

IDEA World 2022 Session #516 Training The Menopausal Client

Friday, July 22nd, 2022 2:35 pm – 4:25 pm

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Introduction

Exercise provides tangible benefits for the menopausal client but this phase in every woman's life is still a big mystery surrounded by confusion and misinformation. Women in mid-life need to be understood as a specific population with their own possibilities and challenges, and the challenges are real. Does menopausal status matter when training a client? What exercises provide the highest benefits? How much exercise is enough? Should you recommend high-intensity training? This session will provide the most current research-based information on what type and intensity of physical activity will yield the best effects for the menopausal client as well as give you advice on how to understand and approach women in mid-life and help them transition through menopause in a positive way.

Understanding Women In Midlife

- In the United States, approximately 1.3 million women become menopausal each year.
- Women report lack of understanding and education as a major problem.
- The menopausal transition is a very complex time in a woman's life that goes beyond hot flashes and cessation of menstruation.
- The average age of menopause is 51 but the exact age at which natural menopause occurs is impossible to be determined. It is estimated that natural menopausal occurs between the ages of 40-60.
- Knowing current research can help you identify individuals at high risk and assist them with preventative strategies around diet, exercise, social support, and coping skills.

Notes:

Hormonal Influence

- Hormones have a role in everything: metabolism, muscle building, fat burning, hunger signals, sleep stress regulation, etc.
- Because of these fluctuations, women experience a wide range of symptoms that can drastically impact their quality of life, how they feel and look.
- Menopause can be categorized into four distinct phases that include **premenopause**, **perimenopause**, **menopause**, and **postmenopause**.
- The menopausal transition is a very complex time in a woman's life that goes beyond hot flashes and cessation of menstruation. Symptoms can be categorized into four broad categories: vasomotor symptoms, psychosocial symptoms, physical symptoms, and sexual/urogenital symptoms
- The loss of estrogen has a negative impact on overall cardiovascular, neurological, and musculoskeletal health.
- The key hormones are estrogen, progesterone, testosterone, dehydroepiandrosterone, cortisol, and growth hormone.
- The changes in ratio between hormones, specifically estrogen and cortisol, can cause increased abdominal fat, which is one of the most bothersome symptoms reported.

Notes:

Role of Physical Activity & Program Design

- Research indicates that moderate-intensity exercise is the most beneficial for menopause-specific quality of life and menopause symptoms. It's linked to increased sleep, energy, confidence, and mood.
- Exercise intensity and duration can have an impact on menopause symptoms, hormones, and quality of life. For example, workouts lasting longer than 40 min can increase cortisol, high-intensity workouts can increase core temperature and impact hot flashes, late-night workouts can exacerbate insomnia, heavy lifting and high-intensity training increases EIGR .
- Menopause symptoms should be taken into account when programming. For example:
 - Yoga and mindful exercises are beneficial for vasomotor symptoms while HIIT and hot yoga can exacerbate them.
 - Strength training and HIIT are most beneficial for body image and musculoskeletal symptoms.
 - Endurance and aerobic training at moderate intensity is correlated with better sleep and walking is correlated with improvements in depression and anxiety.

Notes:
