

Twins trust.

We support twins, triplets and more...

Multiple birth statistics

WHAT IS THE LIKELIHOOD OF HAVING TWINS OR MORE?

In the UK about one in every 65 pregnancies results in a multiple birth.

There has been an upward trend in the numbers over the last 20 years. The rise is attributed to fertility treatments, the survival rates of premature babies and women starting their families later.

However, the multiple birth rate is now slowing in line with the singleton birth rate.

Incidence of multiple births in the UK, 2019*

	England & Wales	Scotland	Northern Ireland	UK
Twins	9,656	717	384	10,757
Triplets and above	143	9	4	156

* source Office of National Statistics/General Registry Office, Scotland & Northern Ireland Statistics & Research Agency

What are the chances of having identical (monozygotic) twins?

The likelihood of having identical twins is about 1 in 250 (about 0.5%).

Identical twins do not run in families. They occur when a single embryo splits in two soon after fertilisation. This is why identical twins have identical DNA.

What is the likelihood of having more than one set of twins?

If existing twins are identical the chance of having another set is the same as most women, about 1 in 250. If the twins are non-identical the chances of having

twins again are much higher.

Women who have a family history of non-identical twins have a higher chance of producing non-identical twins themselves as there is a genetically linked tendency to hyper-ovulate.

There is no known genetic link for identical twinning.

Identical or non-identical?

Whether the babies are identical or non-identical depends on how the babies are formed.

Identical twins occur in about one third of multiple pregnancies.

Known as monozygotic twins, a single egg is fertilised then splits into two (or very rarely three or more) creating identical babies with the same genes, physical features and sex.

They may or may not share a placenta.

Characteristics such as size and personality depend on non-genetic factors, so may be different.

Triplets and more are formed in this way too, but may be in different combinations.

Non-identical twins are created when a woman produces two eggs at the same time and both are fertilised by a different sperm. The fertilised egg is called a zygote and these non-identical twins are known as dizygotic or fraternal twins because they grew from different zygotes.

The babies are no more alike than any brother or sister and may be both male, female or one of each.

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NICE guidelines for multiple pregnancies

NICE (National Institute for Clinical Excellence) publishes guidelines which set national standards aimed at achieving the best care and best outcomes for multiple pregnancies.

NICE QS46 recommends health professionals looking after multiple birth patients adhere to eight standards which clearly describe what high-quality care looks like and can be measured.

Our Maternity Engagement Project set out to prove that following the NICE guidance works and we were encouraged by the results.

In fact, if you take the best case scenario from St George's Hospital, London, after five years the lives of up to 100 stillborn babies could be saved each year if all maternity units across the UK followed NICE QS46. This would result in a twin stillbirth rate of 1.85 per thousand which is below the 2016 singleton stillbirth rate of 3.86¹.

What effect has IVF had on multiple pregnancies?

On average ²11% of In Vitro Fertilisation pregnancies result in either twins or triplets compared with 1-2% of natural conceived pregnancies.

Multiple embryos are sometimes transferred during a cycle to save costs and boost success chances, especially if the couple are limited

to just one IVF cycle on the NHS.

What guidelines and policies are in place for fertility treatment?

NICE guidelines recommend three fully funded IVF cycles for all patients who meet set criteria and are aged under 40. In many cases it recommends a single embryo transfer.

Woman aged 40-42 may have a double embryo transfer.

Some women may go abroad for treatment where more embryos may be implanted.

There is also a chance that embryos split in the womb creating multiple births.

Are there risks associated with multiple births?

Multiple pregnancies³ are, compared to singletons, sadly twice as likely to be stillborn and are 4.3 times more likely to result in neonatal death compared with singleton pregnancies. Sadly there is also a higher risk of disability.

Through our Maternity Engagement (T-MEP) Project, we aim to reduce these figures by working with teams to encourage full take up of NICE QS46.

What is Twin-to-twin Transfusion Syndrome?

TTTS occurs in about 10-15% of identical twins that share a placenta. TTTS twins share some of the same circulation, resulting in the transfusion of blood from one twin (the donor) to the other (the recipient) in the womb.

In most cases the donor twin may become smaller and anaemic due to not having enough blood supply. The recipient twin has a higher blood volume, which can strain the foetus's heart and lead to heart failure.

The donor twin is also likely to have a decreased urinary output, leading to lower than normal levels of amniotic fluid, whereas the reverse is true of the recipient twin. Excess fluid in the recipient twin can be uncomfortable for the pregnant mother and puts pressure on the cervix that can lead to ruptured membranes and early delivery.

The implications of TTTS can be serious and in severe cases doctors may recommend laser ablation surgery which involves closing the twins' connecting blood vessels, or amnioreduction, where excess fluid is drained.

For more information visit www.twinstrust.org For confidential, emotional support contact Twinline for free on 0800 138 0509.

¹ <https://www.npeu.ox.ac.uk/downloads/files/mbrance-uk/reports/MBRANCE-UK%20Perinatal%20Surveillance%20Full%20Report%20for%202016%20-%20June%202018.pdf>

² https://www.bionews.org.uk/page_138328

³ [Reports | NPEU \(ox.ac.uk\)](https://www.npeu.ox.ac.uk/reports)