Most people who have written about twins are themselves twins or parents of twins, but I am not. I am a doctor, specializing in neurology, psychiatry, and psychoanalysis, with a long training in obstetrics. Most books on twins also deal broadly with behavioral genetics, the psychology of twins, or their upbringing. This work does not fit into any of these categories. Instead it describes and compares how various cultures, including the developed world, deal with twins. In doing so, it mixes anthropological, cultural, medical, psychological, and personal facts. This combination of interests is somewhat unusual, and I arrived at it by a circuitous path.

My interest in twins came about initially for the same reasons that everyone is fascinated with twins. Identical or monozygotic twins are seen as two distinct human beings, but we are unable to distinguish the one from the other because they look startlingly the same. Human origins are also a source of curiosity to everyone, and twins, having shared the same pregnancy and interacted unseen in the womb, would seem to possess superior knowledge about where we all came from. Additionally, twins are reputed to be united by a special link, which resembles the fantasy of romantic love that it is possible to find a perfect “twin soul” or “twin mate” with whom to communicate even without words. Paranormal communication is in fact often ascribed to twins.

Scientific developments have lately brought some of these notions about twins into the spotlight. The first clone, for example, the famous sheep Dolly, led to the futuristic scenario of parthenogenesis. People imagined the possibility of having a life after death by creating a human replica. While reincarnation turned out to be a fallacious dream, monozygotic twins, who are the closest one can get to human clones, were associated with this fallacy. People began to wonder what it means to live with a double, not in eternity, but in the here and now.

My own interest in twins emerged not from such developments but gradually from my work. After completing the specialties of neurology and psychiatry in Italy, my native country, I moved to London in order to deepen my psychoanalytic education. During my English years I worked...
and taught at the Tavistock Clinic, where I came into contact with leading psychoanalysts; one in particular, Esther Bick, influenced me deeply. She taught me to observe the interactions of infants with each other and with their caregivers on weekly visits to them at home, in their natural surroundings. Like many anthropologists, I became a participant observer, fitting in as far as possible with the routine and subculture of the household, while also noting the reactions to my presence of all those family members who happened to be present at a visit. While developmental psychologists and others have provided more accurate views of infant behavior, I was drawn to Bick’s naturalistic approach. By following her teachings, I learned how to deal with foreign communities as well as with the intricacies of family life.

My first observations came as a bit of a shock when I visited Irish families who at that time in London were being seriously marginalized because of the regular bomb attacks carried out by the IRA. In retaliation, Irish homes were burned down and stones were thrown at their young children. My hosts were at first suspicious of me, but they soon accepted me on the assumption that Italian inevitably meant Catholic, putting us all in the same boat. They became extremely gentle and kind to me, while the retaliatory attacks on them continued. I was victimized as well. When I parked my car in the district, its windows were regularly smashed. For the first time in my life I came into direct contact with racial hatred and violence.

While living in England, I expected that clinical work and research with mothers, children, and infants would remain my occupation for life. Then one day an 18-month-old boy, whom I shall call Jacob, was brought to me for a consultation by his parents, whom he was driving mad with his restlessness and lack of sleep. While his parents talked, I noticed about Jacob’s restlessness a peculiar quality. He was exploring every possible corner of my consulting room, seemingly obsessed by a vain search for something. Occasionally he also shook various objects on my book shelves and desk frantically. When I commented on this behavior, saying simply that Jacob seemed to be looking for something he had lost and could not find anywhere, he immediately stopped and looked at me intently. I then observed that he seemed to be trying to shake all the objects to life, as if their stillness meant something terrible to him, like death. His parents suddenly burst into tears and explained that Jacob was in fact a twin, whose co-twin had died two weeks before his birth. Jacob had therefore spent almost two weeks in utero with a dead, unusually unresponsive co-twin. The simple verbalization of this event brought about an incredible change in Jacob, who stopped moving restlessly about and smiled. It in turn facilitated a process of intense mourning by his parents, who until