Dear Editor,

Mother’s milk is the most appropriate food for infants. There is no other food to replace [1]. The World Health Organization recommends that exclusive breastfeeding continue for at least 6 months [2]. The health benefits of breastfeeding newborn infants are well known [3]. These benefits are multiplied with twins and higher-order multiples who often are born at risk such as, twins who are frequently born prematurely and thus are exceptionally susceptible to many infections [4]. During the past two decades, the number of multiple gestations has increased dramatically in many countries [5,6].

It is more important for multiples to be breastfed since they were born earlier and underweight [7]. However, they are usually not breastfed at the required level. In a study conducted in Wales in 2004, it is detected that breastfeeding rate in single babies was 52 %, it was 40 % in twins, and 15 % in triplets [8]. In another study, it was reported that a total of 25 % of twins and only 14 % of triplets were breastfed for the first six months [9]. Oki [10] has reported in their study that full- breastfeeding rates of twins were lower than the general population [10]. Although multiple babies have a high rate of breastfeeding at the beginning, it was reported that few of these babies continued to be breastfed for three or four months [4]. Cinar et al. [11] have reported in their study conducted among 30 mothers that only one twin mother has breastfed for 5 months, and the others could not continue breastfeeding. One of the most important factors that cause a low level of breastfeeding success in multiple babies is the worry of mothers that the babies will not get enough milk [12].

In medical literature, it is mentioned that production of mother’s milk is a matter of demand and supply, and milk production in mothers of multiple babies would be enough for both the babies [12–14]. It is expressed in the studies that milk production is based on an offer-demand relationship, so multiple baby mothers can produce enough milk for each of their babies. The most important factors that effect milk production are frequent breast-feeding of the babies, healthy nourishment of the mother, her getting enough liquid and a decrease in her stress level [1]. Maternal mental condition or stress is thought to affect breast-feeding rates.

Lau et al. [15] observed that mothers of singletons and multiples had similar characteristics, socioeconomic status, psychological stress scores and interest in maintaining milk secretion. However, milk production (24-h milk volume) was reduced in singleton mothers when compared with their multiple counterparts. In addition, factors correlated with maintenance of milk secretion and milk production differed and Twenty-four-hour milk collection was correlated negatively with depression in mothers of multiples.

Higher order multiple birth families require genuine and effective support in their quest to breastfeed their infants during the postdelivery hospitalization period [16]. In the study by Cinar et al. [14], mothers stated that they advised candidate mothers, who were supposed to experience breastfeeding, to rest enough, to get familial support, to get sufficient liquid and good nutrition and to stay away from stress in order to increase success in breastfeeding [12]. A successful management in multiple baby breastfeeding requires an early training of families in pregnancy nutrition and consultancy in the lactation period. In a study its seen that breastfeeding success was increased 74% thru support and training to families in high-risk multiple birth and twins [17].

As a result, milk of the mothers having multiple babies can be sufficient, but first, mothers must believe their milk is sufficient to feed their babies, breastfeeding education starting from pregnancy period and supporting by family and health professionals are needed. It must be kept in mind that breastfeeding to multiple babies is a formidable and stressful challenge that needs breastfeeding with sensitivity and sentiments. Nevertheless, partial breastfeeding is better than no mother’s milk [12].

Conflict of Interest
The authors declare that they have no competing interest.

Disclosure Statement
There is not any financial or personal matter that may pose a conflict of interest.
References