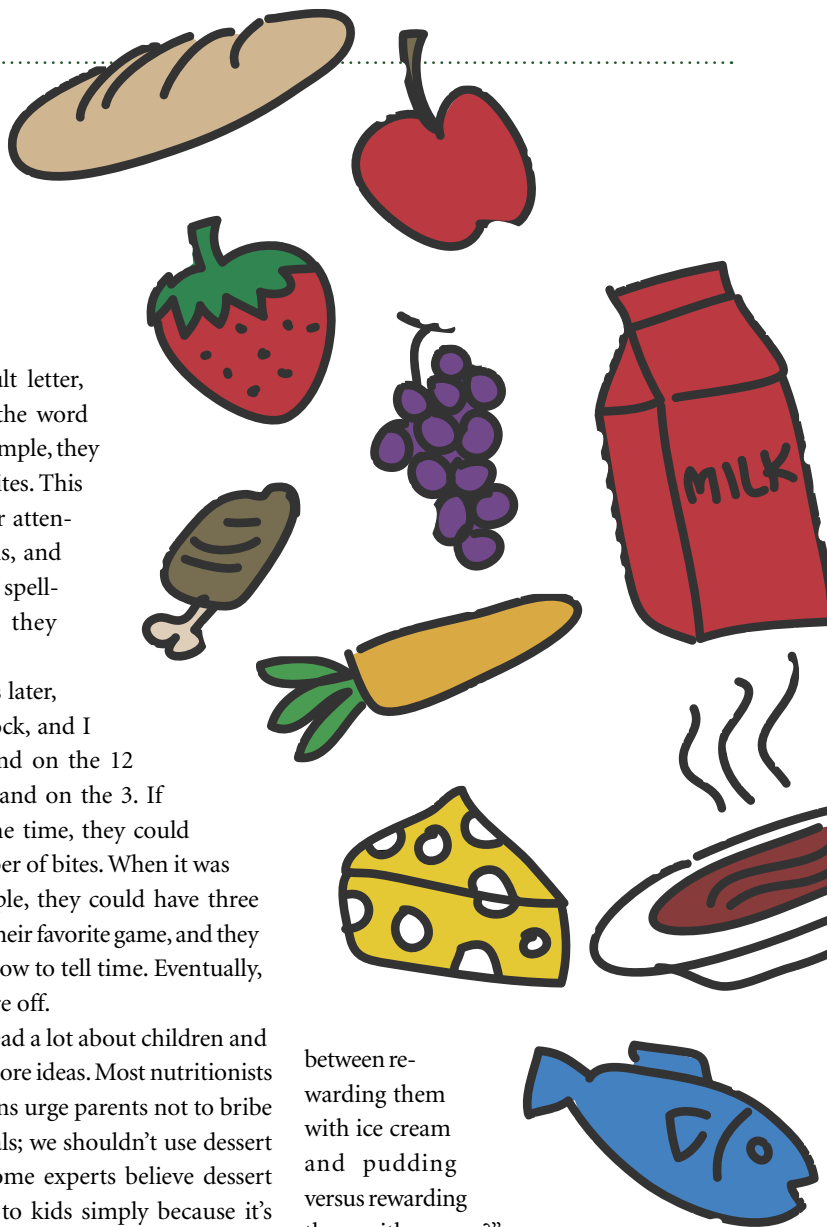
"You have a point there," he said. "A strange point, but a point."

We've eliminated these sorts of deals because they don't seem like healthy solutions, but sometimes we fall back into our negotiation strategies.

Overall, Adrienne and Julian have pretty nutritious, well-balanced diets. Occasionally we give in to junk food and soda because the kids wear us down.

But I knew we'd reached a new low when we went out for lunch with friends and I heard myself tell my sweet-toothed daughter, "You can have your cookie after you finish your fries." ♡

Lauren Kaftka, mother of 8-year-old b/g twins, Julian and Adrienne, plans to teach English as a second language in the public schools.



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