

THE MULTIPLE BIRTHS FOUNDATION



How Do You Get Twins (or more) to Sleep?



A look at some of the reasons for
difficulty and practical suggestions
for solving them



Supporting Professionals Supporting Families

HOW DO YOU GET TWINS (OR MORE) TO SLEEP?

**A look at some of the reasons for difficulty and practical
suggestions for solving them**

Compiled by:

Ruth Cockburn RGN RM HV FP

Alison Jones RGN RM

Barbara Read BSc. Dip Couns.

Updated 2006 by:

Elizabeth Bryan MD FRCP FRCPCH

Rosie Ticciati RGN HV

Jane Denton RGM RM

First published in 1996, Second edition 2006,

Third edition 2009, Fourth edition 2014:

The Multiple Births Foundation

Hammersmith House - Level 4

Queen Charlotte's & Chelsea Hospital

Du Cane Road

London W12 0HS

Tel: 020 3313 3519

Email: mbf@imperial.nhs.uk

Website: www.multiplebirths.org.uk

Copyright © Multiple Births Foundation 1996, 2006, 2009, 2014

ISBN 0 9517709 4 2

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form or by any means, electronic, mechanical, photo-copying, recording or otherwise, without the prior written permission of the Multiple Births Foundation.

Available From:

The Multiple Births Foundation

Limited Company Number: 4426289

Registered Charity Number: 1094546

HOW DO YOU GET TWINS TO SLEEP?

INTRODUCTION

One of the most common problems faced by parents of twins, triplets or more is how to get them to sleep through the night. Whether as babies or small children, this can be a challenge. At some stage or other even single born babies go through a difficult patch, but two or more wakeful babies are capable of crying, playing and socialising in shifts.

Some parents can tolerate broken nights better than others but many become irritable and exhausted. Establishing a good sleep pattern is important, mainly for the wellbeing of the parents and the rest of the family. Remember, though, that these endless nights will not go on forever, and sooner or later the babies will settle into a routine – this should be encouraged.

In this booklet we offer a number of suggestions that families have found helpful. We don't expect you to take up every idea, but to use the booklet as a basis for planning a bedtime routine.

We also recommend that parents adhere to the Department of Health guidance on sleep (see Useful Addresses).

WHY WON'T THEY SLEEP?

There are a number of reasons why two or more babies may be more difficult than a single born to settle into a good sleeping routine:

- Twins are often born prematurely, as are almost all triplets and more.
- Many will have spent time in special care baby units. This means they get used to being touched and nursed at very frequent intervals and they miss this when it stops.
- Sometimes one of the babies comes home before the other(s), and it's hard to get into a routine if you are still visiting one or more in hospital.
- Tiny babies have small stomachs so need more frequent feeding. Remember that small babies wake every 2 or 3 hours for feeds. They don't know the difference between day and night. By the time they are 4 to 6 months old, they should not need a night-time feed, but this will vary according to the baby and their prematurity and weight.
- You may take a little while getting your confidence in handling two or more very tiny babies.

- Several people may be helping with bottle feeding and each in a slightly different way. This need be no problem in itself, but the babies may take a little longer to settle into a routine.
 - Even if a mother is breastfeeding, there may be more than one person changing the babies, and the babies may take a while getting used to different ways of being handled.
 - You may go to a restless baby more quickly than you need for fear it will wake the other (and then the rest of the household – not to mention the neighbours).
 - Older babies and toddlers may wake each other to play at night and then soon realise that you'll go in to see them – which is just what they want!
 - Older brothers and sisters may be upset by the amount of time taken up by the new babies, and seek extra attention and cuddles by not settling at night.
- not be too hot. Do check that they do not get too warm, especially if they are sharing a cot (see separate section on Co-bedding).
- Ensure that the baby's feet are touching the bottom of the cot so that he cannot wriggle down under the covers.
 - If the babies have been sleeping together, try them in separate cots, but remember that one baby may feel happier in a cot and the other may prefer a Moses basket. Be prepared to adapt and to be flexible.
 - Consider the advantages and disadvantages of using a dummy. A dummy may help to settle a baby but the upset when he loses it in the night can cause more distress. A thumb may solve the problem.
 - In the early days synchronise feeding if both babies are still needing night feeds. When one wakes, try to feed the other one at the same time. However, be prepared for one being ready to sleep through the night sooner than the other.
 - Consider waking the babies and feeding them before you go to bed.
 - If you usually want a drink or a snack yourself when you are feeding the babies, prepare it in the evening and leave the jug or thermos in the room where you'll be feeding, to save effort in the middle of the night.

THE FIRST SIX MONTHS

Sleep habits are learned behaviour and it is sensible to plan bedtimes from the start. It is very important that both parents and other helpers are united in following a consistent and firm plan.

- Wherever your babies sleep, they should be placed on their BACKS unless there is clear medical advice to do something different. They should

- Avoid lifting the baby as soon as he cries or he will quickly associate crying with a cuddle. The second baby will usually sleep through his twin's crying. If he does wake, and is due for a feed go ahead. If a feed is not due do not lift him just reassure and resettle him.
- Put the babies down to sleep at regular times during the day.
- Use heavy curtains, or a blind in the bedroom. A rug over the curtain rail will help keep the light out even on a summer evening.
- Avoid turning the main light on as you enter the room during the night. A night light may or may not be useful, but it will at least provide enough light to stop you bumping into things.
- Go through the same bedtime routine every night. As early on as possible, try to set one that suits your family. Do make the effort to change the babies into night clothes (nighties are less fiddly than babygrows). You may prefer to give them a warm bath in the evening instead of the morning. Try to keep a relaxed atmosphere. A gentle massage with baby oil may calm both you and the babies. Music in the room may soothe everyone.
- Leave the changing area ready for next time. Make sure you have two clean nappies, wipes, a change of clothes and clean sheets before you put the babies to bed. It saves fumbling in the airing cupboard in the middle of the night.

CO-BEDDING

Most parents will consider the question as to whether or not their babies should share a cot during the first weeks or months. There is no evidence to suggest that there are any dangers to this practice. Indeed preliminary studies suggest that co-bedded babies have more settled sleep and are more likely to wake at the same time. One study found that co-bedded preterm twins gained weight more quickly and were ready to leave hospital sooner.

- The advantages of co-bedding are that twins are more likely to wake at the same time and that the babies provide reciprocal support for each other. As a result, a good sleep routine is often established earlier.
- Another advantage is that babies are more likely to remain longer in the parents' bedroom as one cot takes up less room.
- The disadvantage of co-bedding is the possibility of disturbance if the baby is restless for any reason. However, it is not the case, as many parents believe, that one crying baby will wake the other.
- If you are putting them in the same cot, the babies should be placed on their backs, side by side, with their feet touching the bottom of the cot so that the covers can be properly tucked in.
- Many babies will be happy to share a cot until they are physically too big to fit. It is then advisable to move them into separate cots but, if possible, to

position the cots in such a way that the babies can still touch each other.

SIX MONTHS TO A YEAR

By now a well-established routine should have developed. Babies should recognise the difference between day and night. They will realise that daytime is when you are all together doing things and night-time is quiet and for sleeping.

The babies may demand more attention if one is unwell, or you have moved house or some other unsettling event has occurred. You should try to return to the normal routine as soon as possible. If you give in to their demands they soon realise that bedtime can be used as a powerful attention-gaining tool.

- Always use a calm, gentle, reassuring voice at bedtime. It may not be how you feel, but getting the children to bed swiftly will allow you more time to unwind later.
- Keep to a regular routine. This could include a bath, cuddles, story or singing before they go to sleep.
- If there is a second adult to help, separate bath times can be much more relaxing for everyone and also provide the opportunity to give each baby individual attention.
- Resist the temptation to cuddle or rock the babies to sleep because they will want the same again if they wake in the night. Put each baby down in

his cot when he is still awake. Give him a goodnight kiss, and a few comforting words, e.g. “Sweet dreams” or “See you in the morning” and leave the room, leaving a night light on if you wish. This is not the time to tidy their room as they will want to watch, chat or join in.

- It is usually better not to offer milk at night, just water from a cup or perhaps a dummy.
- Ensure that the babies are eating adequately during the day – a hungry baby will of course demand a feed during the night.
- If a baby wakes at night, think about what the cause could be. It may be that he is too cold, too hot, has a dirty nappy; is teething or is ill.
- Think about the disadvantages of having older babies in your room. Noises like snoring or getting up may disturb them.
- Think carefully about the advantages of letting older babies sleep in their own room, since they may then associate the “feel” of the room with sleeptime. A baby alarm will enable you to hear them.
- Separate the babies if one is keeping the other one awake. You could borrow a travel cot and move one of them to another part of the house, preferably not your own room.

- Try to settle him without picking him up. Stroking, talking softly or turning on a musical toy is often enough to reassure an older baby. Don't let the baby fall asleep in your arms at this age or he will become conditioned to expect this.
- If you stay in the room until he goes back to sleep, he will want your company every bedtime.
- Try not to take the babies into bed with you if they are crying. They will quickly come to think it is a reward for crying.

TODDLERS AND OTHER CHILDREN

As children grow, they will need varying amounts of sleep. Some will always need more sleep than others.

- Encourage each child to have his or her own cuddly toy, personal blanket or whatever is suitable that will offer familiarity and comfort, and which they will never have to share.
- When you read a story that causes discussion, you should be aware of giving one more attention than the other. If they sleep in the same room, then sit on the floor, with both of them so that both can see the pictures. If the children sleep in different rooms read the story in alternating rooms on different nights, or use a "neutral" room, perhaps your own. A taped story played on the landing settles some children.
- Encourage a happy, secure, sleeping environment. Decide who is going to sleep in which bed and keep to that plan. If, for instance, you allow the first child to reach the room to sleep in the top bunk, you are creating a competitive atmosphere at a time when they should be slowing down.
- The children should be able to regard their bed area as their own private "sanctuary". It will probably be the only place in the house where they are not expected to share their toys and where precious things are not touched.
- However tired you are, don't threaten them about bedtime. It then takes you much longer to get them to sleep. It also connects sleep with a negative experience.
- Never use the bedroom as a "naughty" area. It will become associated with unhappy memories and the children may be reluctant to go into it when they are tired. If you send only one child into the room as a punishment he may well play havoc with his sibling's toys and make everyone even more annoyed.
- Discourage afternoon naps after about 3.30 p.m. This isn't always easy if, for example, you have to collect older children from school when they may try to sleep in their car seats or the buggy. Try putting on a tape or CD to keep them entertained, or point out interesting things.
- Ensure that they always have plenty of fresh air and exercise during the day.

- A night light or hall light may be reassuring as they go to sleep.
- Try not to rush them to bed. If you are about to go out, they will sense this and play you up.
- Avoid frightening bedtime stories. When they begin to read to themselves, keep an eye on what they are reading.
- Television is best stopped before the evening meal, although a short, favourite video may be a compromise.
- Encourage them to look at or read books in bed, rather than playing which may prevent them from settling down.
- Try not to let the children fall asleep on the sofa or on your lap as they may come to associate this with going to sleep.
- If a child starts waking more often during the night, check what the cause might be. If it is because of a bad dream, don't discuss it at once or it might make it seem more real. Instead ask about it casually during the day.
- Despite the temptation, don't pick him up and cuddle him if he wakes during the night. Stay with the child, perhaps kneeling by his bed, and reassure as necessary. But be consistent and firm when the child has settled and is ready to be left.
- Discourage the children from coming into your bed. This often causes more

sleeping problems particularly if the twins start competing for time with you. Take them back to their own beds. Be firm and don't give in. You will need your own sleep to cope with the day ahead.

- A change in routine, such as a holiday, illness or arrival of a new baby can provoke problems. Refer to stage one of the controlled crying programme (see page 7) which can frequently re-establish sleep patterns and provide security for the child.

FURTHER SUGGESTIONS

If you are having a lot of trouble with the children's sleep problems, keep a sleep diary. Write down who wakes, when and why. You will soon see whether there is a pattern and what the problem appears to be. Your notes will also be helpful, should you need to consult the family doctor or health visitor.

If the children won't go to bed, think about the likely reasons and work round them. For example, if they are playing wild games in the evening, then set aside this time for a peaceful game but ensure that they have a longer play outside, earlier, the next day.

If bedtime is too late, perhaps because of holidays or hot weather, try bringing the time forward by 15 minutes each week until the optimum time is reached.

If there are persistent difficulties in getting one or all the children to sleep, you may

have to review the whole bedtime routine. The children may be ready to move on to something more “grown up”.

If you are certain that there are no untoward problems, put the child in his cot or bed, soothe or stroke him and then say goodnight firmly and leave the room. If there is no further response from you, the child will realise that there is no point in demanding attention. You may need to move the other child into another room if he is contributing to the problem.

Gradual withdrawal is for children who have got used to having you by them as they fall asleep. This often happens after a stay in hospital. The first night, stay until he has gone to sleep, the next move further away from the bed but wait until he is asleep. Once the child accepts you are sitting by the door, try leaving before he is asleep.

Ignore any request or excuses so that he, again, realises that there is no point in protesting at that time of night. You could tell him what you are about to do, for example, fill the washing machine, so that he realises he is not about to miss any excitement.

SLEEP AND SIBLINGS

Twins may not settle if they think they are missing out on what an older brother or sister may be doing. This is often precious time for the single born baby, whether on their own or with his parents, so you should be firm about putting the younger children to bed earlier.

CRYING AT BEDTIME

A controlled crying programme can be used for children over six months who cry on being put to bed and also for children who continue to wake during the night.

This can have quick results although the programme may sound difficult to put into practice. For it to be effective you and your partner (or other helper) must be committed to carrying it out. If you give in even after long periods of crying your children will learn that they just have to cry for a long time before being rewarded.

On the first night of the programme, put your children to bed at the normal time. Settle and reassure them using a firm but gentle approach and then leave the room.

If the crying starts, it is important that you wait for five minutes before you re-enter the room. When you do so, once again use a firm but gentle reassuring approach. Do not pick the child up and only spend a few seconds in the room. If the child is still crying, or begins to cry again as you leave, you must now wait for ten minutes before going back and repeating the same process. Your next visit will be after 15 minutes. If you feel that 15 minutes is the longest you can leave a crying child, that is all right. You should then go back every 15 minutes in the way described until the child falls asleep (which he will do eventually).

If your child later wakes, go back to waiting for five minutes before going in for the first time. This waiting period is then increased as before until the child falls asleep again.

On the second, or third night you can increase the initial waiting time by another five minutes. Thus, your first visit will be after the child has cried for ten minutes, then 15 and finally 20, thereafter keeping your visits to 20 minute intervals for the duration of the crying.

You then repeat this during the night whenever a new wakefulness occurs, starting each time with a 10 minute wait. It is important that the time is extended between visits and also night by night, otherwise the process will just become a game. Moreover, by waiting a bit longer each time the child will eventually get the message that nothing exciting or satisfying is going to happen if he cries.

Your visits are important in reassuring the child that you are still around and that he is safe. He too must feel that you have confidence in what you are doing.

It is often very hard in the middle of the night to be consistent, but if you are determined that your baby should learn to sleep through the night it is crucial to keep calm, stick to the routine (using a clock to stop yourself rushing in too soon).

Many parents of twins – let alone triplets or more – are naturally concerned that one crying baby will wake another. They may do sometimes but this is not always so. How often have you walked down the road with one of them screaming their head off while the other is fast asleep? If you are worried about this you can separate the children, but in our experience this is usually not necessary.

A few children need only minimal sleep and all your efforts to get them to sleep longer may be unsuccessful. In this case seek help and support from your health visitor in devising/designing strategies that will at least keep your child in their own bed or room reading a book or doing a similarly quiet project.

Try to avoid comparing your own child's sleep pattern with that of other people's children as this can be disheartening as well as misleading.

Don't feel cut off or abandoned if you can't get your twins to sleep. At the end of the booklet there are addresses of experienced groups that are interested in helping you. Contact them if you feel you can't discuss the problem with anyone at home or if you need more detailed advice about a specific problem.

SUGGESTIONS FOR EXHAUSTED PARENTS

Babies will soon sense if you are tired, irritable and upset. Here are some ideas that may help prevent this.

- If you've had several broken nights, consider having just one adult "on duty" each night. At least the other one will have a good night's sleep. It may mean sleeping downstairs on the sofa, but many parents have found this worthwhile, and you'll be able to cope with the night ahead more easily. Knowing that it will soon be your turn to sleep through may also help you not to resent the nights that are disturbed.

- The “off duty” parent might consider using earplugs. Should your partner work shifts, or not be at home, ask a friend or relative to help with the nights. You’ll be surprised how willing people are when asked.
- Find someone else who has had twins and been through it all. A few minutes on the telephone may help put things into perspective. It may be helpful to join your local Twins Club.
- Talk to your partner about how you are feeling, but not in the middle of the night! He may also be feeling overwhelmed by the amount of care the babies require. He may be upset at seeing you so tired and irritable. It is important that both parents are consistent and support each other.
- When the babies are asleep, put your feet up. Don’t feel guilty just because there is lots of housework to do.
- REMEMBER THAT SLEEPLESS OR DISTURBED NIGHTS WON’T LAST FOREVER. Before you know it, they’ll be teenagers who won’t wake up till midday!
- Talk to your local Health Visitor. Often Sleep Clinics are run to provide support and information.

Reading a magazine, dozing, watching TV or having a bath, whatever the time of day, will make you – and therefore the rest of the family – feel better. Remember, nobody will thank you if you collapse from exhaustion so do listen to your own needs – unplug the telephone and put a “Please do not disturb” sign on the front door.

- When someone comes to visit, give them a job! Most people have come to see you just because they care about you, and will feel wanted if they can help out in a practical way.

USEFUL ADDRESSES

For more information and publications contact:

The Multiple Births Foundation

Hammersmith House - Level 4
Queen Charlotte's and Chelsea Hospital
Du Cane Road
London
W12 0HS
Tel: 020 3313 3519
Email: mbf@imperial.nhs.uk
Website: www.multiplebirths.org.uk

Cry-sis BM

Cry-sis London
Website: www.cry-sis.org.uk

Cry-sis Helpline

Telephone: 08451 228 669
(every day 9am-10pm)

Tamba

(Twins and Multiple Births Association)

Telephone: 01252 332 344
Email: enquiries@tamba.org.uk
Website: www.tamba.org.uk

Tamba Twinline

Tel: 0800 138 0509
(10am-1pm, 7pm-10pm every day)

Twinline is a confidential helpline to help support parents of multiple births who are under stress. Most of the trained listeners are parents of twins themselves.

FURTHER READING

Expecting Twins?

By Professor Mark Kilby and Jane Denton
Quadrille, London 2014
ISBN: 978 1 84949 316 1

Twins and Multiple Births

by Carol Cooper
Vermilion, London 1997,
Reprinted 2004, 2012
ISBN: 0 09 181471 5

Double Trouble

by Emma Mahoney
Thorsons, London 2003
ISBN: 0 00 715398 8

Baby Secrets

by Jo Tantum & Barbara Want
Penguin, London 2005
ISBN: 0 718 14709 X

Further Information

For more information about the
Multiple Births Foundation, call us on
020 3313 3519
and request an information pack.

Alternatively, you can log on to our website, at:
www.multiplebirths.org.uk
to find out more.

The Multiple Births Foundation is a charity and
relies for its income on grants, donations and
fundraising activities.

The Multiple Births Foundation
Hammersmith House - Level 4
Queen Charlotte's & Chelsea Hospital
Du Cane Road
London W12 0HS

Tel: 020 3313 3519
Email: mbf@imperial.nhs.uk
Website: www.multiplebirths.org.uk

Registered Charity no: 1094546
Limited Company no: 4426289

© Copyright
Multiple Births Foundation 1996, 2006, 2009, 2014

THE MULTIPLE BIRTHS FOUNDATION



Hammersmith House - Level 4,
Queen Charlotte's and Chelsea Hospital
Du Cane Road, London W12 0HS