FEEL Fit WITH LUCY

Training through Menopause
October '25

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Today's session

- Cameras
- Recorded (but you wont show unless you talk), will get recording and slides
- Stay on mute
- Welcome questions – **type Q** next to question or unmute at the end
- Supportive and confidential space
- Female only

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Menopause and Training

- Intro to the session and me
- Intro to Menopause
- How to reduce the impact of menopause on our training
  - Energy and recovery
  - Muscles, bones, joints and aches
  - Other barriers
- Finding out more
- Q&A

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BRITISH TRIATHLON | TRIATHLON ENGLAND | SWIM BIKE RUN

Yorkshire and Humber Supporting Women and Girls in Triathlon Network

Vision: A vibrant triathlon community that removes barriers, challenges inequalities and fosters a sense of belonging for women and girls, regardless of their background.

1) Communication
2) Promote Change at Club and local Level
3) Collaborate and Raise the Profile of Swim Bike Run/Triathlon

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Introduction to Menopause

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What is menopause?

- Marks year without period
- UK average is 51 years, but ranges from 45–55
- Age and impacts vary by race (and lifestyle)

What is perimenopause?

- Hormones start changing
- On average lasts 4 years but can be 10+ years
- Diagnosis

What is postmenopause?

- Rest of your life. Not fluctuating but some impacts continue

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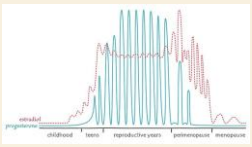
Effects of decrease in oestrogen:

- ❤️ Cardio vascular system
- 💪 Muscles and bones and connective tissue
- 🔥 Inflammation
- 🔥 Metabolism and body composition
- 🧠 Brain and nervous system



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Common symptoms

- mood changes (increased anxiety, depression and anger)
- more irregular periods and changes to flow
- increased PMS
- increased fatigue
- issues sleeping
- hot flushes and night sweats
- headaches
- poor memory and brain fog
- tender breasts
- bloating
- unexplained weight gain
- palpitations, changes in HR
- increased joint and muscle pain
- vaginal dryness, soreness, UTIs
- reduced sex drive
- bladder changes
- itchy skin and eyes ..... and much more....

80% of women experience symptoms
25% have severe symptoms

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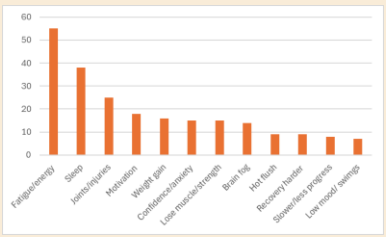
Most common symptoms reported by you



Also: incontinence/ pelvic floor, stomach, night sweats (3), sore breasts, dry/itchy skin, heavy/irregular bleeding, sex drive, overwhelm, breathless, palpitations

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Menopause and Training

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Impact of menopause on training

30% of women are less physically active post menopause

Despite the fact that exercise could actually help prevent some significant impacts of menopause:

- Reduced oestrogen increases coronary heart disease risk: 1 in 14 UK women die from CHD (twice as many as breast cancer)
- Over 80% of perimenopausal women experienced mental health issues. 50-54 year old women have highest suicide rate.

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Why less active?

- Fatigue/ need more **recovery**
- **Lose muscle**, injuries, niggles, everything feels harder
- Experience **more barriers** and issues with training (eg heart issues, weight gain, vaginal dryness, mood, confidence...)

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Some tips on creating change

- Knowledge vs implementation
- Lots in here, cos everyone at different stages
- Make a list of what applies **to you**, **work on one at a time**
- Will power vs habits
- **Importance of mindset**
  - "is that thought helping me?" e.g. 'I used to be able to...'
- Acceptance?
- Support: friends, coaches, clubs, Membership...

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IF WHAT YOU WERE DOING BEFORE ISN'T WORKING THEN **CHANGE IT**, DON'T JUST DO MORE OF THE SAME

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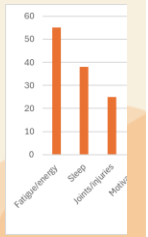
Importance of recovery



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To build fitness: Break down and rebuild stronger

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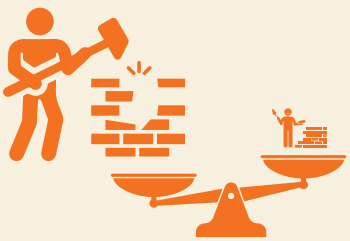
If break down (training) outweighs recovery:



= Injured, ill, rundown, or overtrained

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Key ingredients for recovery

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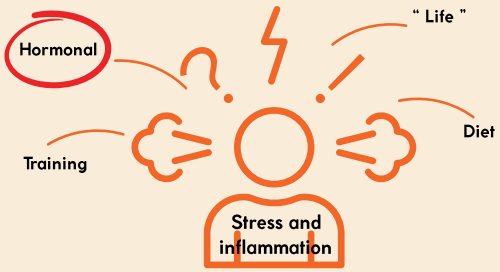
Key barrier to recovery



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How to optimise recovery and have more energy

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Planning training and recovery - time

Know your (new) limits

Get to (re)know your body - what can it take, what is too much

Quality over quantity - Ensure training intensity matches your goals

Time for recovery:

Space out the longest/ hardest sessions (esp running)

... and plan in extra recovery around them

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Planning training and recovery - time

At least a recovery day once a week (or more)

Recovery week in time with menstrual cycle or every 3rd week

Give yourself permission to listen to your body - cut training when you need to

But be flexible and adapt

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Planning training and recovery - time

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Give yourself permission to listen to your body - cut training when you need to

THE ONLY EFFECTIVE TRAINING IS THE TRAINING YOU RECOVER FROM

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Boosting recovery - fuel

If you underfuel your training you risk

- Injury and less progress
- **Weight gain**
- Being hungry

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Boosting recovery - fuel

Fuel training with carbs any session over 60-90 mins, or if been fasting, including overnight.

Get enough protein: 1.6g (min. for active menopausal women) - 2g for every kg of body weight /day

If fatigued/ limited progress/ keep injured / putting on weight, try increasing fuelling around training!

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Morning

- **Consistent wake time**
- **Light exposure**
- Cut phone/dopamine hits first thing
- Movement

Through day

- **Cut caffeine from 12**
- **Reduce stress**
  - Mindset work, journalling
  - Reset nervous system (eg breathing)
  - Practice brain down time (time without inputs)

Evening

- **Reduce alcohol**
- Cool room, layers
- **Wind down: cut blue light, AND phone, work**
- 2+ hours betw. food-sleep
- CBT-I, thought work
- Push back sleep time?/ bring forwards gradually
- Maintain bed for sleep

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Boosting recovery - sleep

Focus on what you can do to promote sleep rather than what you cant.

One change at a time.

Rather than saying 'I dont have time' ask how much more time you'd have if you slept better, and the cascade of benefits.

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Recap

Recovery is vital. Ways to boost it:

- **Listen to your body** - adapt training/ take more recovery, the only effective training is training you can recover from
- **Fuel your training:** carbs for any session over an hour/ first thing in the morning
- **Fuel your recovery:** 1.6-2g of protein per kg of body weight (but start from where you're at)
- **Find your sleep non-negotiables** and implement them

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Break out

Small groups of 3-4, 6 mins

Quick introductions and your initial reaction to recommendations so far - Thoughts? Issues? Learnings?

Remember, resistance is fine, it's hard to make change, but have a plan of how you will deal with it.

- alternative?
- dont do it all at once - one step at a time
- accountability
- support?

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Injuries, niggles, training feels harder

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Muscle, bones and joints

- Oestrogen, which is protective of muscles, bones and joints declines during perimenopause
- **60%** of women experience joint pain after starting perimenopause
- Women's muscle mass loss after 30s: **up to 8%** a decade, more post 60

80% of the 4m with osteop. in UK are women: → Postmenopausal woman's chance of osteop.-related fracture = **50%** → How many of those with a hip fracture die ~ within a month: **10%** ~ within a year: **1/3**

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How can we best support our body

- Mobility - help move better, reduce pain, stiffness and injuries
- Stability training - support joints and reduce injuries
- Strength training (**plus sufficient protein and carbs**) - reduce loss of muscle and bone.
- Plyometrics - reduce bone loss, maintain speed, power and reactions
- Balance training to reduce chance of falls/ twisting ankle etc
- Pelvic floor engagement

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What	Impact	When/frequency	Each workout
Mobilise key joints: hips, ankles, thoracic	↑ life expectancy ↑ movement ↓ injury	Min: Pre run and S&C Ideal: Daily to restore	5-10 mins
Stabilise key joints: calves, glutes, core incl pelvic floor, shoulders (incl posture focus)	↓ injury ↑ power/speed	Min: Before run and S&C Ideal: 3+ per week	5-10 mins
Strength • Big multi joint e.g. squats, deadlifts, lunges • **Ideally 5-8 reps (but...)** • Majority lower body for muscle mass and to support running, cycling etc	↑ life expectancy ↑ bone density ↑ muscle mass, supporting ↑ power/speed ↑ metabolic rate	Min: once per week Ideal: 2-3 times a week	20-30 mins
Plyometrics low level, multidirectional, power and lower leg specific	↑ bone density ↓ injury ↑ power/speed	3 sets x 1 min x 3/week	3-5 mins
Power: HIIT intervals, stomps, swings, jumps...	↑ fast twitch fibres	Within strength/ endurance	5-10 mins
Balance	↑ life expectancy ↓ injury	Min: x2 within strength workout Ideal: when brushing teeth	30-60 secs each leg

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New block starts this week

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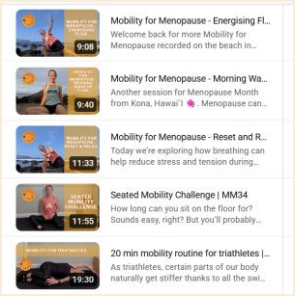

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Training mix

Strength training 2-3 times a week

High intensity intervals:
e.g. (after warm up) 30 secs max, 90 secs off x 5-8
e.g. turbo, rower, kettle bells, jumps
Just 1-2 week, recovery is key to the training session

Low impact e.g. walking, easy running

Avoid grey zone? Must be goal specific. But know risks.

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Mindset

We **do** get slower as we age.

Effective training can reduce this. But also need to **accept** change.

Move from focus on a number to best I can do given situation?

Ask why a number matters so much?

Find the positives?

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Recap

Reduced oestrogen means muscles, bones and joints are more vulnerable. What worked before may no longer be enough, need to do more to support body, for now and future you.

- **Strength training with 'heavy' weights** (plus mobility, stability, balance, jumping, pelvic floor....)
- **Support body to recover with protein** (and carbs) - 30g following training, as part of 1.6-2g/kg/BW/day
- **HIIT intervals (+ recovery)** for speed, power and insulin sensitivity
- **Accept change.** Set goals and expectations which are challenging but realistic, move beyond a focus on numbers?

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Barriers

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Women over 50 experiencing **urine** leaks: **>50%**
And up to **80%** of active women

Vaginal dryness - most menopausal women experience it, most dont do anything about it

Sore boobs - a well fitting bra can save **a mile** over a marathon

Average **weight gain** through menopause: **2-3.5kg**, mostly around stomach

Up to **50%** of menopausal women experience **palpitations**

VO_2 max decline from 30s onwards: **about 10%** per decade (M&F)

Anxiety, depression...

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Other support

Menopausal hormone therapy (HRT) - "can help relieve most menopause and perimenopause symptoms, including hot flushes, brain fog, joint pains, mood swings and vaginal dryness. Can also reduce your risk of osteoporosis and heart disease"
"The risks of HRT are small and usually outweighed by the benefits"

Testosterone "can help improve sex drive, mood and energy levels"

Creatine - can support muscle mass, strength (when accompanied by strength training), and cognitive function (memory, focus, and mood).

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Break out

Small groups – 6 mins

Your initial reaction these recommendations - Thoughts? issues? learnings?

If you're feeling resistance how could you make a plan to deal with it?

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Questions?

Get typing or hands up

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More support

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FEEL FIT Membership

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For just £25 each month you get:

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"I'd recommend to anyone interested in improving their fitness.

I've learnt so much, even though I've been running for 30 years!

Lucy is so knowledgeable and is passionate about passing that knowledge on.

She gives you all the tools you need to achieve your goals."

Vic, 53, London

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> The mindset section has been invaluable to me.
>
> I've transformed my life significantly in just a few weeks.

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> It encouraged me to try changing my diet.
>
> Within a month I noticed a huge difference.
>
> **I can't believe how much it's changed my mental and physical wellbeing. I haven't been ill since I started doing it! I can't recommend it enough.**
>
> Katie, Manchester

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For just £25 each month you get:

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SPECIAL OFFER

- **Sign up by Sunday** to get your first month for just £5 - use code **MSHIP5**
- **Sign up tonight** to also get a free 1:1 coaching call with me

bit.ly/MemberFF

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Social media and emails

Follow me on Facebook and Instagram @feelfitwithlucy

See my blogs and emails for support and inspiration

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Questions? Feedback?

Get typing or hands up

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- Its been suggested i start taking testosterone , as a GB age group athlete I have no idea if this is allowed or where to turn for factual information.
- I've heard people talk about testosterone but know it's not readily available- interested in your thoughts on this.
- Impact of testogel on age group participation.
- Is there anyway to get a TUE from WADA for testosterone? I'm an age group high performing athlete and have had to chose between no libido/my marriage and racing under WADA rules which ban testosterone.

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Done:

- I'm struggling to build muscle. Any advice welcome
- Dont seem to wake feeling refreshed and still lack energy. Is it more sleep or different foods ie protein that's required?
- How to balance rest and recovery with training for long distance triathlon.
- Does menopause affect motivation?
- Getting nutrition right whilst training whilst trying to loose some weight
- What advice would you give on the balance between cardio and weight training
- Fuelling efficiently. I am in perimenopause and my periods can really affect my energy levels
- How do you manage the extra aches and pains
- When does perimenopuse begin and how will I know when I'm in it?
- Does HRT have a positive impact on joints, etc
- How to stay motivated to put in the training to race hard when you feel wiped out.

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Quick fire:

- Does HRT affect training or does it help?
- Does everything eventually settle down again?
- How to get maximum return on training time investment?
- Any supplements I should be taking to support menopause while training.
- Advice on how to reduce midriff with high cortisol / effects of higher intensity training raising cortisol and impacting on weight gain / weight gain in general
- Does anyone else have a problem with wind and how are they managing it - is it just a diet thing?

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As someone who gave up totally and now considers herself too unfit to start, any suggestions of how I get going without constantly thinking 'well this session isn't worth doing (too short, not hard enough etc) or **comparing my old self/times** etc. These are barriers I can't get over!

I lost my mojo for racing, trained less and now **struggle with being slower** than I used to be!

One of my questions for you would be **how to stay motivated during training** when you don't hit the paces you hoped for?

58

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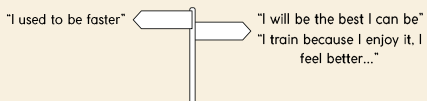

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Thank you

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