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What we'll cover today

- Why a talk specifically on training as a woman?
- 3 key principles for training as a woman
- Other issues affecting women
- Find out more
- Q&A

Housekeeping

- Slides, worksheet and recording
- Stay on mute
- Cameras
- Q for question in the chat
- Respect each other and confidentiality

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Why specific session on women?

Hormones impact lives, bodies and training

- 1 in 3 have missed work due to menstrual cycle
- 88% say menstrual cycle symptoms limit exercise performance

Most exercise and nutrition guidelines based on men

- 31% of research just on men, 6-8% solely on female
- e.g. strength-training guidelines were male
- e.g. sub-four-hour marathon, C25K
- You are not the problem, the plan/guidance is failing you

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Why specific session for women?

Women have a higher risk than men of:

- Alzheimers (twice as likely, 20% of women will get it)
- Menopause (100%)
- Depression and anxiety (2:1)
- Autoimmune diseases (80%)
- Osteoporosis (80%)
- Menstrual Dysfunction (of women c.20% have PCOS, 10% have endometriosis, 5% have PMDD)
- Iron deficiency anaemia (8% of women compared with 2% of men)
- Hypo and hyperthyroidism (5-10 times more likely)
- IBS (2:1)

Almost all can be improved / the risk reduced through exercise or diet
Yet how often are we given female specific guidance?

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Why specific session on women?

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Why specific session on women?

Knowledge is power

- Awareness = get most from your body by working with it
- Awareness = help you advocate for yourself with confidence
- Keeping taboo denies us this power and knowledge

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3 key principles:

- 1 Know your body
- 2 Fuel your training and health
- 3 Future proof your body

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Fit

3 key principles

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Getting the most from today

- You dont need to do it all!
- **One action at a time**

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- 1 Know your body

Menstruating/ premenopausal women

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Menstrual cycle

- Vital sign – shows our body is healthy

Not 'normal' or 'ok' to lose period when training ('normal' cycle 21-32 days)

- Speak to GP /coach
- LEA/ REDS
- Energy balance (not necessarily weight loss), timing
- Sex hormones essential for bone health, muscle growth

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Knowledge is power

Better you know yourself = better can work *with* your body

Get to know yourself:

- Track and know your cycle and symptoms
- How to track

Learn:

- cycle length/patterns
- good and bad training days (energy, RPE, heat)
- when injuries and pain flair up (injuries, niggles, inflammation, stomach, headaches)
- changes in recovery demand and metrics (RHR, HRV)
- how/ what foods affect you (bloating, energy etc)



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Impact on training

Changes to consider:

- **What works best for you**
- Rest week? Cycle syncing? Strongest week?
- Check race dates
- Learn triggers so can minimise (e.g. diet, exercise, stress)
- Do your fuelling, recovery, hydration etc demands change?

What to watch out for/ act on

- Any changes in cycle, especially loss /significant delay of cycle
- If symptoms bad, uncharacteristic see a GP (don't accept it)

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What if you dont have a period

- If still menstruating, can still track patterns and symptoms
- Breakthrough bleed on hormonal contraception is **not a period** i.e. **not the vital sign**
- If no period need to be extra vigilant about energy availability

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Recap

- ✓ Menstrual cycle is vital sign
- ✓ Track your cycle and learn your patterns
- ✓ Adapt training to work with your body
- ✓ If lose menstrual bleed speak to GP and/or coach
- ✓ If symptoms bad speak to GP

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 Know your body

(Peri/post) menopausal women

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What is menopause?

- Marks year without period
- UK average is 51 years, but commonly ranges from 45-55
- But we're not all average



What is perimenopause?

- Hormones start changing, menopause transition
- Lasts 4 years on average but can be 10+ years

What is postmenopause?

- Rest of your life. Not fluctuating but (most) impacts continue

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Common symptoms

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



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Longer term risks

- Loss of oestrogen which is protective of muscles, bones and joints
- Women's muscle mass loss after 30s: **up to 8%** a decade, more post 60
- 80% of those with osteop. in UK are women:
 - About 1 in 2 women over 50 will break a bone because of osteoporosis
 - Of those with a hip fracture: ~ 10% die within a month ~ 1/3 die within a year
- 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 experience mental health issues. 50-54 year old women have highest suicide rate.

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Choose your journey



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Get to know yourself (again)

- Track symptoms (and cycle)
 - Know your baseline, spot patterns, listen to body
 - Learn triggers
 - Learn how body responds to exercise
- Keep listening, it may keep changing!
- Speak to coach
- Speak to GP about support (HRT, vaginal oestrogen, CBT-I, mental health support)



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My Big 3 to address negative impacts of Menopause

- 1 Listen to your body**
- 2 Fuel your training and health**
- 3 S&C to future proof your body**

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Recap - perimenopause

-  Choose to act - it's never too soon or too late
-  Track symptoms and patterns, know baseline
-  Recovery and listen to your body
-  Eat enough
-  Strength training

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Fuel your training and health

Recovery and energy

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Eat enough protein

- To preserve/ build muscle and bone
- To avoid injury
- Much more! e.g. make hormones

Goal:

- 1.6g (very min) - 2g+ for every kg of body weight /day
- "30g within 30" pre/post training
- 30g of protein each meal + Protein based snacks

How close are you?

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Fuel your training: carbs

Enough stored for 60-90 mins

When to fuel: If been fasting, if above 60 mins or high intensity

Below that: If fatigued/ limited progress/ keep injured try fuelling

Do you underfuel your training? Do you know why?

Meals: 

Training fuel: 

Early morning: 

Race fuel: 

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Fuel your training: carbs

If underfuel training you risk:

-  Being hungry
-  Injury
-  Muscle loss
-  Less progress
-  Less adapted for racing

 LEA > REDS

Fuelling well supports you to:

-  Train harder
-  Recover better
-  More adaptations
-  Feel better, enjoy it more

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CARBS AREN'T BAD but move from refined carbs to wholefoods


➤➤


- Sustained energy
- More satiating
- More nutritionally dense
- Less inflammatory
- Mental health
- Long term health: diabetes, cancers, Alzheimers....

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Fuel your training and health

Common risk areas for women

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Maintain bone strength

- **Calcium** - ideally from balanced diet (NB caffeine slows absorption)
- **Vitamin D** (supplement with 400 IU in winter, best absorbed with fat)
- Reduce smoking and alcohol

Iron deficiency

- 8% of women compared with 3% of men have iron deficiency anaemia
- **Get blood test** if think at risk (don't self medicate)
- Better absorbed with Vit C, and avoid taking with tannins (tea or coffee)

(Peri)menopause

- **Fuel training**. DONT do fasted training
- **Mediterranean diet** - insulin sensitivity, hot flushes, brain fog, sleep, depression...
- **Creatine phosphate** - brain fog as well as muscles - 3g/day
- **Magnesium** - sleep

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Recap

- ✓ **Eat enough protein** - 1.6g+ per kg body weight , 30g each meal, 30g within 30 mins of training
- ✓ **Fuel your training** - If been fasting, if above 60 mins or high intensity
- ✓ **Carbs aren't bad** but **avoid refined and processed carbs**, instead aim towards Mediteranean diet

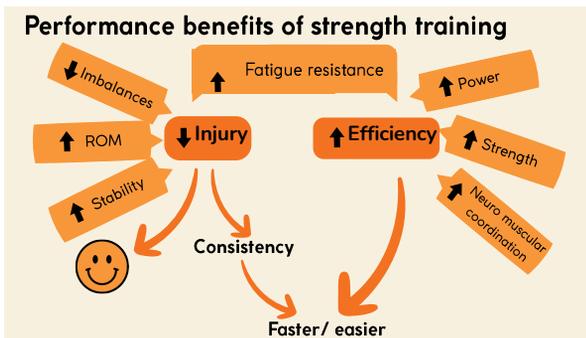
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Future proof your body

If not now, when?

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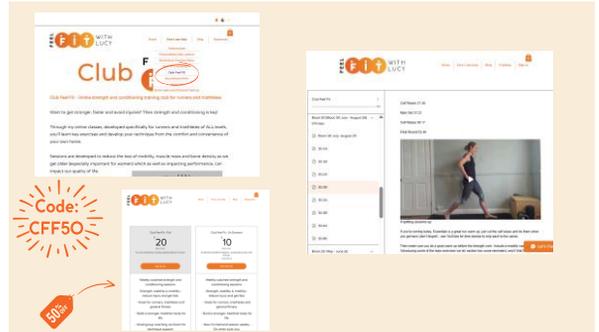
Wider benefits of strength training

- **Preserves/ builds muscle** - Body composition, fat loss, metabolic health
- **Improves bone density** - reducing risk of osteopenia and osteoporosis
- **Posture** - injury prevention, aesthetics, confidence
- **Longevity**, healthy ageing and independence later in life
- Improves **confidence**, body image and mental resilience
- **Supports brain** - reduces risk of Alzheimers and slows cognitive decline

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What	Why	When	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 (3 x25-30 raises x3 /week), glutes, core incl PF, shoulders	↓ injury ↑ power/speed	Min: Pre run and S&C Ideal: 3x per week	5-10 mins
Strength • Big multi joint e.g. squats, deadlifts, lunges • Ideally 5-12 reps • 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 mins
Balance	↑ life expectancy ↓ injury	Min: x2 within strength workout Ideal: when brushing teeth	30-60 secs each leg
Pelvic floor	↓ leaks (plus ↑ power)	Daily	

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Future proof your body

- ✔ **Strength training:** 2-3 times a week, heavy weights, 5-8 reps, prioritise lower body (squats, deadlifts, lunges)
- ✔ **Mobilise** key joints: hips, ankles, thoracic, shoulders
- ✔ **Stabilise** key joints: calves, glutes, core, pelvic floor, shoulders
- ✔ Plus plyometrics and balance



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Other issues affecting women

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Kit

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Shrink it and pink it or female specific?

- A well fitted **sports bra** can save a mile over a marathon
- 4% improvement vs Vaporflys



The results are in!
Thanks so much to everyone for responding.

Best shorts for a curvier figure: clear winner - the 'Sweaty Betty's' (general consensus that any tight, short undershorts are best, with optional over layer).

Best bra for bigger boobs: Again Sweaty Betty came out top but lots of other recommendations.

More expensive brands seem to cater well, but also lots of love for cheaper brands.

Sweaty Betty
Marlee bras
Tala inbuilt bra top
Shock Absorber
Under Armour
Freya
PeBe
Runderwear

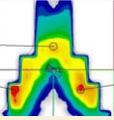
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Cycling

- **Bike fit?** Make sure bike fits you
- Especially size, saddle, handlebar width, stem
- Can you reach the drops?

Soft tissue pain

- Don't accept discomfort/ male saddles
- Try before you buy
- Chammy (and no underwear!)
- Vaginal dryness (up to 30% of women pre menopause, 50%+ after)

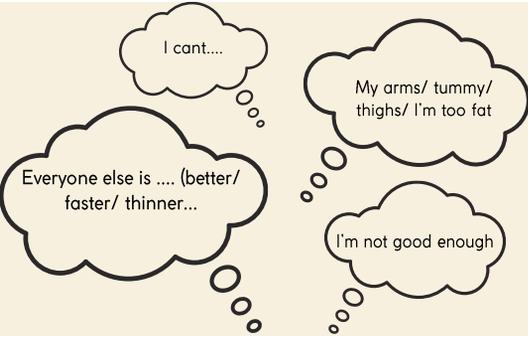


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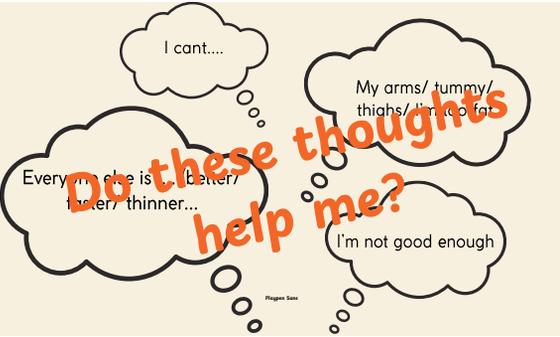


Mindset

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What to do



90% of our thoughts, behaviors, decisions and emotions come from the subconscious mind

Same thoughts repeated each day.

Thoughts drive behaviours which lead to outcomes.

Choose to change your thoughts.

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Nervous system, neurodiversity and stress

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Exercise and stress

Exercise can both help relieve stress and add to it

- Women 2–4 times higher diagnosis of ME/Chronic fatigue than men
- c. 80% of autoimmune disease cases are in women
- Women c. twice as likely to experience an anxiety disorder
- Increased diagnosis of neurodiverse women, plus recognition of hormonal cross overs. Strong link with exercise

- Listen to your body
- Be aware of signs of burnout, especially if neurodivergent
- Find non exercise-based ways to relieve stress and support mental health

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Menstrual and hormonal health conditions

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PCOS



- Irregular periods or infrequent periods
- Difficulty getting pregnant
- Increased insulin resistance, unexplained weight gain
- Thinning hair/loss from the head, excess facial or body hair, oily skin or acne
- Training can help improve insulin sensitivity – often a key driver of PCOS symptoms
- But too much high intensity training without enough recovery can raise stress hormones

Endometriosis



- Chronic pain, esp periods, pelvic pain, back pain, bowel movements
- Fatigue, lack of energy, depression
- 6-12 years to be diagnosed!

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PMDD



- Heightened PMS symptoms in in 2nd half of cycle (luteal phase).
- Physical (tender breasts, muscle pain, headaches, bloated, sleep issues)
- Emotional (heightened emotions or mood swings, lack of energy, sadness or despair, or even suicidal thoughts)

Thyroid

<h4>Hypothyroidism (underactive)</h4> <ul style="list-style-type: none"> • Women x5-10 times more cases than men • Fatigue • Weight gain • Mood swings, depression, brain fog • Often confused with perimenopause 	<h4>Hypothyroidism (overactive)</h4> <ul style="list-style-type: none"> • Women x10 times more cases than men • Weight loss with normal appetite • Heat intolerance, sweating • Palpitations, anxiety, restlessness
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What to do

-  Track, track, track!
-  Know your baselines (i.e. track 'normal') so you can see when its different
-  Dont go by mother/ sister for what's normal
-  Advocate for yourself at the CP (take a friend, take 'evidence', be informed)

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Recap

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3 key principles:

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- 3** Future proof your body

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One action at a time

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Find out more

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Find out more:

- feelfitwithlucy.co.uk/blog
- [@feelfitwithlucy](https://www.instagram.com/feelfitwithlucy)
- feelfitwithlucy.co.uk/membership-waitlist
- Newsletter

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<p>Week 1</p> <p>FFF Masterclass</p>	<p>Week 2</p> <p>Masterclass</p>	<p>Week 3</p> <p>Q&A</p>	<p>Week 4</p> <p>Masterclass review</p>	<p>Every week</p> <p>Club FEEL 500</p> <p>Club Feel Fit</p> <p>Accountability Club</p> <p>1:1 Coaching</p>
<p>Tues 3, 7pm</p> <p>Train as a Woman</p>	<p>Thurs 12, 12.30</p> <p>Ready for your first triathlon</p>	<p>Thurs 19, 7pm</p>	<p>Thurs 26th, midday</p>	

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Code: CFF50

30% off

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