A FREE PRACTICAL GUIDE

# STRONG THROUGH MENOPAUSE

## Training, nutrition and recovery advice for women navigating perimenopause, menopause and beyond.

TRAIN / FUEL / RECOVER

By David O'Shea | Strength & Nutrition

A straightforward starting point. No hormone hacks. No punishing plans. Just sustainable habits and a stronger, healthier future.

Educational information only. It does not diagnose menopause or replace personalised medical care.

START HERE

# What changes during menopause?

Menopause is a natural life stage, not a disease. But symptoms can be disruptive, and every woman's experience is different.

## Three terms worth knowing

- Perimenopause: the transition when cycles and hormones become less predictable; symptoms may start before periods stop.
- Menopause: usually recognised after 12 months without a menstrual period, where no other cause explains it.
- Postmenopause: the years after the final menstrual period.

## Possible changes

- Hot flushes, night sweats and difficulty sleeping.
- Mood shifts, brain fog or reduced energy.
- Changing appetite, body fat distribution or exercise recovery.
- Changes in vaginal or urinary health, which deserve appropriate care.

Remember: not every new symptom is caused by menopause. Stress, medication, thyroid problems, sleep disorders and other health issues can overlap. If symptoms are bothersome, speak to a GP.

TFR 01 / TRAIN

# Strength is your foundation

Strength training helps you keep doing the things you value: getting up from the floor, carrying shopping, enjoying hobbies and staying independent.

## Why it matters

- Supports muscle mass, physical function and balance.
- Provides an important stimulus to bones.
- Can improve blood sugar regulation and confidence.
- Complements walking, cycling and other aerobic exercise.

## A sensible starting point

- Frequency: aim for 2–3 strength sessions each week if your schedule and recovery allow.
- Exercise selection: include a squat or sit-to-stand, hinge, push, pull, carry and single-leg movement.
- Effort: use a challenging but controlled load; keep technique strong and progress gradually.
- Recovery: separate demanding sessions with lighter activity or rest when needed.

There is no requirement to lift maximal weights. Progress can mean better technique, more comfortable movement or a little more resistance over time.

TRAIN / PRACTICAL

# Your simple full-body template

A sample gym session, not a prescription. Choose appropriate variations and loads for your experience and medical history.

| Movement | Example | Starting volume |
|---|---|---|
| Squat | Goblet squat / sit-to-stand | 2 × 8–12 |
| Hinge | Dumbbell Romanian deadlift | 2 × 8–12 |
| Push | Incline push-up / chest press | 2 × 8–12 |
| Pull | Cable row / band row | 2 × 10–12 |
| Single leg | Supported step-up | 2 × 8 per leg |
| Carry | Farmer carry | 2 × 20–30 m |

## How to adapt

- Start with one or two sets if you are returning after time away.
- Allow a few repetitions "in reserve" until technique feels consistent.
- On a poor-sleep day, reduce load or volume, or choose an easy walk.
- If you have osteoporosis, pelvic symptoms, significant pain or other medical concerns, ask a suitable clinician about safe exercise modifications.

TFR 02 / FUEL

# Eat to support strength

Food is fuel for training, daily energy and recovery. You do not need a special "menopause detox" or restrictive hormone diet.

## Four everyday nutrition priorities

- Protein: include a source with each meal, such as eggs, Greek yoghurt, fish, chicken, tofu or beans.
- Plants and fibre: build meals around vegetables, fruit, whole grains and legumes.
- Carbohydrates: include potatoes, oats, rice, bread and other foods that help support your activity.
- Healthy fats: enjoy foods such as olive oil, nuts and oily fish.

## How much protein?

For regularly strength-training, generally healthy adults, approximately 1.4–2.0 g protein/kg body weight/day is a useful practical range. Needs vary with activity, energy intake and medical circumstances.

Example: at 70 kg, that is around 98–140 g protein daily. You can spread this across meals and snacks.

For people with kidney disease or other relevant conditions, protein targets should be agreed with their healthcare professional.

FUEL / PRACTICAL

# A flexible day of eating

These are examples to make balanced eating easier, not a fixed calorie plan. Adjust portions and foods to your needs, appetite, preferences and activity.

## Breakfast

- Skyr or Greek yoghurt, berries and oats.

## Lunch

- Chicken, tuna or chickpea salad with a wholegrain wrap or potatoes.

## Dinner

- Fish, lean meat or tofu, plenty of vegetables, and rice or potatoes.

## Snack if useful

- Fruit and cottage cheese, boiled eggs, or yoghurt.

## Supporting your bones

- Include calcium-rich foods such as dairy or fortified alternatives.
- Vitamin D matters for bone health. Ask your GP or pharmacist about suitable Irish guidance and supplementation.
- Strength exercise, adequate nutrition and avoiding smoking also support long-term bone health.

A meal plan should work around your lifestyle, not make you feel punished for having one.

BODY COMPOSITION

# What about menopause weight gain?

Changes in the waistline can feel frustrating. Oestrogen changes can influence fat distribution, while sleep disruption, appetite, activity and life stress can influence weight.

## Four useful habits

- Build protein into meals to support fullness and preserve lean mass.
- Notice hunger and fullness by slowing down when you can.
- Keep moving through the day; a short walk after meals can be helpful.
- Look at the whole picture: sleep, activity, eating habits and stress before making drastic changes.

## What to avoid

- Crash diets, detoxes and promises to "reset hormones".
- Assuming more intense exercise and fewer calories is always the answer.
- Using the scales as the only measure of progress.

Better measures: strength, energy, daily function, consistency, how clothes fit and how you feel. If fat loss is a goal, a sustainable calorie deficit can help, but preserving muscle and wellbeing matters too.

TFR 03 / RECOVER

# Sleep, stress and recovery

Recovery is part of a successful programme, not time wasted. Hot flushes, poor sleep and everyday responsibilities can all affect your capacity to train.

## Try these practical adjustments

- Keep sleep and wake times as regular as possible.
- Keep your bedroom cool and have easy-to-change bedding available if night sweats are an issue.
- Try getting outside in daylight early in the day.
- Experiment with earlier caffeine cut-off times if sleep is disrupted.
- Make room for gentle movement, breathing and time to unwind.
- Adjust hard workouts based on fatigue and recovery, rather than forcing a perfect training week.

## When extra help matters

Persistent insomnia, intense mood changes, frequent hot flushes or symptoms affecting daily life deserve a conversation with a GP. Effective medical treatments, including menopausal hormone therapy for appropriate patients, may be available.

YOUR FIRST WEEK

# Five small habits to begin

You do not have to change everything at once. Pick one or two and build from there.

01 Book two manageable strength sessions.

02 Include a protein source at breakfast, lunch and dinner.

03 Add a short walk or another enjoyable movement break.

04 Choose a consistent wake-up time.

05 Notice energy, sleep and mood without judging yourself.

## Your weekly check-in

- What went well?
- Where did you feel stronger or more energetic?
- What felt difficult, and what might make it easier next week?
- What is the one habit you want to keep?

Progress is not a straight line. Build a routine that can bend with real life.

NEXT STEP

# Want a plan built for you?

General advice is a starting point. The best training and nutrition plan fits your experience, priorities, symptoms, medical considerations and real-life schedule.

## David O’Shea | Strength & Nutrition

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## A final word

You are not required to “fight” menopause or chase your younger body. You can build strength, improve your health and feel more confident in the body you have today.

### ABOUT THIS GUIDE

Original educational content created for David O’Shea Strength & Nutrition. Informed by established strength, nutrition and menopause coaching principles, including the themes covered in Precision Nutrition’s menopause educational guide. This is not an official Precision Nutrition publication or certification.

This resource is for general education and is not a diagnosis, treatment plan or replacement for professional medical advice. Seek individual assessment for persistent symptoms, suspected early menopause, unexplained bleeding or concerns about bone or pelvic health.