

Perimenopause Toolkit



Empowering Through Education



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Introduction



Perimenopause: An Introduction

Menopause marks the end of female reproduction and usually happens around the age of 51 years. The years leading up to this is referred to as perimenopause. Many women experience changes in their menstrual cycle, accompanied by a wide and diverse range of physical and psychological symptoms. These can last for several years before menstrual periods come to a final stop. Every woman will have a different experience of symptoms throughout this time.

There are many supports including lifestyle adjustments such as exercise and diet, which may improve a woman's experience of symptoms during this life stage as well as help lower the risk of health conditions in later life.

This toolkit provides you with information and resources to empower you with how best to manage the perimenopausal phase of life and look at ways to optimize your health beyond the menopausal transition.



What Is In This Guide



This booklet is designed to provide you with health information to support you to manage your health in a new stage of life.

- This booklet is not intended to replace healthcare information from medical professionals.
- Specific guidance surrounding treatment such as hormone replacement therapies should only be delivered by qualified medical practitioners with expertise in female health.
- Women should be supported when discussing their experience of menopause, especially if it is impacting their everyday life. Workplaces can consider implementing employee wellbeing initiatives to those going through menopause, such as extra breaks and flexible work hours.
- Additional educational supports for women will be available through SHE Research.

This resource was created primarily for women - those who identify as a woman as well as those that do not identify as a woman but share the same biological realities and experiences, for example, trans, queer, agender, cisgender, gender fluid, intersex and gender non-conforming people.



2

About Perimenopause

MENOPAUSE



Understanding The Female Reproductive Cycle

A woman's reproductive life is shaped by hormonal changes from puberty to menopause. These shifts affect fertility, emotions, and overall health, bringing different symptoms and experiences at each stage.

1

PUBERTY (8-14 YEARS)



Puberty marks the beginning of a girl's reproductive life, driven by rising estrogen and progesterone levels. These hormones trigger menstrual cycles, breast development, and body changes. Emotional shifts and mood swings are common as the body adjusts to these new hormonal patterns.

2

REPRODUCTIVE YEARS (15-45 YEARS)



During this stage, estrogen and progesterone regulate monthly cycles, supporting fertility and overall health. Hormonal fluctuations can impact mood, energy, and skin health. Pregnancy, contraception, and menstrual health are key considerations during this time.

3



PERIMENOPAUSE (APPROX 40 YEARS)

This transition phase before menopause sees estrogen levels fluctuating, leading to irregular periods. Many women will experience symptoms such as hot flashes, mood swings, sleep disturbances and urogenital changes as their bodies prepare for menopause.

4

MENOPAUSE (45-55 YEARS)



Menopause is the specific point during the menopause transition where a woman has not experienced a menstrual period for at least 12 months. It marks the end of reproductive years.

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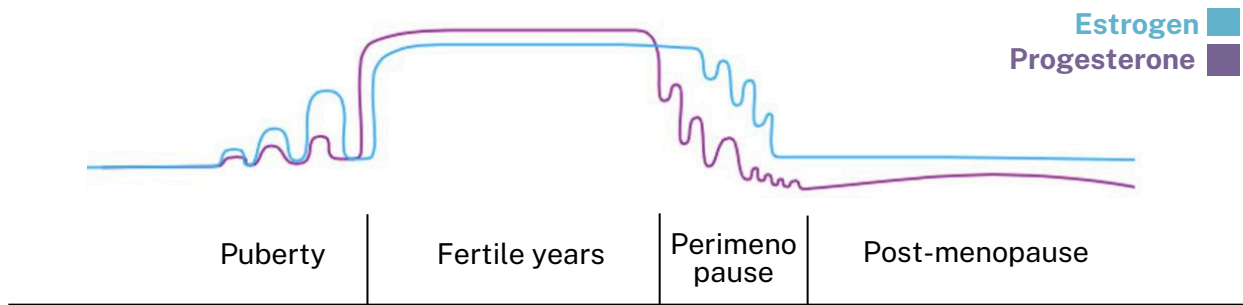
POST MENOPAUSE



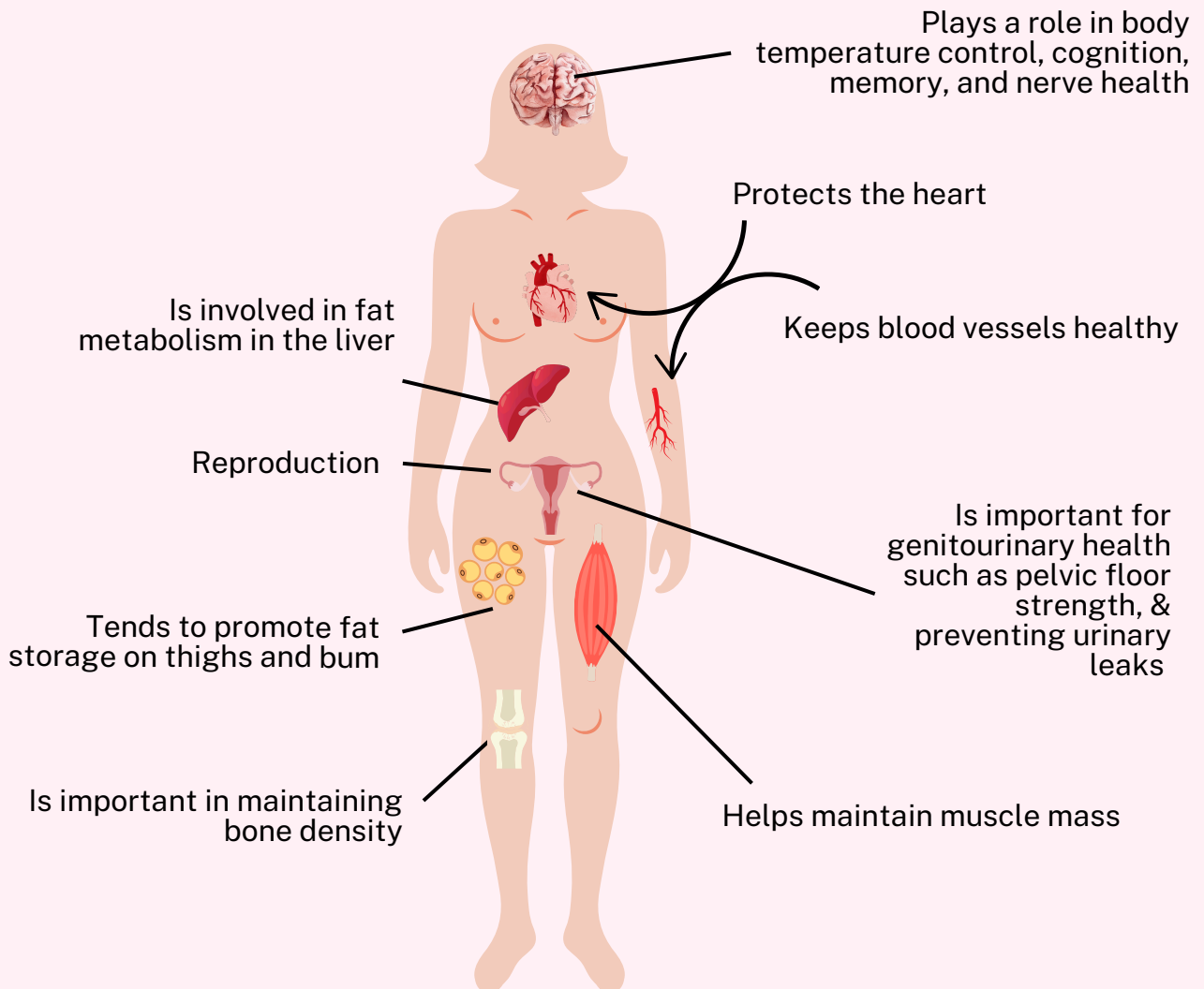
This stage begins after menopause and women are in this phase for the rest of their life. After menopause, estrogen and progesterone levels remain low, marking the end of menstrual cycles. This can lead to symptoms like vaginal dryness, bone density loss, and increased health related risks.

The Female Sex Hormones

Two key hormones involved in the female reproductive cycle and overall health are **estrogen** and **progesterone**. The production of these hormones fluctuates throughout the menstrual cycle and changes over a woman's lifetime. The graph below illustrates how their levels vary across different life stages.



While these hormones are essential for pregnancy, they also play a vital role in lots of other functions in the body. Changes in their levels can significantly impact overall well-being. The picture below shows how estrogen, in particular, influences a wide range of bodily functions.



Perimenopause: A Closer Look

Perimenopause is a transitional stage that can bring both challenges and opportunities, including shifts in hormone levels, changes in menstrual cycles, and a chance to prioritize overall well-being. Understanding this phase can empower you to navigate it with confidence and make informed choices about your health. We are highlighting some common experience for women during perimenopause.

Symptoms

Women's experiences of symptoms vary, but common changes due to decreasing hormone levels include, sleep problems, physical fatigue, mental exhaustion, depressive mood, irritability, anxiety and joint and muscle discomfort.

Long term health

As perimenopause transitions to menopause, symptoms may ease or change, but lower estrogen can increase the risk of bone density loss, heart disease, weight gain and diabetes.

Life Transitions

Perimenopause often overlaps with major life events, adding to physical and psychological shifts. Women may navigate caring for children, aging parents while managing added responsibilities and stress, For some women they may be adjusting to empty nest syndrome as children gain independence, balancing career changes or peak work demands, and experiencing relationship shifts, including changes in intimacy, marriage, or divorce.



Perimenopause: Symptoms

The experience of symptoms during perimenopause varies largely between women. Use this checklist to help identify any symptoms you have, to better explain your symptoms to healthcare professionals

	None	A little	Quite a bit	Extremely
Heart beating quickly or strongly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling tense or nervous	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty in sleeping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Excitable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attacks of anxiety, panic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty in concentrating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling tired or lacking in energy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Loss of interest in most things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling unhappy or depressed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crying spells	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Irritability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling dizzy or faint	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pressure or tightness in head	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parts of body feel numb	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Headaches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Muscle and joint pains	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Loss of feeling in hands or feet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Breathing difficulties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hot flushes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sweating at night	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Loss of interest in sex	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Physical Activity

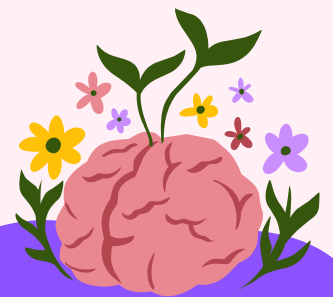


Why It Is Important To Be Active During Perimenopause

As your hormone levels change, staying active is important for reducing health risks. The decline in estrogen leads to physiological changes such as decreased bone density, muscle mass, and metabolism. Regular movement supports overall health, mobility, and independence while managing menopause symptoms and lowering age-related risks. Staying active at any level benefits both physical and mental well-being.

The Benefits of Exercise for Perimenopausal Women

- ✦ May alleviate menopausal symptoms
- ✦ Enhances mental health and emotional well-being
- ✦ Promotes better sleep quality
- ✦ Maintains / enhances bone health
- ✦ Maintains / enhances cardiovascular health
- ✦ Maintains / enhances metabolic health & reduces the risk of diabetes
- ✦ Maintains or improves muscle mass
- ✦ Enhances quality of life



During perimenopause, women face a higher risk of anxiety and low mood. Staying active may help manage these symptoms.

Recommended Levels of Physical Activity

Engaging in regular physical activity, including moderate-intensity **aerobic exercise** and **resistance training**, is recommended to support and improve health during perimenopause.

Aerobic Exercise

Aerobic exercise is any activity that raises your heart rate and breathing for an extended time through continuous, rhythmic movement. Simple activities like brisk walking, jogging and running, hiking, cycling, swimming, and dancing are great examples. Some forms of exercise classes such as circuit classes can also provide aerobic benefits if your heart rate and breathing rate is elevated.

How Much Aerobic Activity Should I Do?

You should aim to do

- 2 hrs and 30 mins to 5 hours of moderate intensity aerobic activity OR
- 1 hr and 15 mins to 2 hrs and 30 mins of vigorous aerobic activity every week

This means you should aim to do 30 mins of aerobic exercise on 5 days per week.

Resistance Exercise



Resistance exercise is any form of exercise that strengthens the muscles by working against a force. Examples include free weights, machine weights, resistance bands, body weight exercises. Resistance exercise is particularly important for maintaining metabolic health.

How much Resistance Exercise should I do?



You should aim to do

- Muscle strengthening activities, targeting all major muscle groups on 2 or more days of the week

This means you should aim to do exercises that target your leg muscles, arm muscles, abdominal and back muscles on at least 2 days each week.

However, if you currently do not meet this level of physical activity, any increase in physical activity, even small amounts, improves health — start gradually and build up over time.

Specific Considerations For Perimenopausal Women

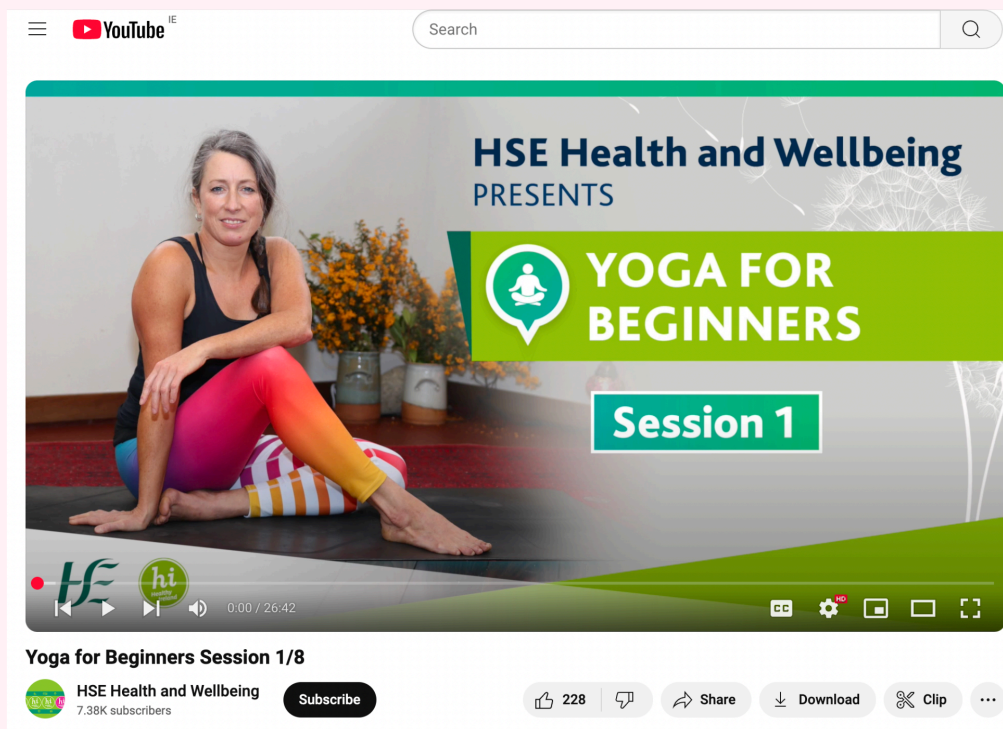
Yoga and Menopausal Symptoms

Yoga may be a beneficial form of exercise for perimenopausal women, helping to manage symptoms caused by hormonal changes. Some research evidence suggests that yoga may reduce or eliminate vasomotor symptoms like hot flashes and night sweats. Research also shows yoga may improve sleep quality, anxiety, depression, BMI, and blood pressure.



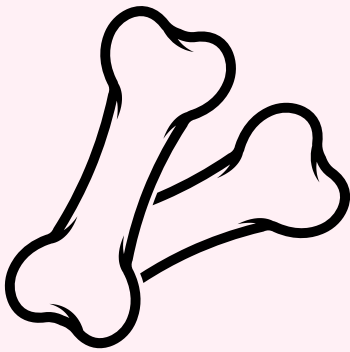
Find a local yoga class or explore free pre-recorded classes online to practice at home.

If you're new to yoga, the HSE offers a fantastic series of free beginner-friendly classes on YouTube. You can access these videos from this link: [Yoga For Beginners](#)



Specific Considerations For Perimenopausal Women

Exercise and Bone Health



Maintaining bone health is crucial for women throughout the lifespan, as bone density naturally declines as we age and also due to the decrease in oestrogen. This can increase the risk of developing osteoporosis and fractures later in life. Keeping bones strong is essential for long-term mobility and overall well-being. Exercise can play a key role in bone health.

Not all exercise promotes bone health

While swimming, aqua aerobics, and cycling are great for cardiovascular fitness, they are low-impact and less effective for promoting bone health. If you enjoy these activities, it's important to also include higher-impact exercises in your routine to support bone strength.

I would like to add more weight bearing exercise into my routine, what can I do?

Jogging, dancing, step aerobics, jumping and any form of resistance training are all excellent ways to promote bone health. You should consider incorporating these into your weekly routine provided you not been diagnosed as having osteoporosis or had any unexplained fractures.



Jumping Exercises for women

Jumping exercises can be very effective to help strengthen bones by stimulating bone growth and improving bone density. This is especially important for women, as bone loss accelerates during perimenopause and beyond.

Simple jumping exercises include:

- Rhythmic jumps / Jump squats
- Skipping (Jump Rope)
- Single leg hops
- Side-to-side hops

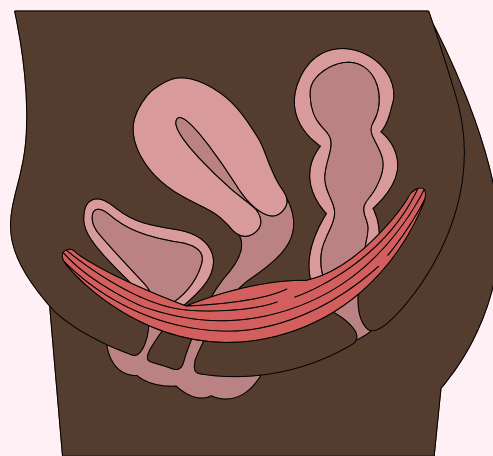


Incorporating these exercises a few times a week can support and preserve bone health and reduce the risk of fractures later in life.

Specific Considerations For Perimenopausal Women

Pelvic Floor Exercises

The pelvic floor muscles support the bladder, uterus, and bowel but may weaken during menopause, causing leakage or prolapse. Strengthen these muscles with Kegels, pelvic tilts, walking, and Pilates. Maintain a healthy weight and posture to reduce pressure. If you experience issues, consult a women's health physiotherapist. Like any other muscle in the body, pelvic floor muscles should be maintained to stay strong and active.



How to work the Pelvic Floor Muscles

While sitting or lying comfortably, imagine stopping both wind and urine flow at once. Draw your pelvic floor muscles upward and forward from the back passage toward the bladder. You should feel a lifting and tightening sensation as the muscles contract.

Pelvic Floor Exercise Guidelines

Exercise Types:

- Long Squeezes: Tighten, hold, then fully relax. Repeat until muscles tire.
- Short Squeezes: Quickly tighten and release. Repeat until fatigued.

Routine:

- Aim for 10 long squeezes (10 seconds each) and 10 short squeezes per session.
- Start with small sets if needed and gradually increase.
- Practice at least 3 times daily, beginning in a seated or lying position.

Progression:

- Expect improvement in 3–5 months; continue daily for maintenance.
- Gradually begin performing the exercises while standing, walking, or bending to build strength and control during everyday activities.



ADDITIONAL TIPS FOR STAYING ACTIVE

1

Reduce sedentary time

Limit the amount of time spent sitting and replace sedentary time with light intensity physical activity when you can.

2

Some activity is better than none

Even small amounts of additional movement in your day are good for you. Simple activities like taking the stairs, stretching, or walking short distances can make a difference in your overall health and well-being.

3

Start slow

If you're new to exercise, start slow and build up gradually. Starting with just 5 minutes of movement and adding a little bit more each week is a great way to build up your activity.

4

Do things you enjoy

Choose activities you enjoy. Staying active in ways that feel fun and you are looking forward to makes it easier to maintain a consistent routine.

5

Exercise with friends

Being active with other people can not only make it easier but also provide you with an opportunity to socialise. Find a friend to meet for a walk, or join a group exercise class.

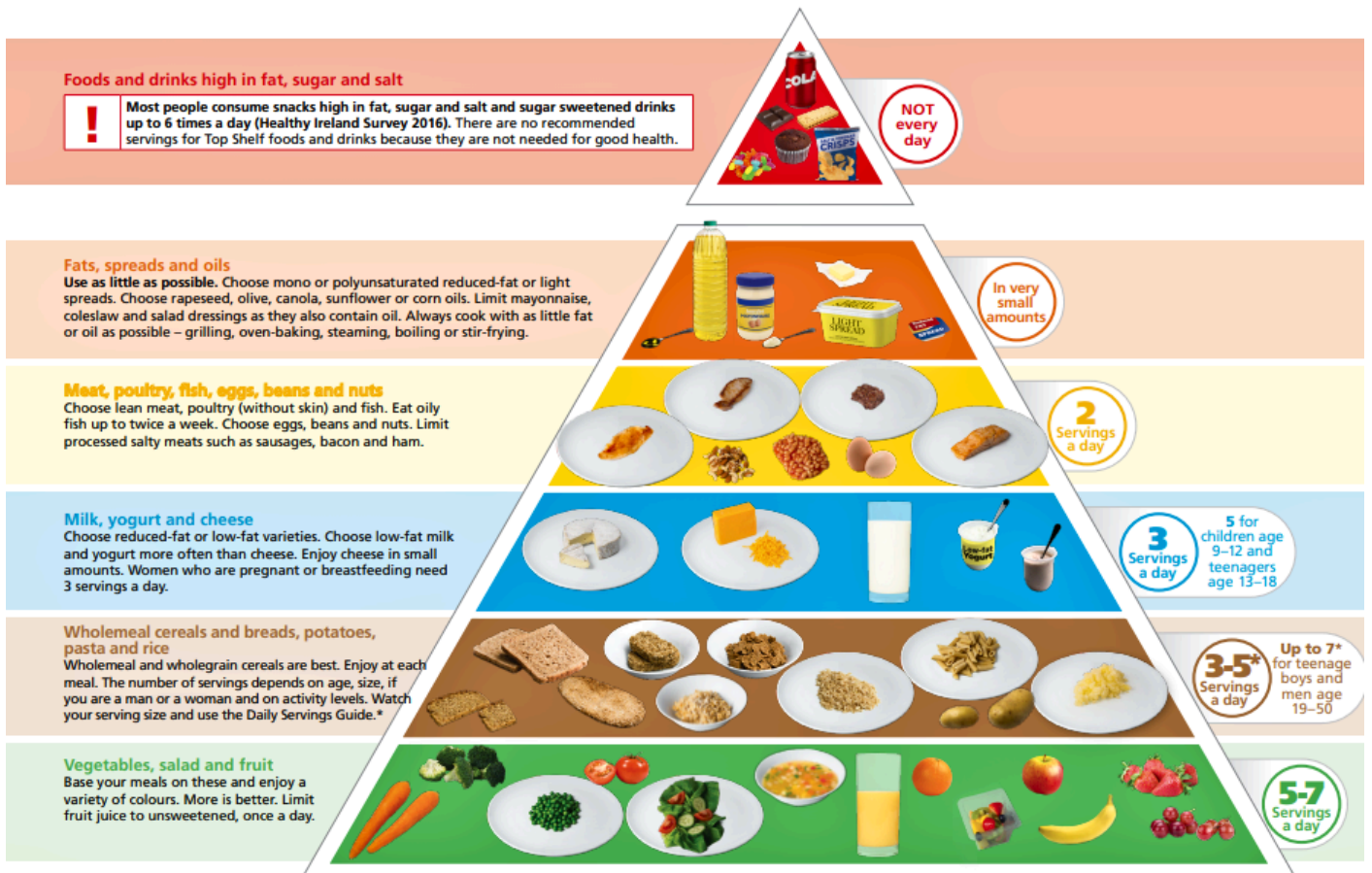
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Nutrition



Nutrition

Eating a varied diet with plenty of fruit and vegetables, wholegrains, protein rich food including oily fish may improve menopausal symptoms. Remember the food pyramid as a guide for portion sizes.



Source: Department of Health, December 2016.

By following these guidelines you are more likely to be able to maintain a healthy body weight, decrease some menopausal symptoms and also protect your future health.

Don't forget to drink plenty of fluids. You should be aiming for 1.5 -2 litres a day but you might need more if you are active or if the weather is hot.

Fluids are essential for many body functions and even mild dehydration can impact how we think and feel and this is often before we have any signs of thirst. It is particularly important to stay hydrated during menopause as many of the effects of dehydration can be similar to menopausal symptoms.

Nutrition Tips for Perimenopause

Managing symptoms



Foods such as spicy foods, caffeine, alcohol & some cheeses can increase the amount and intensity of hot flushes.



Try to keep a note of foods you were eating in the day or hours before a hot flush to try and identify any triggers.

A Mediterranean style diet has been shown to reduce hot flushes and night sweats as well as having a positive effect on mental health and well being in many menopausal women.



Research has shown that women who eat more added sugar in their diet may be at an increased risk of depression around menopause. Try to include plenty of wholegrain foods in your diet and opt for fruit as a sweet treat.

Try to include a protein food with most of your meals and snacks. By spreading it throughout the day, it helps maintain muscle and also helps keep you feeling full for longer.



Weight gain can be common during perimenopause and is linked to more symptoms including hot flushes and nightsweats.

Soya contains phytoestrogens, which mimic estrogen in the body. Two servings a day of soy based foods have been shown to reduce menopausal symptoms including hot flushes for some women.



Eating Well For Future Health

Cardiovascular disease (CVD) is the leading cause of death in post-menopausal women.



Osteoporosis is a silent disease, which we may not realize we have until we develop an osteoporotic-related bone fracture.



Considering supplements?

Vitamin D is key for bone health as well as immune function. Include foods high in vitamin D - oily fish, eggs and fortified cereals. Most adults should consider Vitamin D supplements (15ug/day) particularly in winter months when we cannot make vitamin D from the sun.



Brain Health

Don't forget to include at least one portion of oily fish, linseed and raw nuts as a source of Omega 3 - a key polyunsaturated fatty acid, shown to aid in memory and cognition.



Prevention is better than cure

A Mediterranean style diet, high in fruit, veg, beans, lentils and lean meats has been shown to lower the risk of CVD, some cancers, and is also associated with lower menopausal symptoms.

Include calcium rich foods

Include 3 servings of calcium rich foods in your diet every day such as a glass of milk, a yogurt or some cheese -around a small matchbox size.

Sleep

Magnesium may be helpful for aches, pain and a restful sleep which can be impacted during menopause. Foods rich in magnesium include fish, meat, wholegrains and pulses.

5

Behaviour Change



Behaviour Change

All of these exercise and dietary recommendations can sound overwhelming. But to help you get started, the following exercise can encourage you to identify not so helpful habits, and address barriers that keep us from making lifestyle changes.

Reflect on current habits

	Often	Sometimes	Rarely
Do you eat at least 5 portions of fruit and veg per day?			
Do you eat 3 servings of dairy per day?			
Do you eat high fibre foods such as wholegrain breads, oats, nuts and seeds every day?			
Do you do at least 150 minutes of aerobic exercise per week? Such as jogging, hiking, and cycling			
Do you do resistance training at least twice per week?			
Do you eat processed foods such as chocolate, sweets, and takeaways?			

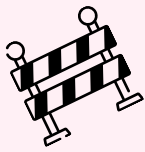
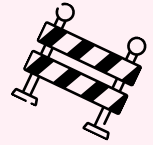
Understand Your Barriers

Common barriers women encounter when trying to lead a healthy lifestyle include...



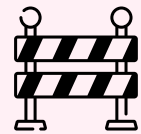
Perceived reduced capability (“I’m too old to take up running”)

Menopause related symptoms (Maybe we feel too tired to exercise or maybe we notice “leaking” when we jump or run)



Busyness of life and competing demands.
 (“I don’t have time to cook from scratch every evening”)

Lack of relatable opportunities (“The gym is so daunting!
Everyone there is so young”)



If we address our own barriers, we can think of solutions to overcome them and progress on our health and wellness goals.

I am too tired to exercise after work...



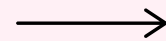
I will warm-up and see how I feel then...

Barrier:



Solution:

Barrier:



Solution:

Barrier:



Solution:

6

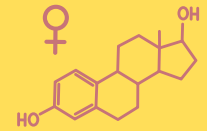
Pharmaceutical Support



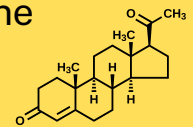
Hormone Replacement Therapy

Hormone replacement therapy (HRT) involves replacing the hormones that naturally fall during menopause, in order to potentially alleviate symptoms and maintain health. The key hormones are:

Estrogen: Delivered through patch, gel or tablet. If you have had a hysterectomy, you can use estrogen-only treatment



Progesterone: If you have a womb, you will need to combine estrogen with progesterone (combined HRT) to regulate the lining of the womb to prevent womb cancer. This comes in the form of an intrauterine device (IUD), tablets, patches, or vaginal pessaries



Testosterone is not routinely prescribed for the management of menopausal symptoms but may be prescribed by a doctor in specific situations. It is usually delivered through a cutaneous gel.

Are there risks associated with HRT?

For most women, HRT is safe but it depends on the individual:

- For women under 50, HRT has minimal risks as it replaces naturally recurring hormones at that age
- For women under the age of 60, the benefits generally outweigh the risks
- For women aged under 70, the benefits are equal to the risks
- For women aged over 70, risks tend to outweigh benefits. But this will depend on the woman and it is important to chat to your doctor about options



Women coming off HRT should **gradually decrease** their dosage in consultation with their doctor.

Hormone Replacement Therapy: Benefits vs Risks



Benefits of HRT	Risks of HRT
Reduced menopausal symptoms and better quality of life	Small increased risk of breast cancer with combined HRT. The risk increases the longer you take it and the older you are (5 extra cases of breast cancer in every 1,000 women who take combined HRT for 5 years). Vaginal estrogen does not pose this risk
Protect against osteoporosis. Particularly important if you are menopausal before age 45	Small increased risk of blood clots with HRT tablets. No risk with patches, sprays, gels
There is some evidence that HRT itself can improve your mood and your sleep	Very low risk of stroke with HRT tablets, particularly if aged under 60. No risk with patches, sprays, gels
HRT improves sexual function and libido in many women	Risk of endometrial (womb) cancer with estrogen-only treatment

Alternative Therapies



Plant extracts and herbal remedies have been gaining attention to manage menopausal symptoms. Some individuals may find them helpful.

However, research is still lacking in this area. Some of most popular are:

- **Phytoestrogens** - these mimic estrogen in the body to alleviate the effects of decreased naturally occurring estrogen.
- **Agnus Cactus** - Contains linoleic acid which acts on estrogen receptors.
- **St John's wort** - shown to improve overall mood, sleep and menopausal symptoms. It can however interfere with some medications.
- **Evening primrose oil** - may reduce severity of hot flashes for some women.

Acupuncture and massage have been shown to relieve menopausal symptoms such as night sweats, sleep disturbances and anxiety for some women.



Women who are susceptible to depression and anxiety may find medications such as anti-depressants beneficial as menopause may heighten such symptoms.

Cognitive behavioural therapy (CBT) may improve hot flushes as well as improve psychological symptoms of anxiety and stress, which can also increase due to life changes. CBT focuses on the links between physical symptoms, thoughts, feelings and behaviour. The way we think about symptoms in certain situations can affect how we feel and what we do, and these reactions can in turn exacerbate the intensity of symptoms. CBT focuses on changing how we think and act to change unhelpful behaviour patterns.

7

Sleep

Around 12% of women experience sleep issues, which become more common in midlife, affecting 39-47% of perimenopausal and 35-60% of postmenopausal women.

Achieving Restful Sleep

HRT

HRT improves sleep quality. Many women experience symptoms such as night sweats, flushes, needing to go to the toilet throughout the night as well as anxiety. HRT can ease a lot of these symptoms and help you sleep better through the night.

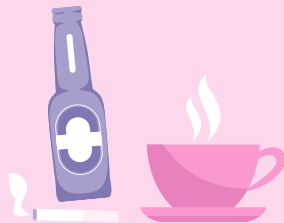
Practice Relaxation Techniques

Techniques such as deep breathing, progressive muscle relaxation, journaling and guided imagery can help you relax.



Limit Caffeine, Nicotine and Alcohol Intake

Caffeine is a stimulant and can have a negative effect on sleep (avoid after midday). Alcohol has also been linked with poor sleep quality.



Exercise Daily

Regular physical activity can help you fall asleep faster and enjoy better sleep quality. However, avoid exercising too close to bedtime.



Avoid Large Meals Before Bed Time

Large meals can cause indigestion and make it harder to sleep. Try to avoid eating at unusual times, and limit fluid intake before bed, as both can disrupt your body clock.



Environment

Keeping your bedroom cool and well ventilated can improve sleep. It's also important to keep your environment quiet and dark and avoid blue screens for at least an hour before bed.



8

Additional Resources

Nobody should have to struggle through menopause alone. If you would like to learn more about support that is available, please take a look below

Medical support

- The Irish College of GPs can provide resources and contacts for Menopause specialists if required:
- <https://icgpnews.ie/menopause-patient-information/>
- Don't forget to book in with your GP for yearly health check ups to monitor cholesterol, blood sugar, weight, and blood pressure.
- Breast check: We should all be getting our breasts checked from age 50. Check that you are on the HSE breast check register and you will be invited for testing: <https://www2.hse.ie/conditions/breast-screening/checking-the-breast-screening-register/>
- Cervical screening: CervicalCheck is Ireland's national screening service and you are invited for screening every 3 years until the age of 65.

Get talking

- The HSE NCS Counselling in Primary Care Service (CIPC) provides 8 counselling sessions with a professionally qualified and accredited Counsellor/Therapist. CIPC operates from over 240 locations situated throughout Ireland, typically located in Primary Care Centres. Ask your GP for a referral.
- Cognitive behavior therapy (CBT): How we feel and think, affects how we act. In order to stop unhelpful behavior patterns changing both thinking (cognition) and what you do (behavior) is necessary. Check out the HSE for further information: <https://www2.hse.ie/mental-health/services-support/supports-services/>

Get active

- National governing bodies and local county sports partnerships provide exercise class and group activities for women, such as Mothers and Others (local GAA clubs), and KickFit (local soccer clubs).

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The content in this booklet has been curated by Edel Flynn, Rita de Cassia Trentz de Carvalho, Dr Fiona Skelly and Dr Trish Heavey.

We would like to thank Sport Ireland, UPMC and TUS for supporting our previous and ongoing research in menopause and lifestyle behaviours.

