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Taking it easy...

By Leona Barnes

to cook two when I had struggled to cook one.

Proactively, on the very day I was 12 weeks pregnant, I went into hospital for a Cerclage. From then I was scheduled for fortnightly cervical scans. At 18 weeks, we decided I should fly home with my two-year-old and have the twins back in NZ. The monitoring in NZ was much less frequent, and between my cervical scan at 18 weeks and my next one at 22 weeks, I found out that I had no cervix left and the stitch was doing its job - just. Just had to hang on two more weeks and the twins would be viable for life-saving measures. Now that was a tough thing to hear.

I was transferred to Waikato at 23.3 weeks, and after a few weeks of bed rest there and things looking stable, I was discharged to a Motel within the hospital area. Bed rest can mean feet up and no weight at all through your cervix, or it can mean you can get up to go to the toilet/shower. With my son, I was only to mobilise around the ward and shower/toilet. With the twins, the Obstetrician had a much more lenient view, believing that I didn't need bed rest, just low activities; however, looking after a toddler was not going to help me. My parents and my husband were firm believers in bed rest and that I would never have carried our son to 30 weeks without it, so it was decided that I would put myself on bed rest to give the twins the best possible chance. Not really a big ask considering I was stuck in Hamilton with no car, no friends and no children!

I carried the twins to exactly 30 weeks, delivering in Wellington Hospital within hours of my husband arriving back from the Middle East. The girls were born at 1.41kg and 1.44 kg; they were strong and robust. Within three weeks we were all back at SKBU in Tauranga, a totally different NICU experience compared with my son.

Bed rest is a hard experience, you become socially isolated, it puts pressure on family and friends, who carry the load for us, and all the time it can be hard to see the big picture. 12 weeks out of life to lie around and watch TV, most of us now would pay for that experience. Here are some tips that I think helped me survive and allowed me to carry my children as far as I did.....

Surviving Bed Rest

- * High protein diet research now shows that premature babies are born with heavier birth weights and are thus more resilient when the mothers ate very high protein diets. Check out the book: "Twins, Triplets and Quads" by Professor Barbara Luke.
- + Have a calendar or spreadsheet where you chart and tick off the days. I also weighed myself to see how heavy I was getting and plotted that on a graph to motivate me that the babies were growing bigger. Dr Luke (above) gives a weight gain chart which shows you exactly how much weight you should be gaining to have the heaviest and most resilient Premmies.
- Have a laptop with a large memory bank of movies/documentaries/books
- http://www.keepemcookin.com. Join this forum where you can share your experiences. Everyone is counting the days that they keep their bumps 'cooking'.
- + Loads of data on you mobile devices, you spend all day surfing the net.
- Food stash make sure you have your favourite healthy snacks. If you are in hospital, the food is decidedly average. When I was at the motel, whoever visited me would stop in at the supermarket to pick me up some protein loaded snacks.
- If you are in hospital ask to be reviewed by a dietician, discuss the above points regarding high protein requirements in multiple births. You get a much better meal tray and snacks. I was also put on Fortisip to get the required protein while I was at the motel.
- Try not to feel sorry for yourself do whatever you do to keep positive just do it from a bed. Think of the end

and this is how I survived it. I found out at 17.3 weeks (singleton) that I had a terrible cervix, I was admitted by my Gynaecologist into the Women's Hospital in Abu Dhabi. Subsequently, a rescue Cerclage (stitch up your cervix basically like a purse string) was done, and I was put on bed rest under hospital supervision. I was allowed up to the bathroom and to mobilise around the ward. I carried my son until 30 weeks, counting each day he was inside as a success. To keep me sane I had my laptop and a huge hard drive which my friends loaded with DVD's, my husband brought me in meals (Arabic and Indian food wasn't really top of my dietary requests), and I took up knitting again (I still am useless at this!). I remember a lot of tears and heartache, my roommates were always Arabic or Indian and would be in and out after one or two nights. The expat nurses would often come to my room to keep me company during their down time. In the end, it wasn't the stitch that failed at 30 weeks; it was my placenta.

My mother warned me that I might have

premature babies, she delivered her first

baby girl at 30 weeks. Unfortunately,

injections (to assist with lung maturity)

clinical trial completed between 1969

and 1972 by Sir Graham Collingwood

Auckland University that would change

prematurely around the world. This and

many more marvels of medicine now

Premmies have a much better survival

prematurely often means bed rest or

modified bed rest. I've done it twice,

Liggins and Ross Howie through

survival rates for babies born

mean that Micro Premmies and

rate. Being at risk of delivering

had not become commonplace. It was a

life-saving measures such as steroid

Our son was born in August, and he finally came home with us at the start of December. He spent eight weeks in the NICU in Abu Dhabi and then a further ten weeks at the Children's Hospital in Stuttgart. It took a long time for my husband and I to heal after this experience, and deciding to get pregnant again was a tough decision. When I found out I was having twins; my only thought was 'how would I manage