For:	<u>BABIES</u>	MOTHER/FAMILY
Direct Breastfeeding (BF) ADVANTAGES Examples (not meant to be all-	1. Immunological - antibodies, oligosaccharides, other bacteriostatic & anti-inflammatory disease-fighting properties, immune system modulators = babies less likely	 Close contact with each baby Forces mother to sit/take breaks Cue (demand) feeding helps mother get to know each multiple as an individual
inclusive)	to be sick/less passing of illness; stronger immune system 2. Optimal nutrition a) Nutrient balance promotes optimal human growth and development b) Bio-available nutrients = easiest for baby to digest and use for body functions 3. Frequent close contact with mother 4. Hypoallergic - less atopic (allergic) dermatitis 5. Stools - loose, easier to pass 6. Exposure to wider variety of tastes/flavors 7. Less risk of childhood obesity	 Low cost, including less likelihood of "sick" baby visits for pediatric care Saves time (after initial learning period) - no preparation or clean-up Increased, optimal use of maternal calories Delay of menstrual cycle Decreased incidence of maternal premenopausal breast and ovarian cancers Less maternal cardiovascular conditions, such as metabolic syndrome and heart attack at mid-life and beyond Doesn't stain infant clothing Less odor of infant stools
DISADVANTAGES	None known, unless mother is HIV positive*, affected by HTLV 1 or 2, currently being treated with antineoplastic (certain chemotherapy medications), abusing "street" drugs or on any of a few certain medications *Research indicates exclusive breastfeeding has been associated with lowest rates of HIV transmission.	 Investment of maternal time for frequent feedings Potential discomfort if any infant does not latch or suckle properly Initially, may include cost of breastfeeding-related equipment, e.g. breast pump rental* & pump collection kit Greater "learning curve" if early breastfeeding difficulty for one/both due to complications *Rental breast pumps are STRONGLY preferred if one/more multiples cannot yet breastfeed effectively

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ADVANTAGES/DISADVANTAGES OF FEEDING METHODS FOR MULTIPLES

For:	<u>BABIES</u>	MOTHER/FAMILY
Human-Milk-Feeding ADVANTAGES DISADVANTAGES	 Optimal nutrition (see BF) Immunologic factors (See BF) Stools - as per direct BF Exposes infants to wider tastes May help satisfy one multiple when mother unable to feed two or more at once May help with transition to direct breastfeeding when one or more multiples has initial difficulty with latch-on or suckling 	1. Can have help with feedings 2. May be easier to leave house without one/more babies 1. Cost of broastfooding related.
DISADVANTAGES	 Less close, frequent contact with mother if others help with feedings Cooling and reheating have an effect on some properties of human milk Milk may not adapt as well or quickly to changing conditions Less able to regulate amount taken in during any feeding – effect on childhood obesity is unknown Related infant-feeding devices may hinder transition to direct breastfeeding 	 Cost of breastfeeding-related equipment, e.g. rental breast pump* & collection kit, infant-feeding devices or feeding-bottles Less close, frequent contact with each baby Investment of time for adequate pumping sessions to establish and maintain milk production** * See BF above ** To maximize time and amount of milk obtained during pumping sessions, search Stanford Medicine Maximizing Milk Production With Hands On Pumping and click Proceed; helpful video with techniques that do make a difference

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ADVANTAGES/DISADVANTAGES OF FEEDING METHODS FOR MULTIPLES

For:	<u>BABIES</u>	MOTHER/FAMILY
Formula-Feeding <u>ADVANTAGES</u>	 May help satisfy one multiple when mother is unable to feed two or more at a time or for a mother experiencing insufficient milk production Promotes infant growth May substitute if mother's own or donor human milk is unavailable 	Can have help with feedings May be easier to leave house without one or more babies
DISADVANTAGES	 Foreign protein and common source of food sensitivity Less contact with mother if numerous helpers for feedings or if bottles often propped Not a living substance Contains NO immunological properties Cannot adapt as infants grow Stools - increased incidence of diarrhea, constipation Lack of controlled research on food's long-term effects History of recalls for too much or too little of certain nutrients or micronutrients, contaminants or bacteria in containers, etc. Possibility of significant injury with over- or under-dilution with some types 	 Less close, frequent contact with each baby Almost immediate return of menses and fertility Significant cost and need to keep stocked: Formula and equipment Increased likelihood of pediatric sick-baby visits Investment of time for preparation and clean-up of artificial formula and related equipment Possibility of having to use different types of artificial formula for individual multiples Stains—clothing, furniture, carpet, etc. Foul odor with infant stools Increased risk of maternal premenopausal breast and ovarian cancers Increased risk of maternal cardiovascular conditions, e.g. as metabolic syndrome and heart attack at mid-life or beyond

Do you have anything you'd like to add or delete?

See the Contact page at: www.nursingtwins.and.multiples.com/

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