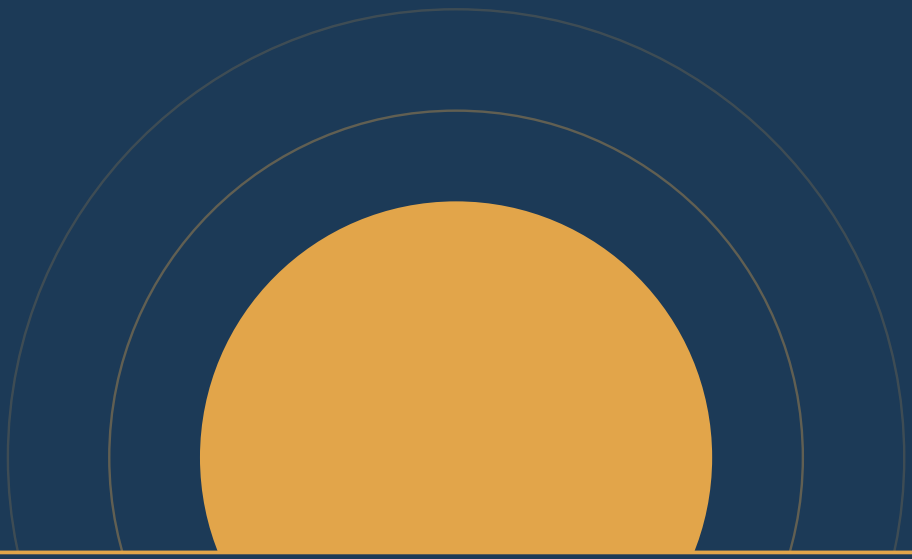
*Mamavela*

# Expecting Twins

Chorionicity, the scan calendar, warning signs, when and how twins are born, feeding two and the first weeks at home, with a care journal.



Free sample

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# Welcome

Two heartbeats on the screen. Maybe you laughed, maybe you cried, maybe you went very quiet and started counting car seats in your head. Whatever you felt, it was normal. A twin pregnancy is still, first of all, a pregnancy, and most of what you have read about pregnancy applies to you. But some things are different: the care you are offered, the number of scans, the signs to watch for, the timing of the birth, and of course life afterwards, with two babies to feed at three in the morning.

This guide gathers what the National Institute for Health and Care Excellence (NICE, which sets the standard for twin care in England), the NHS, the American College of Obstetricians and Gynecologists (ACOG) and the largest trials say about twin pregnancy, and turns it into explanations, calendars, questions to ask and pages to fill in. Every figure comes from a named source, listed at the end with the date it was checked.

## What this guide is, and what it is not

It is information, organized and explained. It is not medical advice and it does not replace your obstetrician, your midwife or your specialist twin team, who know your pregnancy. It contains no medicine doses and no diagnosis. When something worries you, the right move is always to call them; you will read that sentence several times, on purpose.

> Call your maternity unit or labor and delivery straight away, or your emergency number (911 in the US, 999 in the UK), if you have bleeding, fluid leaking from the vagina, regular tightenings or period-like pains before 37 weeks, a severe headache, problems with your vision, sudden swelling of the face, hands or feet, pain under the ribs, or if you feel your babies moving less than usual. With twins, do not wait to see if it settles.

## Twins in a few numbers

| Fact | Source |
|---|---|
| About one third of twins are identical and two thirds non-identical | NHS |
| The chance of identical twins is about 1 in 250 for everyone; it does not run in families | NHS |
| Worldwide, twin deliveries rose from 9.1 to 12.0 per 1,000 deliveries between the early 1980s and the early 2010s, about 1.6 million twin pairs a year | Monden and colleagues, 2021 |
| About 60 in 100 twin pregnancies end in spontaneous birth before 37 weeks | NICE NG137 |
| More than half of all twins are born preterm | ACOG |

## Your twin pregnancy at a glance

| Period | What is happening | What to do |
|---|---|---|
| Up to 14 weeks | Nausea and tiredness are often stronger; the first-trimester scan shows the number of babies and chorionicity | Ask about chorionicity; book your specialist appointments; start folic acid if not already taken, as advised |
| 14 to 20 weeks | Energy often returns; the bump shows early; scans every two weeks start at 16 weeks if your twins share a placenta | Cervical length scan between 16 and 20 weeks as offered; plan adjustments at work |
| 20 to 24 weeks | The detailed anomaly scan (longer with twins); blood count at 20 to 24 weeks | Read Chapters 5 and 6; learn the warning signs by heart |
| 24 to 28 weeks | Birth planning starts; NICE says all key points should be discussed by 28 weeks | Ask your birth questions; visit or read about the neonatal unit |
| 28 to 32 weeks | Growth scans continue; tiredness, breathlessness and swelling often increase | Pack the hospital bags by about 30 weeks; install car seats; organize help |
| 32 to 37 weeks | Planned birth is discussed for your type of twins; many twins are born in this period | Keep every appointment; call at once for any warning sign |

## How to use this guide

Read Chapters 1 and 2 as soon as you can: they explain the word that will shape your whole pregnancy, chorionicity. Fill in the care calendar in Chapter 3 after your first specialist appointment. Read Chapter 5 (warning signs) once and keep it within reach. Chapters 6 and 7 should be read by about 24 weeks, because NICE recommends that your birth plans be discussed from 24 weeks and by 28 weeks at the latest. Chapters 8 to 11 are for the third trimester, when you have the energy to plan the first months.

# Chapter 1. How twins happen, and the word that matters: chorionicity

## Identical and non-identical

The NHS explains the two ways twins happen:

- **Non-identical (dizygotic) twins** come from two separate eggs, each fertilized and implanting in the womb. They are no more alike than any other two siblings, and may be the same sex or different sexes. They are the most common.
- **Identical (monozygotic) twins** come from one fertilized egg that divides in two. They share the same genes and are always the same sex.

Factors that make non-identical twins more likely include a family history on the mother's side, being over 35, some ethnic backgrounds and fertility treatment such as IVF when more than one embryo is transferred. Identical twins happen by chance.

## Why your team talks about placentas and membranes

For your care, what matters most is not whether your twins are identical but whether they share a placenta. NICE explains that the risks in a twin pregnancy are determined by chorionicity, not by zygosity. Three words describe the possibilities:

| Type | What it means | Can the twins be identical? | Frequency |
|---|---|---|---|
| Dichorionic diamniotic (DCDA) | Each baby has its own placenta and its own sac | Non-identical twins always; some identical twins too | Most twin pregnancies |
| Monochorionic diamniotic (MCDA) | The babies share one placenta, but each has its own sac | Always identical | Less common |
| Monochorionic monoamniotic (MCMA) | The babies share one placenta and one sac | Always identical | Rare |

## How chorionicity is found

NICE recommends a first-trimester ultrasound scan to estimate the age of the pregnancy and determine chorionicity and amnionicity, ideally at the scan done when the baby's crown-rump length measures 45 to 84 mm, at approximately 11+2 to 14+1 weeks. The NHS adds that at the 12-week scan you should be told whether the babies share a placenta, and that if this is not clear you should be offered another scan. If you first come for care after 14 weeks, NICE asks that chorionicity be determined at the earliest opportunity, and a second opinion sought if it cannot be determined.

**Ask, and write it down.**

At your first scan, ask: "Do my babies share a placenta? Is there a membrane between them?" Write the answer in your journal (Chapter 14). It determines how often you will be seen, which complications your team watches for, and when your babies are likely to be born.

## Labels for each baby

From early on, your sonographer will name the babies, often "twin 1" and "twin 2", or "A" and "B", and describe where each one lies (left, right, upper, lower). The labels follow position in the womb, so they can change; ask how your team keeps track. Some parents give each baby a nickname for the pregnancy, which helps to think of them as two persons.

## After fertility treatment

If you conceived with IVF or other fertility treatment, you may already have known you were carrying two embryos, or the news may have been a surprise after a single embryo transfer, since an embryo can also split into identical twins. Your pregnancy care moves to your maternity team in the usual way; tell them about the treatment, the date of transfer (which gives a precise due date) and the number of embryos transferred. Many parents who went through fertility treatment feel extra anxious during pregnancy, after a long road to get here: say so to your team, who can offer extra reassurance and support.

## When the news sinks in

Learning that you are expecting twins often brings two waves: delight, then a long list of practical worries about space, money, work, feeding and sleep. Both are normal. It can help to separate the worries into three groups: what needs a decision now (very little, usually), what can wait until the second trimester (equipment, leave, the car), and what will sort itself out with help once the babies are here. You have more time than it feels like today.

# End of the sample

Thank you for reading this far. We hope these first pages already feel useful, and that you can see how the rest of the book is built: clear steps, pages to fill in, sources you can check.

**The full book has 34 pages.**

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