

This guide is designed for midlife women going through menopause.

It covers a comprehensive range of topics and resources for a holistic understanding and management of midlife.



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1 Understanding Menopause

Definition: Menopause is when your ovaries stop ovulating and your periods cease.

Three kinds of Menopause:

- 1. Natural Menopause most common type, characterised by periods stopping.
- 2. Medical Menopause ovaries are switched off by medication.
- 3. Surgical Menopause ovaries are surgically removed.

Three Phases of Natural Menopause:

- 1. Perimenopause erratic hormonal changes leading to irregular periods, lasting up to 10 years.
- 2. Menopause brief period marking one year (for over 50s) or two years (for over 45s) without a period.
- 3. Post-menopause the subsequent life phase after menopause.

Experience by Ethnicity:

Research indicates that experiences can differ; for instance, black women are three times more likely to have early menopause than white women (Freaney et al, 2021). However there is little research done in this space and so it's good to talk to your family members about their experiences as this will often be similar to yours.

2 Symptoms and Diagnosis

Common symptoms include hot flushes, night sweats, irregular periods, sleep problems, brain fog, anxiety, joint pains, vaginal dryness, and cravings.

Menopause is diagnosed based on age and symptoms. Blood tests aren't usually necessary but might be recommended for those under 40.

It is unlikely that an off-the-shelf testing kit will accurately diagnose you and so our recommendation is always to talk to a doctor or nurse who is part of the British Menopause Society (NHS or Private) as opposed to self diagnosis.

3 Treament Options

Every woman is different and every menopause experience is different. A woman's individual needs, wants and risk profile need to be taken into account when exploring treatment and solutions, and the approach needs to be holistic.

Hormone Replacement Therapy (HRT) - replaces declining hormones, offering short-term relief and long-term health benefits. Always consult with a medical professional.

Other Treatments - antidepressants and non-hormonal alternatives.

Holistic Solutions - practical solutions like optimised clothing for hot flushes, therapy, diet, and exercise can be beneficial.

4 Lifestyle Management

All midlife women need to do everything they can to optimise their lifestyle – which can be a huge challenge as your body doesn't always respond in the same way as it did to food, alcohol or nutrition and it's common to feel very confused as to what to focus on. Here are some key areas we would encourage you to look at.

Perimenopause and Sleep:

Perimenopause impacts sleep because of changes in hormone levels. Declines in oestrogen, progesterone and testosterone can have multiple effects on the body and its sense of rhythm. Low oestrogen, for example, can change body temperature and lead to night sweats while low progesterone means the body's natural anti-anxiety influence is removed, and so women may struggle to switch off and relax.

The stress hormone cortisol is on the rise while melatonin, a hormone that controls our sleep-wake cycle and also influences mood and immune function, noticeably declines during midlife (note that research currently shows topping up with melatonin doesn't improve sleep or mood in midlife women).



4 Lifestyle Management cont.

How to Manage Poor Sleep:

The starting point is to create (and stick to) an optimal sleeping routine, avoid stimulating behaviours and promote as much relaxation as possible.

Really, the sleep hygiene advice doesn't change no matter your age and stage in life but it's crucial that women in menopause follow the suggestions. In midlife, it's so easy to get trapped in a bad sleep cycle and the longer it lasts the bigger the toll it takes on mind, body and spirit.

Sleep hygiene 101:

- Exercise is great for helping us sleep better, but if you're exercising early in the morning or late at night, try to check and assess whether it's impacting your sleep. If so, don't stop exercising, but develop ways to limit its negative impact on your quality or quantity of sleep.
- Establish sleep discipline get into a regular habit (lights out by ...)
- · Create a comfortable, cool sleeping environment
- · No tech in the bedroom
- · Avoid heavy meals late at night
- · Avoid caffeine, nicotine and alcohol within six hours of bed time
- Don't nap during the day
- Try to read, have a bath or listen to music to relax before sleep

5 Understanding Menopause & Nutrition

Menopause brings about significant hormonal changes, influencing both body and mind. In this stage, optimising nutrition becomes crucial to counter symptoms and maintain well-being.

Essentials of Good Nutrition in Midlife:

- Hydrate drink more water.
- Be observant recognise foods that boost or lower your energy.
- Prioritise home-cooked meals in a calm setting over fast food (which we know is easier said than done).
- · Limit alcohol intake.
- Incorporate protein in every meal.
- Aim for balance follow the 80/20 rule, allowing occasional indulgences.

Weight Management During Menopause:

Sleep Matters - adequate rest reduces cravings for high-calorie, sugary foods.

Activity - as women age, physical activity tends to decrease leading to weight gain and decreased muscle and bone health. Stay active.

Gut Health - the bacterial profile in the gut shifts with age, affecting weight and health.

Foods to Alleviate Symptoms:

- Hot flushes consider soy products like edamame and tofu
- Breast tenderness incorporate iodine-rich foods like seaweed
- · Skin & bone health omega 3 from sources like sardines
- Brain fog magnesium-rich foods such as green leafy veggies, nuts, and seeds

The Importance of Fibre:

Fibre is crucial, especially when there's an increased risk of constipation in menopause. Incorporate chia, flax seeds, and Omega 3. Introduce fibre gradually to minimise bloating.

Tip: Keep seeds handy in the kitchen for easy addition to meals.

Considering Fasting:

While some opt for time-restricted eating for weight loss, fasting isn't typically recommended for menopausal women. The body is already managing hormonal fluctuations and depriving it can further stress the system. Focus on nourishment and energy.

Remember, nutrition is a personal journey, tailored to individual needs and goals. Prioritise well-being and consult with professionals for personalised advice.





6 Moving in Midlife

Before we even start talking about training and exercise we have to talk about simple movement.

It's such an undervalued health-giving gift that's fundamental in not only managing menopause symptoms, but improving the quality of your life.

It's essential we move – regularly. And while no-one's expecting perfection – menopause is a busy full-on time – let's all aim to move the right-side of enough.

Why Move?

Movement and exercise help midlife women to manage many menopausal symptoms. It also protects women against chronic conditions that you can suffer in later life – heart disease, osteoporosis, dementia and back pain. And, it makes you feel good, sleep better and gives you energy.

Ideas on How To Get More Movement Into Your Day:

1. Sit less, move more

They say sitting is the new smoking so try to limit the time you sit each day and turn it into movement. Try to incorporate as much movement as possible into your life: standing desks, stand for calls, walking meetings, get up for a stretch ... move more!

2. Outside before midday

This is a bodyclock thing. You'll help set your body clock / circadian rhythm by getting out into the daylight of the morning. Do this and you'll set your body and brain time to the right time and set yourself up for a good night's sleep (in 12 hours or so).

3. Get into nature

You might live in the city but you can still hunt out rivers and fields, even tree lined pavements, and have a look around. Take in as much nature as possible through your eyes, nose, mouths and ears and see this time as a gift. This is your time for you to just be.

4. Don't over move

Maybe you've a tendency to overdo things. If so, keep checking in with your energy levels and remember that moving is more important than training.

To explain that one: imagine sitting still all day then driving to the gym and then smashing out a session. That day is all-sitting with one burst of movement. It's worth far less health than a day when you move little-and-often all day long. You don't need to make appointments to move – just do it!

5. Restorative motion

Even if you're super fit there is huge value in doing this kind of work which could take the form of yin yoga, hatha yoga, Tai-Chi, Open Water Swimming, Paddle Boarding – movement that fills your cup and you feel refreshed and replenished by.

6. Pelvic floor exercise

The movement or exercise you do shouldn't cause you to leak. Your continence is your independence so it's vital to do your pelvic floor exercises daily. Keep on them, and talk to your GP or Women's Health Physio sooner rather than later if any issues crop up.

7 Strength Training

Strength training during menopause can combat muscle and bone density loss, manage weight, boost metabolism, and alleviate some menopausal symptoms.

Benefits of Strength Training during Menopause:

- · Maintains muscle mass counteracts the natural decline in muscle strength and mass
- · Improves bone density reduces the risk of osteoporosis
- Boosts metabolism helps in managing weight as metabolic rates drop
- Enhances mood releases endorphins, which can counter menopausal mood swings
- Improves balance and coordination reduces the risk of falls

Strength Training Tips:

Warm-up: Begin each session with a 5-10 minute warm-up like brisk walking or light cardio, this is really important not to miss out.

Frequency: Aim for 3 times a week, ensuring a rest day in between to allow muscles to recover.

Repetitions and sets: Start with 1-2 sets of 10-12 reps, increasing gradually and aim to lift heavy with great technique as opposed to lots of light reps.

Hydration: Always turn up to training with energy and having drunk enough – if pelvic health is a concern then see section 8.

Post-workout stretch: Exercise is stressful, as is midlife! The cool down is key to help us manage this stress so that we can recover from our session quicker and get on with our day.

Strength training is a potent tool for menopausal women to feel healthier, stronger, and more in control of their changing bodies. Ensure you're working safely and effectively, and enjoy the empowerment it brings!



8 Pelvic Floor & Midlife: Stay Ahead

Midlife women, regardless of athleticism or maternity history, are prone to pelvic floor challenges, majorly due to declining oestrogen levels during menopause.

The Scope of the Issue:

1 in 3 UK women face pelvic floor challenges (at least!)
Midlife and hormonal changes amplify these issues.
Symptoms might emerge even if they weren't present earlier in life.

Common Symptoms:

- Toilet urgency
 - · Sudden, intense need to relieve oneself.
 - Triggers include cold weather, caffeine, alcohol, and sugar.
- Leaking
 - Sudden onset, even in previously unaffected women.
 - Might result from weakened pelvic floor or vaginal atrophy (due to lowered oestrogen).
 - Solutions include pelvic floor exercises and topical oestrogen treatments.
- Vaginal dryness/itchiness
 - A midlife-specific symptom causing discomfort and pain, especially during sex.
 - Topical oestrogen can help alleviate this.
- · Weight gain
 - A common midlife challenge; excess weight stresses the pelvic floor.
 - A 10% weight reduction can decrease symptom severity by half.

Recommendations:

Open Dialogue: Talk to your trainer, go to your GP, do not suffer in silence.

Pelvic Floor Exercises: These should be a regular practice for women, symptomatic or not.

Seek Specialist Advice: If issues persist despite exercises, consult a Women's Health Physiotherapist. They specialise in pelvic health, offering targeted guidance and interventions.

Resource: For finding Women's Health Physiotherapists, refer to the NHS's Squeezy App Directory.

9 Additional Resources

Websites

- · British Menopause Society
- The Menopause Doctor
- Menopause Matters
- NHS

Podcasts

- Bodystuff with <u>Dr Jen Gunter</u>
- The <u>Doctor Louise Newson</u> Podcast
- The Mid Point by Gabby Logan

Books

- The Female Body Bible by Dr. Emma Ross, Baz Moffat and Dr. Bella Smith
- · Menopausing by Davina McCall and Dr Naomi Potter
- The M Word by Dr Philippa Kaye
- Perimenopause Power: Navigating your hormones on the journey to menopause by Maisie Hill



