

**ON MULTIPLE BIRTHS**

*by Dr. Thomas Stuttaford*

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In a memorable interview, Enoch Powell described his sense of guilt and sorrow that he returned from the war while so many of his contemporaries were killed. How much more disturbing for a surviving twin who has lived with a brother or sister in the enclosed world of the womb, only for the sibling to die in the last weeks of pregnancy, during delivery or later in the nursery.

Surviving twins start life with a sometimes-unbearable sense of guilt, for they blame themselves for their sibling's death and subconsciously, or even consciously, suspect that their parents also see them as murderers who have killed the other baby by taking more than their fair share of the nutrition, or of the available space, in the uterus.

Surprisingly, the emotional and psychological problems felt by the surviving twin, which are often expressed as depression and sometimes as behavioral disorders, are more intense if the child has no recollection of the death of the other twin. Sometimes surviving twins also have a sense of insecurity; for they reason that if the parents couldn't keep their brother or sister alive, are they likely to do any better with them?

Coupled with the feeling that he or she is guilty, the twin who lives may also sense that they have been deserted by the dead sibling, who has left them with an immense obligation to make it up to the parents for the family loss. Thereafter they believe that they have to do better, and be better, because of the death - emotions which can put a great burden on shoulders, which are not always strong enough to carry them.

In a report in the journal *Advances In Perinatal Medicine*, the author describes the state of being a twin of a stillborn baby as a psychological catastrophe. This may be an overstatement, but several research projects have demonstrated that these children have an increased chance of suffering from depression in adult life.

The advice given to parents in the authoritative work on twins, *Multiple Pregnancy*, suggests that a surviving twin should be told about the dead baby from the start. Parents, other members of the family and teachers should not only talk about the lost twin, but should show that they are ready to listen to a confused young child's delusions, however bizarre, about their supposed murderous fetal life, and should be prepared to provide the necessary reassurance.

Not all women are equally liable to have twins. In the Western world, twins are conceived more often when the sun is shining, for the sun is thought to influence ovulation through its effect on the pineal gland. Certainly there is a slight increase in the number of twins conceived during the summer months. The rate of twin

pregnancies varies throughout the world - in some parts of West Africa it is four times greater than in Britain, which has a rate of 12.4 per thousand. Larger, taller women have twins more often than do those who are short and petite, and there is a strong familial tendency to produce twins.

When twins run in a family, the babies are usually not identical and it seems that inheritance comes down on the mother's side. There is also a very slight familial tendency to have identical twins, in which case either parent may transmit the appropriate genes.

It is difficult to be certain how many twins are actually conceived as opposed to being born, as twins are very vulnerable in the early days of a pregnancy. Many die during the first stages of development. Since the use of ultrasound has become standard, it is apparent that twins are conceived much more often than was hitherto supposed. It now seems likely that at least 3 percent of all pregnancies start as twins, but that, in nearly a quarter of cases, one twin disappears.

The loss of a twin at this very early stage of pregnancy does not have the same long-term psychological implications for the surviving twin as it would do if the death occurred later. The mother, too, is probably unaware that the second fetus ever existed.

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\*Multiple Pregnancy, edited by Humphrey Ward and Martin Whittle, is published by the Royal College of Obstetricians and Gynaecologists, Pounds 48.

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