STRONG THROUGH MENOPAUSE

Strength Training for Women Over 40 and 50

A 12-Week Menopause Workout Plan with 66 Illustrated Exercises at Home or in the Gym to Build Muscle, Protect Your Bones and Feel Strong Again







perimenostage

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How to Use This Book

This is a 12-week strength program for women in perimenopause and after menopause. It works at home with no equipment, at home with a few dumbbells and a band, or at a gym, and it starts wherever you are: never lifted, lifted years ago, or lifting now without a plan.

The book has three parts.

Part 1, Before You Start, explains why strength matters more in midlife than at any other time, how to check it is safe for you to begin, how hard each set should feel, and how to work around sore knees, a stiff shoulder, a weak back, bladder leaks or low bone density.

Part 2, The 12 Weeks, gives you every session. Two sessions a week, A and B, or three if you have the time. Each week has its own page with the exercises, sets, reps and effort level, a walking target and anything new that week.

Part 3, The Exercises, is the library. Each kind of movement, such as the squat or the row, has a ladder of three or four versions, from easiest to hardest, for each place you train. You find your rung, use it, and climb when it gets easy. Every exercise has a start and finish picture and three cues for good form.

How to use it in five lines

1. Read Part 1 once. Do the safety check.
2. Pick your track: no equipment, home with dumbbells, or gym (page 9).
3. Find your starting rung on each ladder (page 9).
4. Do week 1. Test yourself before the first session.
5. Write it down. The companion *Workbook & Tracker* has a log page for every session, or use a notebook.

If you'd rather have all of this built for you in a minute, for your stage, your equipment and your joints, the personalized plan is at **perimenostage.com/strong**.

Why Strength, Why Now

The menopause transition changes your body composition before it changes the number on the scale.

In the SWAN study, which followed women with body scans through the transition, lean mass started to fall and the rate of fat gain doubled when the transition began. Both continued until about two years after the final period [1]. Weight kept rising at the same steady pace the whole time, which is why the shift from muscle to fat is so easy to miss.

Muscle. Strength training is the most direct way to hold on to it. In trials of women aged 40 to 60, resistance training three times a week for at least six weeks built the most lean mass, and programs longer than 12 weeks did better [2]. That is why this program runs for 12 weeks and why it is worth repeating.

Bone. Bone loss is fastest from about a year before to two years after the final period [3]. In SWAN, spine bone density fell 10.6% over the 10 years around menopause, most of it around the final period [3]. Loss slows after that, but it continues.

Bone responds to load. In the LIFTMOR trial, postmenopausal women with low bone mass who lifted heavy twice a week under supervision gained 2.9% spine bone density in eight months, while a low-intensity group lost 1.2% [4]. This program builds toward heavier main lifts in weeks 9 to 12 and includes back-strengthening and balance work, as the UK consensus on exercise for osteoporosis recommends [5].

Hot flashes and sleep. In one randomized trial, 15 weeks of strength training three times a week cut moderate to severe hot flashes by 43.6% [9]. It is one trial, so treat it as a possible bonus rather than a promise. Exercise also helps sleep: in pooled data from 546 women with insomnia and hot flashes, aerobic exercise improved insomnia scores [8].

Belly fat. Strength training builds muscle; aerobic exercise does more for fat. In a meta-analysis of 5,697 postmenopausal women, combined programs of both reduced fat mass, waist size and visceral fat, the deep belly fat linked with heart disease [7]. That is why every week here has a walking target too.

It is not too late. Muscle loss from the transition levels off about two years after the final period [1], so for many women the work is rebuilding rather than holding on. Muscle res-

Find Your Track

Every exercise in this book belongs to a track, depending on where you train. Pick one. You can switch later, and you can mix: some women train at a gym twice a week and at home on the third day.

TRACK	YOU NEED	TYPICAL EXERCISES
No equipment	A sturdy chair, a wall, a step or stairs, a backpack, two grocery bags, a towel and a door	Sit-to-stand, wall push-up, towel row on a door, backpack Romanian deadlift
Home: dumbbells and a band	Two or three pairs of dumbbells, a resistance band with a door anchor, a chair or step	Goblet squat, dumbbell Romanian deadlift, one-arm row, seated press
Gym	Machines, dumbbells, a kettlebell and a bench	Leg press, hip thrust, cable row, lat pulldown

What to buy for the home track. Two or three pairs of dumbbells cover the whole 12 weeks for most women: a light pair (about 5 to 8 lb), a medium pair (10 to 15 lb) and, by week 9, a heavier pair (15 to 25 lb) for squats and deadlifts. Adjustable dumbbells save space. Add a medium resistance band with a door anchor and a sturdy chair or step.

No equipment is a real option. Bodyweight, a backpack, a towel on a door and grocery bags will take a beginner a long way. When the hardest rung gets easy, a pair of dumbbells is the next step.

Find Your Starting Rung

Each movement in Part 3 has a ladder of versions, from rung 1 (easiest) to rung 3 or 4. Your starting rung depends on your experience.

YOU ARE	WEEKS 1–4	WEEKS 5–8	WEEKS 9–12
New to strength training	Rung 1	Rung 2	Rung 2
Did some before, or returning after a break	Rung 2	Rung 3	Rung 3
Training regularly now	Rung 3	Rung 4	Rung 4

the impact work; add it later only when you can do it without leaking. If leaks don't improve, ask about pelvic floor physical therapy [12].

Osteoporosis or osteopenia. The UK consensus on exercise for osteoporosis recommends resistance and impact exercise for bone strength, strength and balance training to prevent falls, and back-extension exercises for posture. It advises avoiding postures with a lot of forward spinal bending [5]. There are no sit-ups or crunches in this program. Add the lying back extension to session A and a balance exercise to session B from week 1, and keep impact at heel drops and stomps. Move to hops only after your doctor or physical therapist agrees.

After a broken bone in the spine. People with a spinal fracture should usually keep impact to about the level of brisk walking [5], so leave out impact work and keep every set at RPE 7 or lower. Strength and back-extension exercises are still recommended. Show this book to your doctor or physical therapist before you start.

Pelvic floor exercises, daily. Sit or lie comfortably. Squeeze the muscles you would use to stop passing urine and hold in wind, lifting them up and in. Hold for up to 10 seconds, then relax fully for the same time. Repeat up to 10 times. Then do 10 quick squeezes. Do this three times a day and breathe normally throughout. Kegel exercises are among the things the Office on Women's Health suggests for leaks [12].

Bad Days

Perimenopause comes with bad days. The program plans for them.

The Program at a Glance

WEEK	PHASE	MAIN LIFTS	RPE	SESSION	WALKING	ALSO
Week 1	FOUNDATION	2 × 10–12	6	30 min	90 min	Tests before session A
Week 2	FOUNDATION	2 × 10–12	6	30 min	90 min	
Week 3	FOUNDATION	2 × 10–12	6	30 min	90 min	
Week 4	FOUNDATION	2 × 10–12	6	30 min	90 min	
Week 5	BUILD	3 × 8–12	7	40 min	120 min	
Week 6	BUILD	3 × 8–12	7	40 min	120 min	Tests after the last session
Week 7	BUILD	3 × 8–12	7	40 min	120 min	
Week 8	BUILD	2 × 8–12	7	40 min	120 min	Lighter week
Week 9	STRENGTH	4 × 6–8	8	45 min	150 min	Impact: heel drops
Week 10	STRENGTH	4 × 6–8	8	45 min	150 min	Impact: marching stomps
Week 11	STRENGTH	4 × 6–8	8	45 min	150 min	Impact: low two-foot hops
Week 12	STRENGTH	4 × 6–8	8	45 min	150 min	Tests after the last session · Impact: jump and stick

Week 1

FOUNDATION
WEEKS 1–4

Test day first: do the four tests before session A. Then learn the movements. Two sets of each, nothing heavy.

30 min	2 or 3	90 min	RPE 6
PER SESSION	SESSIONS: A, B (A)	BRISK WALKING THIS WEEK	HARDEST SETS

Session A

warm up first · p. 12

MOVEMENT	SETS × REPS	EFFORT	REST
Squat MAIN p. 35	**2 × 10–12**	RPE 6	90–120 s
Push MAIN p. 64	**2 × 8–12**	RPE 6	90–120 s
Hip hinge p. 45	**2 × 10–12**	RPE 6	60 s
Row MAIN p. 80	**2 × 10–12**	RPE 6	90–120 s
Carry p. 93	**2 × 30 sec**	RPE 6	60 s
Core: front p. 97	**2 × 6 per side**	RPE 6	60 s

Session B

MOVEMENT	SETS × REPS	EFFORT	REST
Hip hinge MAIN p. 45	**2 × 10–12**	RPE 6	90–120 s
Lunge and step-up MAIN p. 56	**2 × 8 per side**	RPE 6	90–120 s
Overhead press p. 73	**2 × 8–12**	RPE 6	60 s
Pulldown p. 86	**2 × 10–12**	RPE 6	60 s
Core: side p. 103	**2 × 15–30 sec per side**	RPE 6	60 s
Core: rotation p. 100	**2 × 6 per side**	RPE 6	60 s

> **Tests first.** Before session A, do the four strength tests (p. 13) and write down the results.

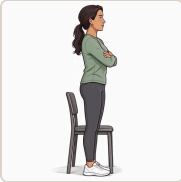
> **Postmenopause or osteoporosis:** add a lying back extension (2 × 8, RPE 6) to session A and a balance exercise (2 × 30 sec per side) to session B from this week (p. 15).

THE LADDER

Squat

Thighs and glutes. The movement behind getting up from a chair, the floor or the toilet.

NO EQUIPMENT



RUNG 1

Sit-to-stand

p. 36



RUNG 2

Box squat to chair

p. 37



RUNG 3●

Bodyweight squat

p. 38

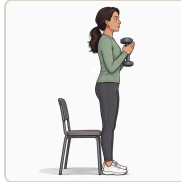


RUNG 4●

Split squat

p. 39

HOME



RUNG 1

Goblet sit-to-stand

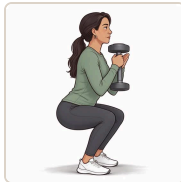
p. 40



RUNG 2

Goblet box squat

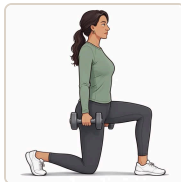
p. 41



RUNG 3●

Goblet squat

p. 42



RUNG 4●

Dumbbell split squat

p. 43

GYM



RUNG 1

Leg press

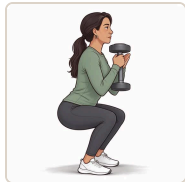
p. 44



RUNG 2

Goblet box squat

p. 41



RUNG 3●

Goblet squat

p. 42



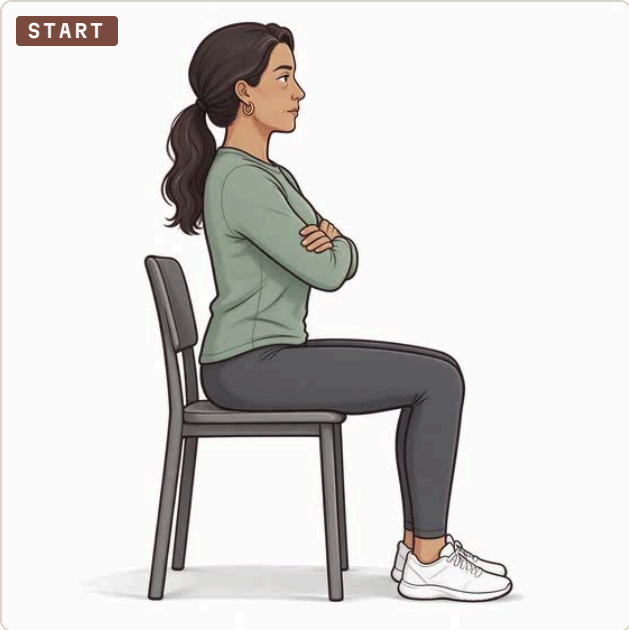
RUNG 4●

Dumbbell split squat

p. 43

Knee pain: skip rungs marked ●. Use Sit-to-stand (no equipment), Goblet sit-to-stand (home), Leg press (gym).

Sit-to-stand





1. Lean your chest forward slightly, then drive through your whole foot to stand.
2. Stand all the way up and squeeze your glutes at the top.
3. Lower slowly, taking about three seconds to sit back down.

WATCH FOR

- Knees caving inward: push them out over your middle toes.
- Heels lifting: sit back more, or use a chair to sit to.
- Rushing the way down: take about three seconds.

IN THE PROGRAM

- Session A, main lift · weeks 1–12
- Session B · weeks 9–12

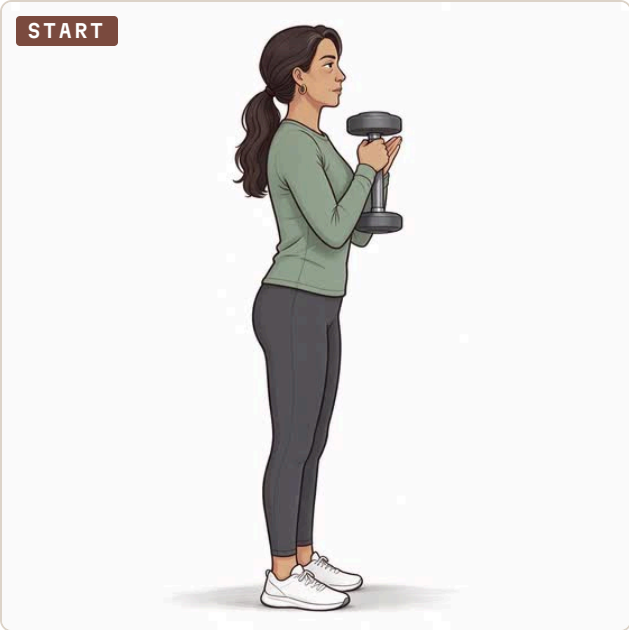
ON THE LADDER

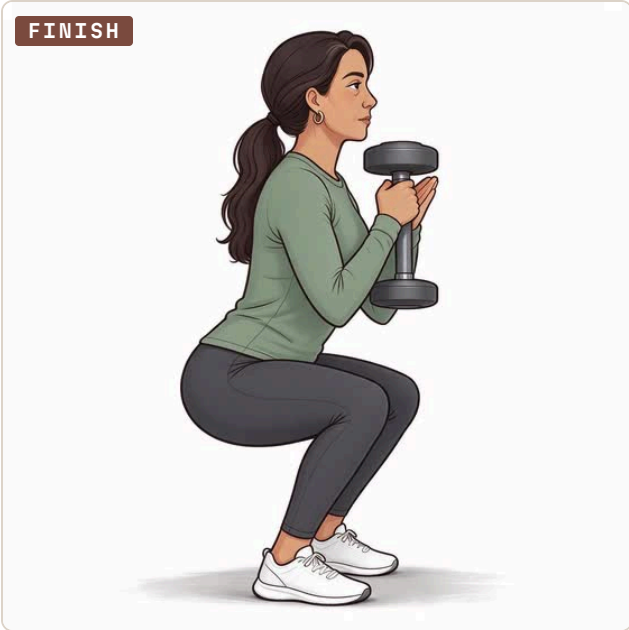
NO EQUIPMENT · RUNG 1 OF 4

This is the first rung.

Harder: Box squat to chair p. 37

Goblet squat •





1. Keep your elbows inside your knees at the bottom.
2. Chest stays up; the dumbbell should not pull you forward.
3. Breathe out on the way up.

WATCH FOR

- Knees caving inward: push them out over your middle toes.
- Heels lifting: sit back more, or use a chair to sit to.
- Rushing the way down: take about three seconds.

IN THE PROGRAM

- Session A, main lift · weeks 1–12
- Session B · weeks 9–12

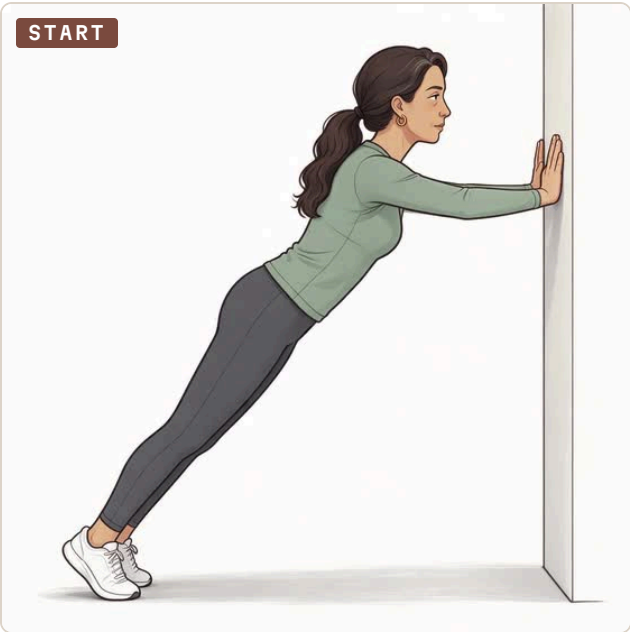
ON THE LADDER

HOME · RUNG 3 OF 4
GYM · RUNG 3 OF 4

Easier: Goblet box squat p. 41
Harder: Dumbbell split squat p. 43

● Bends the knee deeply. With knee pain, use the knee swap on the ladder page.

Wall push-up





1. Body stays in one straight line.
2. Elbows angle back, not straight out to the sides.
3. Push the wall away.

WATCH FOR

- Hips sagging or piking: squeeze glutes and stomach so your body moves in one line.
- Elbows flared straight out: angle them back about 45 degrees.
- Half reps: lower until your chest is close to the surface.

IN THE PROGRAM

- Session A, main lift · weeks 1–8
- Session A · weeks 9–12

ON THE LADDER

NO EQUIPMENT · RUNG 1 OF 4

This is the first rung.

Harder: Counter push-up p. 66