

Navigating Menopause

A Physician's Guide to Hormonal
Balance, Symptom Relief, and
Thriving in Midlife



Jeffrey Dach MD

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A Physician's Guide to Hormonal Balance,
Symptom Relief, and Thriving in Midlife**
by Jeffrey Dach, MD

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Introduction by Jeffrey Dach MD

This is a free book for you to download and read at your leisure. This information is intended for the general population of women experiencing symptoms of the menopausal transition and later, menopause itself. For readers who wish more in-depth information, I refer to you my new book, *Bioidentical Hormones 101 Second edition (2025)* available on Amazon as ebook, audible, and paperback.

This new edition (2025) version is a more authoritative version, is backed up by thousands of references to the medical literature.

The first edition of *Bioidentical Hormones 101 (2011)* is available for free as a pdf download from my website <https://jeffreydachmd.com/>.

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Chapter 1

Understanding the Chaos:

What's Really Happening in Perimenopause and Menopause

Sarah was standing in her kitchen, stirring pasta for dinner, when the "Hot Flash" hit her again — a sudden wave of heat rising from her chest, sweat breaking out on her forehead, and her heart racing like she'd just run a mile. She was only 46. "What on earth is happening to me?" she thought. Moments later, she snapped at her teenager over nothing, then felt guilty and teary. That night, she had insomnia, she tossed and turned until 3 a.m., her mind racing with worries that felt bigger than usual.

If this sounds familiar, you're not alone — and you're not losing your mind. What you're experiencing is perimenopause, the natural transition your body is making as it prepares for menopause. Many women describe it as feeling blindsided, like their reliable body suddenly decided to rewrite all the rules. The good news? Understanding what's really going on is the first step toward feeling like yourself again — and even discovering a stronger, wiser version of you on the other side.

What's Actually Happening in Your Body

Perimenopause usually begins in your mid-40s (though it can start earlier or later) and can last anywhere from 4 to 10 years. During this phase, your ovaries are still trying to function, but they're becoming less reliable.

The eventual transition to full menopause means ovarian failure. The ovaries stop ovulating completely. Once you've gone 12 full months without a period, you have officially reached menopause. At this point, estrogen, progesterone, and testosterone levels are all very low.

Laboratory testing often reveals wild fluctuations in estrogen levels during perimenopause, which is sometimes very high one week and then dropping sharply the next, along with a gradual rise in FSH (follicle stimulating hormone). These changes reflect your ovaries working harder (and eventually failing) to keep up with declining egg reserves. At the same time:

Estrogen levels fluctuate wildly at first, then gradually decline to low levels of estrogen deficiency.

Progesterone is the first to decline, especially after ovulation becomes less regular and eventually stops. Progesterone production depends on ovulation, so when ovulation stops, progesterone production also stops.

Testosterone declines more slowly but still contributes to changes in energy, mood, and muscle tone.

Estrogen receptors are present in every organ of the body, your brain, heart, bones, joints, eyes, and more. As I explain in my book, *Bioidentical Hormones 101, Second Edition* (2025), this wide distribution explains why declining estrogen and testosterone can affect so many areas of health over time.

Common Myths That Make This Phase Harder

Let's clear up a few things right away:

Myth: Menopause means the end of your vitality.

Truth: This can actually be the beginning of a powerful “Second Spring” — a time when many women report feeling more confident, focused, and free once they learn how to support their changing body.

Myth: You just suffer through it.

Truth: Complete relief from menopausal symptoms is the goal of Bioidentical Hormone replacement, an integral part of our menopause program as described in later chapters 11-13.

Myth: It's only about hot flashes, night sweats, brain fog and insomnia. These are called menopausal symptoms.

Truth: Although complete relief menopausal symptoms is achieved with bioidentical hormone replacement, there are long term benefits as well as discussed below.

Bone density and osteoporosis prevention: Estrogen and testosterone help keep bones strong and dense, significantly reducing the risk of osteoporosis and painful fractures as you age.

Joint health and osteoarthritis: Estrogen is the key hormone for maintaining cartilage and reducing joint inflammation, preventing onset of osteoarthritis. Topical application of estrogen to painful joints can induce cartilage regeneration, and even reverse osteoarthritis in animal models.

Brain, cognitive function and dementia prevention: Estrogen is our hormone for memory, focus, and cognitive function, while lowering the long-term risk of dementia.

Heart health and coronary artery disease: Estrogen keeps blood vessels flexible and healthy, reducing the buildup of plaque and lowering the risk of coronary artery disease.

Eye health: Estrogen helps protect against macular degeneration, a common cause of vision loss later in life.

Mood and emotional well-being: Estrogen, progesterone and testosterone are powerful mood stabilizers, serve as the ultimate antidepressant, and ease anxiety and mood disorders, commonly experienced during perimenopause transition and menopause.

You are not broken. Your body is simply asking for new kinds of support.

Practical Steps You Can Take Right Now

You don't need to wait until you feel completely overwhelmed. Here are realistic strategies you can start today — even with a busy life:

1. Track Your Symptoms and Cycle

Keep a simple daily note on your phone: how you slept, any hot flashes, mood shifts, energy level, and where you are in your cycle. After just two weeks, patterns often become clear. This helps you feel more in control and gives your doctor useful information if needed.

2. Stabilize Blood Sugar with Balanced Meals

Blood sugar swings can worsen mood, fatigue, and hot flashes. Try the “protein + fiber + healthy fat” plate: eggs with avocado and spinach for breakfast, grilled chicken salad with olive oil dressing for lunch, or salmon with broccoli and quinoa for dinner. Eating every 4–5 hours prevents the blood sugar rollercoaster swings.

3. Support Your Nervous System with Magnesium

Many women are low in magnesium which helps calm the brain and muscles. Aim for 300–400 mg of magnesium glycinate in the evening. It often improves sleep, reduces irritability, and eases muscle tension. (Check with your doctor first if you have kidney issues.)

4. Move Your Body Gently but Consistently

Strength training 2–3 times a week (even with light weights or resistance bands) helps maintain muscle, supports metabolism, and boosts mood through endorphins. Add daily walking — 20–30 minutes is enough to start. Yoga or gentle stretching in the evening can calm hot flashes and improve sleep.

5. Create a Soothing Wind-Down Routine

Dim the lights an hour before bed, avoid computer or TV screens, and try 5–10 minutes of slow breathing or journaling. A warm shower or a cup of herbal tea (chamomile or valerian) signals to your body that it's time to rest.

6. Sleep Hygiene

Keep your bedroom cool (around 65–68°F / 18–20°C) to help with night sweats. Use breathable cotton sheets and consider a small fan. If you wake up, get up briefly, do something calm (like reading), then return to bed.

7. Nourish with Mediterranean-Style Eating

Focus on colorful vegetables, fruits, olive oil, nuts, seeds, fatty fish, and whole grains. This way of eating supports hormone balance, reduces inflammation, and helps with weight management without feeling restrictive.

8. Practice Self-Compassion

When irritability or tears show up, pause and say to yourself: “This is my body adjusting and I’m doing my best.” A short daily gratitude practice or talking with a supportive friend can make a big difference in how you experience the emotional waves.

9. Seek out a knowledgeable doctor who can prescribe bioidentical hormones

When natural approaches provide only partial relief, working with an experienced physician who understands bioidentical hormone replacement can make a profound difference. Look for a doctor who is well-versed in the individualized use of bioidentical estrogen, progesterone, and testosterone (as detailed in Chapters 11–13).

This Is a Season of Change, Not Decline

Yes, perimenopause and menopause bring real challenges, but they also bring gifts: clearer priorities, deeper wisdom, and often a renewed sense of freedom once symptoms are better managed. Many women look back and say this transition helped them finally put themselves higher on their own priority list.

You’ve already taken a powerful step by reading this chapter and learning what’s happening in your body. Small, consistent changes really do add up.

Key Takeaway: Perimenopause and menopause are natural transitions caused by shifting levels of estrogen, progesterone, and testosterone. The eventual transition to full menopause means ovarian failure with no further ovulation, at which point estrogen, progesterone, and testosterone levels are all very low. Laboratory testing often shows wild fluctuations in estrogen levels and a gradual rise in FSH during perimenopause. Because

estrogen receptors are present in every organ of the body, declining levels can affect bones, joints, brain, heart, eyes, and mood. Estrogen, progesterone and testosterone offer important long-term protection for bone density, osteoarthritis, dementia, coronary artery disease, macular degeneration, depression, and mood stability, benefits beautifully detailed in *Bioidentical Hormones 101, Second Edition* (2025). The symptoms may feel sudden and varied, but they are manageable with practical, compassionate self-care and, when needed, bioidentical hormone support. This is not the end of your vitality — it can be the beginning of a stronger, more empowered chapter of your life.

Your First Action Step Today:

Start a simple symptom tracker tonight. Write down how you feel physically and emotionally and note one small supportive thing you did for yourself today (even if it's just drinking an extra glass of water or taking five deep breaths). Remember, the trip to the highest mountain begins with a single step. Take that first step today.

Chapter 2

Your Body on Hormones:

The Science Behind Mood Swings, Irritability and Emotional Rollercoasters

You're in the middle of a perfectly normal conversation when, out of nowhere, tears well up for no obvious reason. Or maybe you snap at your partner over something small and immediately think, "Who is this person? That's not me."

If you've had moments like this lately, please know you're not going crazy and you're not a bad person. You're simply experiencing one of the most common, and often most distressing aspects of perimenopause: the emotional rollercoaster. Many women tell me these mood changes feel even harder to handle than the hot flashes because they affect how they see themselves and their closest relationships.

The good news is that once you understand what's happening inside your body, these emotional storms start to make sense — and become much easier to manage.

Why Your Mood Feels So Unpredictable

During perimenopause, your hormones are no longer steady and predictable. Estrogen, progesterone, and testosterone all influence your brain chemistry in powerful ways:

Estrogen acts like a natural antidepressant and mood stabilizer. It helps regulate serotonin (the "feel-good" chemical) and supports clear thinking and emotional balance. When estrogen levels fluctuate wildly or drop, your brain feels the difference almost immediately, often leading to irritability, anxiety, tearfulness, or that flat, "blah" feeling.

Progesterone has a calming, soothing effect on the nervous system. As ovulation becomes irregular and eventually stops, progesterone production drops sharply. Many women notice they feel more anxious, restless, or unable to unwind at night.

Testosterone contributes to motivation, confidence, and overall sense of well-being. Its gradual decline can leave you feeling less resilient and more emotionally drained.

Because estrogen receptors are present throughout your brain, these hormonal shifts can trigger an emotional storm. One day you might feel like your old self; the next day everything can feel overwhelming. This is not a character flaw — it's simply biochemistry.

Common Emotional Symptoms in Perimenopause

Women often describe:

- Sudden irritability or a short temper
- Increased anxiety or feeling “on edge”
- Rapid mood swings that come and go quickly
- Tearfulness or crying over small things
- Difficulty handling stress that used to feel manageable
- Feelings of sadness or mild depression
- Trouble concentrating or “brain fog”

These changes can be especially confusing because they often appear while you're still having periods, so many women don't immediately connect them to perimenopause.

Practical Steps to Support Your Mood Right Now

You don't have to wait for hormones to stabilize on their own. Here are gentle, effective strategies you can start using today:

1. Balance Blood Sugar All Day

Stable blood sugar is one of the fastest ways to calm mood swings. Include protein, healthy fat, and fiber in every meal and snack. Avoid skipping meals or relying on caffeine and sugar for energy.

2. Prioritize Magnesium and Omega-3s

Magnesium glycinate (300–400 mg in the evening) helps calm the nervous system and improves sleep. Omega-3 fatty acids (from fish oil or algae) support brain health and can reduce inflammation that worsens mood.

3. Move Your Body Daily

Even a 20–30 minute walk outdoors can boost endorphins and serotonin. Strength training 2–3 times a week is especially helpful because it naturally supports testosterone and builds mood resilience.

4. Practice Short Breathing or Meditation Breaks

When you feel irritability rising, try deep breathing: inhale for 4 counts, hold for 7, exhale for 8. Just 2–3 minutes of deep breathing can interrupt the emotional spiral.

5. Protect Your Sleep

Poor sleep dramatically worsens mood instability. Use the wind-down routine from Chapter 1 and aim for a consistent bedtime. Even one or two better nights can make a noticeable difference in how steady you feel.

6. Limit Alcohol and Caffeine

Both can intensify mood swings and anxiety. Try cutting back for two weeks and see how you feel.

7. Build in Small Moments of Joy

Schedule one small pleasurable activity each day by calling a friend, listening to music, or sitting outside for ten minutes. These little moments help replenish your emotional reserves.

8. Practice Self-Compassion

Speak to yourself with the same kindness you'd offer a good friend. Replace "I'm such a mess" with "My hormones are shifting and this is temporary. I'm doing my best."

9. Consider Natural Progesterone

Natural progesterone can be very helpful during the perimenopausal transition because of its calming effect on the brain and nervous system. Seek out a knowledgeable health care provider who can get you started on progesterone and guide you safely.

When Natural Approaches Aren't Enough

Many women find that the strategies above help significantly. However, when mood swings, irritability, or low mood continue to interfere with daily life and relationships, complete relief is possible.

With the right combination of lifestyle care and bioidentical hormone replacement, most women feel better, emotionally steady, with improved mood, and often feel more centered than they have in years.

You Are Not Alone — and This Phase Can Get Better

The emotional ups and downs of perimenopause can feel overwhelming, but they are temporary signals from your body asking for support. With the right tools and guidance, you can move through this transition, feeling more balanced and more like yourself again.

Key Takeaway: Mood swings, irritability, and emotional rollercoasters during perimenopause are largely driven by fluctuating and declining levels of estrogen, progesterone, and testosterone. These hormones powerfully influence brain chemistry and emotional regulation. While natural strategies — including natural progesterone — can make a big difference, bioidentical hormone replacement offers the possibility of complete relief and lasting emotional steadiness. This season of change does not define you — it is simply asking you to care for yourself in new ways.

Your Action Step This Week:

Choose just one or two strategies from the list above and practice them consistently for the next seven days. Notice how your mood responds. Be gentle with yourself — healing takes time, and every small step matters.

Chapter 3

Taming the Heat

Natural Ways to Reduce Hot Flashes and Night Sweats

You're sitting in a meeting, perfectly focused, when suddenly a wave of intense heat surges through your chest and face. Within seconds, sweat is trickling down your back, your heart is pounding, and you're praying no one notices. Or worse, you wake up at 3 a.m. drenched in sweat, sheets soaked, and it takes forever to fall back asleep.

If this sounds familiar, you're dealing with one of the most classic and disruptive symptoms of perimenopause and menopause: hot flashes and night sweats. Many women describe them as the symptom that makes them feel most out of control. The good news? You have more power than you think to tame the heat, starting with natural strategies, and moving to more complete solutions when needed.

Why Hot Flashes Happen

Hot flashes and night sweats are your body's thermostat going haywire. As estrogen levels fluctuate and eventually decline, the hypothalamus (the part of your brain that regulates temperature) becomes overly sensitive. Even tiny changes in core body temperature can trigger a full-blown hot flash: your blood vessels dilate, your heart rate increases, and sweat pours out in an attempt to cool you down.

Night sweats are simply hot flashes that occur during sleep, often disrupting deep rest and leaving you exhausted the next day.

Practical Steps to Reduce Hot Flashes and Night Sweats Naturally

Here are proven, everyday strategies that help many women reduce the frequency and intensity of hot flashes:

1. Cool Your Environment

Keep your bedroom cool (around 65–68°F / 18–20°C). Use breathable cotton or bamboo sheets, a bedside fan, and moisture-wicking sleepwear. Many women find that a small fan pointed at the bed makes a surprising difference.

2. Watch Your Triggers

Common triggers include spicy foods, caffeine, alcohol (especially wine), and stress. Keep a simple log for one week to identify your personal triggers. Cutting back on alcohol and caffeine often brings noticeable relief within days.

3. Dress in Layers

Wear lightweight, breathable fabrics and dress in removable layers. This small change gives you quick control when a hot flash starts.

4. Practice Slow, Deep Breathing

When you feel a hot flash coming on, try “paced breathing”: inhale slowly through your nose for 4 counts, hold for 4, exhale for 6. Doing this for just a minute can shorten the intensity and duration of the flash.

5. Maintain Stable Blood Sugar

Blood sugar swings can worsen hot flashes. Eat balanced meals with protein, fiber, and healthy fats every 4–5 hours. Avoid long gaps between meals.

6. Support Your Body with Key Nutrients

Magnesium (300–400 mg glycinate in the evening) and omega-3 fatty acids can help regulate temperature and reduce inflammation. Some women also benefit from vitamin E or evening primrose oil.

7. Move Regularly — But Not Too Intensely

Daily walking and gentle strength training help regulate hormones and improve temperature control. Avoid very intense workouts close to bedtime, as they can sometimes trigger night sweats.

8. Create a Consistent Wind-Down Routine

Dim lights, avoid screens, and do something calming (reading, gentle stretching, or herbal tea) in the hour before bed. This helps prevent the nervous system from over-reacting at night.

9. Natural Progesterone for Perimenopausal Transition and Full Bioidentical Hormone Program for Menopause

Natural progesterone can be very helpful during the perimenopausal transition because of its calming effect and ability to reduce hot flashes. For women in full menopause, a complete bioidentical hormone program (using bioidentical estrogen, progesterone, and testosterone) often provides the most reliable and lasting relief.

When Natural Approaches Need Support

Many women get meaningful relief from the steps above. However, when hot flashes and night sweats remain frequent or severe, complete relief is possible.

As discussed in detail in *Bioidentical Hormones 101, Second Edition (2025)*, bioidentical hormones, especially when delivered through the skin (transdermal) or vaginally, are highly effective and have an excellent safety profile. The 80/20 BiEst cream (80% estriol + 20% estradiol) is particularly helpful, providing the most complete relief from hot flashes and night sweats. The estriol (E3) is added because estriol is breast cancer preventive, preferentially targeting ER-beta, the tumor suppressor receptor.

To understand why this matters, it helps you to know that your body has two main estrogen receptors, ER-alpha and ER-beta, that function quite differently:

ER-alpha and ER-beta

ER-alpha acts like an accelerator for cell growth in breast tissue. When strongly activated, it tends to promote cell proliferation.

ER-beta acts more like a natural brake or tumor suppressor. It opposes excessive growth, reduces inflammation, and helps keep cells in healthy balance.

Estriol (E3) binds much more strongly to ER-beta than to ER-alpha. This preferential activation explains its more protective effect on breast tissue. When combined with natural micronized progesterone, this balanced approach often dramatically reduces or eliminates hot flashes and night sweats while providing an excellent breast cancer preventive effect.

Susan's Story

Susan, a 52-year-old nurse, was waking up 4–5 times every night soaked in sweat. “I’m exhausted all day and snapping at everyone,” she told me. After trying cooling strategies and magnesium with only partial improvement, she started a low-dose vaginal BiEst + progesterone capsule. Within three weeks, her night sweats dropped from nightly to occasional, and she finally began sleeping through the night. “I feel human again,” she said with a big smile at her follow-up visit.

Carol's Story

Carol, 48, experienced intense daytime hot flashes at work that left her embarrassed and drenched. “I can’t concentrate during meetings,” she shared. After adding natural progesterone during perimenopause and later transitioning to a full bioidentical program, her hot flashes became rare and mild. “It’s like the heat finally turned down. I didn’t realize how much it was controlling my life until it stopped.”

You Don’t Have to Just “Live With It”

Hot flashes and night sweats are not something you have to endure silently or indefinitely. They are signals that your body is asking for better support during this transition. With

smart lifestyle adjustments and, when needed, bioidentical hormone therapy, most women regain comfort and confidence.

Key Takeaway: Hot flashes and night sweats occur because fluctuating and declining estrogen levels disrupt your body's temperature regulation. While natural strategies can significantly reduce their frequency and intensity, adding natural progesterone in perimenopause or a full bioidentical hormone program in menopause often provides the most complete relief, as outlined in Chapters 11–13 and in *Bioidentical Hormones 101*, Second Edition (2025). You deserve to feel comfortable in your own body again.

Your Action Step This Week:

Pick two natural strategies from the list above and commit to them for the next seven days. Track how your hot flashes change. If they remain bothersome, know that effective help through progesterone or a full bioidentical program is available. You are not alone.

Chapter 4

Reclaiming Restful Sleep

Ending the 3 a.m. Wake-Ups

It's 3:17 a.m. again. You're wide awake, staring at the ceiling, your mind racing with thoughts that feel ten times bigger than they did during the day. Your sheets are damp from a night sweat, your heart feels like it's beating too fast, and no matter how tired you are, sleep just won't come back. By morning you feel exhausted, irritable, and already dreading the next night.

If this sounds like your new normal, you're not alone. Broken sleep is one of the most frustrating and exhausting symptoms of perimenopause and menopause. Many women say it's the symptom that steals their joy and makes everything else feel harder. The good news? You can reclaim deep, restorative sleep — starting with simple changes tonight and, when needed, more targeted support.

Why Sleep Falls Apart During This Transition

Your sleep problems aren't just in your head. They are directly connected to the hormonal shifts happening in your body:

Declining progesterone removes the gentle sedative effect that once helped you fall asleep and stay asleep.

Fluctuating and dropping estrogen affects your temperature regulation, causing night sweats and making it harder for your body to stay in the deeper stages of sleep.

Lower testosterone and overall hormonal imbalance can increase anxiety and racing thoughts at night.

The rise in FSH and wild swings in estrogen also disrupt the brain's sleep centers.

The result? You wake up multiple times, struggle to fall back asleep, and wake up feeling unrefreshed even after 7 or 8 hours in bed.

Practical Steps to Reclaim Restful Sleep

You don't have to accept poor sleep as your new reality. Here are effective, doable strategies you can start using tonight:

1. Keep Your Bedroom Cool and Dark

Set the thermostat to 65–68°F (18–20°C). Use blackout curtains, a fan, and breathable cotton or bamboo sheets. A cool room is one of the most powerful tools against night sweats.

2. Create a Consistent Wind-Down Routine

One hour before bed, dim the lights, put away screens, and do something calming — reading a physical book, gentle stretching, or listening to soft music. This signals to your brain that it's time to slow down.

3. Support Your Nervous System with Magnesium

Take 300–400 mg of magnesium glycinate in the evening. It helps relax muscles and calms the brain, making it easier to fall and stay asleep.

4. Stabilize Blood Sugar Before Bed

Have a small, balanced snack 1–2 hours before bed if you tend to wake up hungry or with low blood sugar (for example, a few almonds with a piece of cheese or Greek yogurt with berries). This prevents blood sugar crashes that wake you at 3 a.m.

5. Limit Caffeine and Alcohol

Cut caffeine after noon and reduce or eliminate alcohol, especially in the evening. Both fragment sleep and worsen night sweats.

6. Practice Relaxation Techniques

Try slow breathing or progressive muscle relaxation when you wake up at night. If your mind is racing, keep a notepad by the bed to jot down worries so you can let them go until morning.

7. Get Morning Sunlight and Daytime Movement

Exposure to natural light in the morning helps reset your circadian rhythm. Daily walking or gentle exercise also improves nighttime sleep quality.

8. Consider Natural Progesterone

Natural micronized progesterone taken at bedtime often improves sleep dramatically because of its calming effect on the brain. Many women notice they fall asleep faster, experience fewer awakenings, and wake up feeling more refreshed.

A common starting dose for women in the menopausal transition is 100 mg of oral micronized progesterone taken at bedtime. For women in full menopause, a complete bioidentical hormone program that includes natural progesterone, along with bioidentical

estrogen and testosterone as needed, usually provides the most reliable and lasting improvement in sleep.

9. Try Low-Dose Melatonin

Melatonin is a hormone naturally produced by your body to signal it's time to sleep. Production often declines with age and hormonal changes. A low dose (0.5 mg to 3 mg) taken 30–60 minutes before bed can help you fall asleep faster and may reduce nighttime awakenings. Start low to avoid morning grogginess. Melatonin works best when combined with the other strategies in this chapter rather than used alone. It is especially helpful as a short-term bridge while addressing the underlying hormonal shifts.

When Natural Approaches Aren't Enough

If sleep problems persist despite these changes, know that complete relief is possible. As detailed in *Bioidentical Hormones 101, Second Edition (2025)*, a well-balanced bioidentical hormone program can restore deep, restorative sleep for most women. Many patients describe waking up feeling refreshed for the first time in years.

Linda's Story

Linda, 49, was waking up drenched and anxious every night. "I'm so tired I can barely function at work," she told me. After starting natural progesterone at bedtime as part of her bioidentical program, she returned beaming: "I'm finally sleeping 7–8 hours straight. The night sweats are almost gone, and I feel like myself again."

You Deserve Restful Nights Again

Sleep disruption during perimenopause and menopause is real, but it doesn't have to be permanent. With consistent lifestyle support and, when needed, bioidentical hormones, most women reclaim the deep, healing sleep their bodies crave.

Key Takeaway: Broken sleep in perimenopause and menopause is largely caused by declining progesterone and fluctuating estrogen levels that disrupt temperature regulation and brain chemistry. Natural strategies, including magnesium, blood sugar stabilization, and low-dose melatonin, can make a big difference. When sleep remains poor, bioidentical hormones, especially estrogen and natural progesterone, often provide the complete relief you deserve, as explained in Chapters 11–13 and in *Bioidentical Hormones 101, Second Edition (2025)*.

Your Action Step Tonight:

Choose two strategies from the list above and put them into practice this evening. Track how you sleep for the next three nights. Small changes can lead to surprisingly big improvements.

Chapter 5:

Energy That Lasts

Overcoming Crushing Fatigue and Brain Fog

You wake up after a full night in bed, yet you feel like you've been hit by a truck. Simple tasks like answering emails or folding laundry leave you drained. Your brain feels wrapped in thick fog — you forget why you walked into a room, struggle to find the right words, and by 3 p.m. you're ready for a nap.

If this constant exhaustion and mental cloudiness sound familiar, you're not lazy and you're not just "getting older." You're experiencing one of the most common and debilitating symptoms of perimenopause and menopause: crushing fatigue and brain fog. Many women say this is the symptom that affects their work, relationships, and sense of self the most. The good news? You can regain steady, lasting energy and mental clarity starting with practical steps today and, when needed, deeper hormonal support.

Why Fatigue and Brain Fog Happen

Fatigue and brain fog during this transition are not random. They stem directly from hormonal changes:

Declining estrogen affects energy production in your cells and disrupts blood flow to the brain.

Dropping progesterone and testosterone reduce motivation, muscle strength, and mental sharpness.

Poor sleep from night sweats and hormonal swings compounds the problem.

Fluctuating blood sugar, inflammation, and slower metabolism all add to the exhaustion.

The result is a deep, bone-tired fatigue that rest alone doesn't fix, along with that frustrating "cotton wool" feeling in your head.

Practical Steps to Restore Energy and Clear Brain Fog

You can start feeling better without waiting for hormones replacement. Here are realistic strategies you can begin right away:

1. Stabilize Blood Sugar All Day

Energy crashes often come from blood sugar rollercoasters. Eat balanced meals with protein, healthy fat, and fiber every 4–5 hours. Avoid skipping breakfast or relying on sugary snacks.

2. Prioritize Gentle but Consistent Movement

Daily walking (20–30 minutes) improves circulation and energy. Add strength training 2–3 times a week with light weights or resistance bands. This helps maintain muscle mass and naturally supports testosterone levels.

3. Support Your Mitochondria (Your Cellular Power Plants)

Magnesium (300–400 mg glycinate daily), B vitamins (especially B12 and B-complex), and CoQ10 can boost cellular energy. Many women notice improved stamina within a few weeks.

4. Optimize Sleep

Use the strategies from Chapter 4. Even small improvements in sleep quality can dramatically reduce daytime fatigue and brain fog.

5. Stay Hydrated and Reduce Inflammation

Dehydration worsens fatigue. Aim for half your body weight in ounces of water daily. Focus on anti-inflammatory foods: colorful vegetables, berries, fatty fish, olive oil, and nuts.

6. Manage Stress with Short Daily Breaks

Chronic stress drains energy fast. Try 5–10 minutes of deep breathing, meditation, or a short walk outside. Even brief moments of calm help protect your energy reserves.

7. Check Key Nutrients

Low vitamin D, iron, or thyroid function can worsen fatigue. A simple blood test can identify deficiencies that need attention.

8. Practice Self-Compassion

Be kind to yourself. Instead of pushing through, rest when needed and celebrate small wins.

9. Consider Natural Progesterone and Bioidentical Hormones

Natural micronized progesterone can improve sleep and reduce fatigue. For women in full menopause, a complete bioidentical hormone program that includes estrogen,

progesterone, and testosterone often restores steady energy and clears brain fog more effectively than lifestyle changes alone.

The Thyroid Connection: Why Standard Tests Often Miss the Problem

Fatigue and brain fog in midlife frequently involve the thyroid, even when your doctor says “your thyroid is normal.” As I explain in both *Bioidentical Hormones 101, Second Edition* (2025) and my book *Natural Thyroid Toolkit*, perimenopause and menopause create conditions that impair thyroid function and hormone conversion.

Declining estrogen and progesterone reduce the body’s ability to convert inactive T4 into active T3. At the same time, stress, inflammation, and hormonal shifts often increase production of reverse T3, the inactive form of T3. Reverse T3 is one of the most sensitive indicators of thyroid dysfunction at the cellular level. Many women have “normal” TSH but low free T3 and elevated reverse T3. This pattern leads to profound fatigue, brain fog, weight gain, and feeling cold even when standard labs look fine.

Thyroid Testing – What You Really Need to Ask For

Mainstream thyroid testing usually stops at TSH and Free T4. Unfortunately, TSH alone misses many cases of thyroid dysfunction during perimenopause and menopause.

For a complete picture, request this full thyroid panel:

TSH – Important, but not sufficient by itself.

Free T4 – The storage form of thyroid hormone.

Free T3 – The active form your cells actually use for energy and metabolism. This is often low even when TSH is normal.

Reverse T3 – Low reverse T3 is a powerful marker for a low thyroid condition. Elevated levels of reverse T3 can be seen in the overactive thyroid. A pattern of low free T3, high reverse T3, and high Free T4 is often seen in women taking T4 only levothyroxine. This indicates a conversion failure problem, and these women will do much better on a combination T3 and T4 thyroid medication such as NDT, natural desiccated thyroid.

Thyroid antibodies (TPO and TgAb) – This test checks for autoimmune thyroid disease (Hashimoto’s), which is very common in midlife women.

In *Natural Thyroid Toolkit*, I emphasize that “optimal” ranges matter more than “normal” lab ranges. Many women feel their best when free T3 is in the upper half of the reference range. If your doctor is only willing to run TSH, gently advocate for the full panel — it can make all the difference in getting the right diagnosis and treatment.

Natural Desiccated Thyroid (NDT): A Powerful Option

When thyroid support is needed, many women experience superior results with Natural Desiccated Thyroid (NDT) compared to synthetic T4-only medications like levothyroxine.

NDT is made from the dried and powdered thyroid glands of pigs and contains the full spectrum of thyroid hormones in the same ratios found in a healthy human thyroid — primarily T4 and T3, plus small amounts of T2, T1, and other natural cofactors.

Key benefits include:

Direct supply of active T3, bypassing many conversion problems common in perimenopause.

A more physiologic 4:1 T4-to-T3 ratio that feels more natural to the body.

Often better relief from deep fatigue, brain fog, cold intolerance, and low motivation.

As detailed in *Natural Thyroid Toolkit*, NDT frequently helps women who continue to feel unwell on T4-only therapy, especially when reverse T3 is elevated or free T3 is low.

Individualized dosing and regular monitoring of free T3, free T4, reverse T3, and symptoms are essential for the best outcomes.

The Adrenal Fatigue Connection: Why You Feel “Tired but Wired”

Many women describe a peculiar kind of exhaustion: bone-tired all day, yet unable to shut off their mind at night — the classic “tired but wired” feeling. This pattern often points to adrenal involvement, also known as HPA axis dysfunction.

During perimenopause and menopause, the adrenal glands are asked to take on a larger role in hormone production as the ovaries slow down. At the same time, many women face high levels of chronic stress from work, family, and life demands. When the adrenals are constantly pumping out cortisol while sex hormones decline, they can become dysregulated. This leads to:

Normally cortisol is highest in the morning giving energy to start the day. However in adrenal fatigue, we commonly see a reversed pattern on salivary cortisol testing: High cortisol at night (making sleep difficult) and low cortisol during the day (causing profound fatigue).

We may also see reduced DHEA on laboratory testing, which affects energy and mood.

Unstable blood sugar and increased inflammation.

The result is a vicious cycle of poor sleep, energy crashes, and brain fog that lifestyle changes alone may not fully resolve.

Real Women, Real Recovery

Susan's Story

Susan, 54, had been dragging through her days for over two years. She slept 8 hours but still felt exhausted by 10 a.m. Her brain felt slow and foggy, and she gained 25 pounds despite eating carefully. Her TSH was “normal,” but a full panel showed low free T3 and significantly elevated reverse T3. After optimizing her bioidentical hormones and switching to natural desiccated thyroid, she returned three months later with tears in her eyes: “I finally have my life back. I have steady energy all day, my mind is sharp again, and I’ve lost 18 pounds without starving myself.”

Rachel's Story

Rachel, 47, was in perimenopause and felt completely drained. “I used to be the energetic one in the family,” she said. “Now I can barely keep up with my kids.” Her thyroid labs looked borderline, but her free T3 was low and reverse T3 was high. Combining a low-dose bioidentical hormone program with natural desiccated thyroid brought dramatic improvement. At her follow-up she smiled and said, “It’s like someone turned the lights back on inside me. I didn’t realize how much the fatigue was stealing from me until it lifted.”

Karen's Story

Karen, 51, felt exhausted by midday but wired at night. She needed coffee to start the day and wine to unwind. Her cortisol pattern showed high nighttime levels and low morning levels. After optimizing her bioidentical hormones (especially natural progesterone) and adding gentle adrenal support with ashwagandha and lifestyle changes, she told me six weeks later, “I finally have steady energy during the day and I’m actually sleeping through the night. I feel like I got my life back.”

You Can Feel Energetic Again

Crushing fatigue and brain fog don’t have to be your new normal. They are signals from your body asking for better support during this transition. With consistent lifestyle habits, proper thyroid and adrenal evaluation, and, when needed, bioidentical hormone therapy (sometimes including natural desiccated thyroid), most women regain steady energy and sharp thinking.

Key Takeaway: Fatigue and brain fog in perimenopause and menopause stem from declining estrogen, progesterone, and testosterone, which affect energy production and

brain function. Thyroid conversion issues (low T3, high reverse T3, high free T4) and adrenal dysregulation frequently contribute. Natural strategies like blood sugar balance, movement, and targeted nutrients help significantly. When fatigue persists, comprehensive evaluation of thyroid, adrenals, and sex hormones, along with a complete bioidentical hormone program, often provides the lasting energy and mental clarity you deserve, as detailed in *Bioidentical Hormones 101, Second Edition (2025)* and *Natural Thyroid Toolkit*.

Your Action Step This Week:

Pick three strategies from the list above and practice them daily for the next seven days. Notice any shifts in your energy and mental clarity. Be patient with yourself — small, consistent steps add up to big changes.

Chapter 6

Weight Management Without the Struggle

Losing the Midlife Belly

Linda stood in front of her mirror, tugging at the waistband of her favorite jeans that used to fit perfectly. At 51, she had been eating the same way she always had, maybe even a little less, and walking every day, yet the soft roll around her middle kept growing. “I feel like my body is betraying me,” she told me with frustration and tears in her eyes. “No matter what I do, this belly won’t go away.”

If Linda’s story sounds familiar, you’re not alone and you’re not failing. The midlife belly is one of the most common and frustrating complaints I hear from women in perimenopause and menopause. It’s not just about calories or willpower. It’s about hormones. The good news is that once you understand what’s really driving the weight gain, you can lose the belly without starving yourself or spending hours in the gym.

Why the Midlife Belly Appears

During perimenopause and menopause, several hormonal shifts team up to make abdominal fat accumulation almost inevitable if nothing changes:

Declining estrogen causes fat to shift from the hips and thighs to the abdomen (the classic “apple shape”).

Lower progesterone contributes to fluid retention and slower metabolism.

Declining testosterone leads to loss of muscle mass, which lowers your resting metabolic rate.

Insulin resistance often increases, making it easier to store fat, especially around the waist.

Poor sleep and elevated cortisol from adrenal stress further promote belly fat storage.

The result? Even if you’re doing “everything right,” your body becomes very efficient at storing fat in the midsection while making it much harder to lose.

Practical Steps for Sustainable Weight Management

You don’t need extreme diets or endless cardio. Here are realistic, effective strategies that work with your changing body:

1. Prioritize Protein at Every Meal

Aim for 25–35 grams of protein per meal. Protein preserves muscle, stabilizes blood sugar, and increases satiety. Good choices include eggs, Greek yogurt, fish, chicken, turkey, beef, and plant-based options like lentils or tofu.

2. Focus on Blood Sugar Balance

Pair protein with fiber and healthy fat at every meal. This prevents insulin spikes that drive belly fat storage. Example plate: grilled salmon, roasted broccoli with olive oil, and a small sweet potato.

3. Strength Train 2–3 Times Per Week

Building and maintaining muscle is one of the most powerful ways to boost metabolism. Use weights, resistance bands, or bodyweight exercises. Even modest strength training helps counteract the muscle loss that comes with declining testosterone.

4. Walk Daily

A 30–45 minute walk most days improves insulin sensitivity, reduces stress, and supports gentle fat loss without over-stressing the body.

5. Manage Stress and Cortisol

High cortisol promotes belly fat. Incorporate short daily relaxation practices, deep breathing, meditation, or gentle yoga, to keep cortisol in check.

6. Prioritize Sleep

Poor sleep dramatically increases hunger hormones and insulin resistance. Use the strategies from Chapter 4 to protect your sleep.

7. Limit Alcohol and Ultra-Processed Foods

Both promote inflammation and belly fat storage. Cutting back often leads to noticeable changes within weeks.

8. Practice Self-Compassion

Be kind to yourself. This is not about willpower; it's about working with your changing hormones.

9. Consider Bioidentical Hormones

Weight gain is commonly reported after menopause. The medical literature is quite clear this is the result of estrogen deficiency which impairs energy production at the cellular level. When natural approaches aren't enough, a complete bioidentical hormone program

(estrogen, progesterone, and especially low-dose testosterone) can significantly improve body composition, reduce midsection fat, and restore cellular energy production and metabolic rate.

10. Check for Low Thyroid Condition

Weight gain may be the result of a low thyroid condition and you may benefit from NDT, natural desiccated thyroid. Many women with stubborn midlife belly fat have low free T3 or elevated reverse T3, even when TSH looks normal. A complete thyroid panel and, when appropriate, natural desiccated thyroid can make a significant difference in both energy and weight loss.

Real Women, Real Results

Denise's Story

Denise, 53, gained 22 pounds around her middle in just 18 months. “I was exercising more and eating less, but nothing worked,” she said. After starting bioidentical hormones (including a small amount of testosterone) and focusing on protein and strength training, she lost 19 pounds — most of it from her belly — over six months. “I finally feel like my body is cooperating again.”

Patricia's Story

Patricia, 49, was frustrated with her growing “spare tire.” After optimizing her bioidentical hormone program and shifting to higher protein meals with daily walking and strength training, the stubborn weight began to come off. At her follow-up she smiled and said, “I’m not starving, I’m not exhausted, and my clothes are fitting again. This feels sustainable.”

You Don't Have to Struggle Anymore

Losing the midlife belly isn't about punishment or extreme restriction. It's about understanding your changing hormones and giving your body the support it needs — through smart nutrition, strength training, stress management, quality sleep, and, when appropriate, bioidentical hormone therapy.

Key Takeaway: The midlife belly is largely driven by declining estrogen, progesterone, and testosterone, which shift fat storage to the abdomen and slow metabolism. Natural strategies like higher protein intake, strength training, and blood sugar balance help significantly. When progress stalls, checking for low thyroid function and considering NDT, along with a complete bioidentical hormone program, often makes weight management much easier and more sustainable, as detailed in Chapters 11–13 and *Bioidentical Hormones 101, Second Edition (2025)*.

Your Action Step This Week:

Focus on increasing protein at every meal and adding two strength training sessions. Also consider asking your doctor for a full thyroid panel (including free T3 and reverse T3). Track how your energy and waist feel after seven days. Small, consistent changes compound into real results.

Chapter 7

Nourish to Flourish

The Best Foods, and Supplements for Hormonal Balance

Margaret sat at her kitchen table, staring at her plate of grilled chicken and salad with a heavy sigh. “I’m doing everything ‘right,’” she told me. “I eat clean, I count calories, I even cut out wine. But I’m still gaining weight around my middle, I’m exhausted by 3 p.m., and my hot flashes are getting worse. What am I missing?”

If Margaret’s story sounds familiar, you’re not doing anything wrong, your body is simply changing. The food and eating habits that worked beautifully in your 30s and early 40s often stop serving you well during perimenopause and menopause. The good news is that by shifting to the right foods, supplements, and eating patterns, you can support your hormones, reduce symptoms, stabilize energy, and make weight management much easier and more sustainable.

Why Your Nutrition Needs Are Changing

As estrogen, progesterone, and testosterone decline, your body responds differently to food:

Blood sugar regulation becomes more difficult, leading to cravings and energy crashes.

Inflammation tends to increase, making anti-inflammatory foods more important than ever.

Muscle mass starts to decline, so adequate protein becomes essential for preserving metabolism.

Nutrient absorption and hormone metabolism slow down, so key vitamins and minerals matter more.

The goal shifts from simply “eating healthy” to eating in a way that works with your changing hormones instead of against them.

Practical Foods and Eating Patterns That Help

Here are the most effective ways to nourish your body during this transition:

1. Prioritize Protein at Every Meal

Aim for 25–35 grams of protein per meal. Protein preserves muscle, stabilizes blood sugar, reduces cravings, and supports hormone production. Excellent sources include eggs, Greek yogurt, cottage cheese, fish, chicken, turkey, grass-fed beef, and legumes.

2. Choose Anti-Inflammatory Fats

Healthy fats support hormone production and reduce inflammation. Include olive oil, avocados, nuts, seeds, fatty fish (salmon, sardines), and coconut oil. These also help you feel satisfied longer.

3. Load Up on Colorful Vegetables and Fiber

Non-starchy vegetables (broccoli, spinach, kale, cauliflower, peppers, zucchini) provide fiber that helps balance blood sugar and supports detoxification of excess hormones. Aim for at least half your plate as vegetables.

4. Include Phytoestrogen-Rich Foods in Moderation

Foods like flaxseeds, sesame seeds, and fermented soy (tempeh, miso) can offer gentle estrogen-like support without overwhelming the system.

5. Eat in a Time-Restricted Window

Many women feel better with a 10–12 hour eating window (for example, eating between 8 a.m. and 6–8 p.m.). This helps improve insulin sensitivity and gives the digestive system a rest.

6. Avoid Common Triggers

Limit alcohol, added sugars, ultra-processed foods, and excessive caffeine. These can worsen hot flashes, mood swings, and belly fat storage.

Key Supplements That Support Hormonal Balance

While food comes first, targeted supplements can fill important gaps:

Magnesium glycinate (300–400 mg at night) – calms the nervous system, improves sleep, and supports blood sugar.

Omega-3 fatty acids (high-quality fish oil or algae oil) – reduce inflammation and support mood and brain health.

Vitamin D – aim for blood levels of 50–80 ng/mL. It supports immune function, mood, and bone health.

B-complex vitamins – especially B12 and B6, which help with energy and hormone metabolism.

Probiotics – a healthy gut microbiome is essential for proper estrogen metabolism and reducing inflammation.

Always check with your healthcare provider before starting new supplements.

When Food and Supplements Aren't Enough

Many women see significant improvement with these changes. However, when symptoms like stubborn weight gain, persistent fatigue, brain fog, or hot flashes continue despite consistent effort, it's often a sign of estrogen deficiency which can be relieved with a full bioidentical hormone replacement program.

Low thyroid function is very common during this time and can make weight loss especially difficult, even when you're eating well. Many women have "normal" TSH on basic tests but low free T3, elevated reverse T3, and higher free T4 suggesting a conversion problem which causes a low thyroid condition in the periphery. This may slow metabolism and promote belly fat storage. In these cases, natural desiccated thyroid (NDT) often provides superior relief compared to T4-only medications because it supplies both T4 and active T3 in a more physiologic ratio.

As I discuss in *Bioidentical Hormones 101, Second Edition (2025)*, a well-balanced bioidentical hormone program (estrogen, progesterone, and testosterone) combined with proper thyroid support when needed can dramatically improve how your body responds to food, making weight management and energy balance much easier and more sustainable.

Margaret's Update

Six months after our conversation, Margaret returned with a big smile. She had increased her protein, added strength training, optimized her thyroid with natural desiccated thyroid, and started a bioidentical hormone program. "The constant hunger is gone, my energy is steadier, and I've lost 12 pounds, mostly from my belly," she said. "I finally feel like I'm working with my body instead of fighting it."

You Can Nourish Your Way Through This Transition

Eating well during perimenopause and menopause isn't about restriction — it's about giving your changing body exactly what it needs to feel strong, balanced, and energized. Focus on protein, healthy fats, fiber-rich vegetables, and blood sugar stability. Add targeted supplements when helpful, and consider bioidentical hormone support — including thyroid evaluation and NDT when appropriate, when natural approaches need reinforcement.

Key Takeaway: The foods, supplements, and eating patterns that worked in your 30s often need to be adjusted for your changing hormones. Prioritizing protein, stable blood sugar, anti-inflammatory foods, and key nutrients can significantly improve energy, mood, and weight management. When progress feels slow, checking for low thyroid function and

considering NDT, along with a complete bioidentical hormone program, often makes nourishment far more effective, as outlined in Chapters 11–13 and *Bioidentical Hormones 101, Second Edition (2025)*.

Your Action Step This Week:

Focus on getting 25–35 grams of protein at each meal and adding at least one extra serving of non-starchy vegetables daily. Notice how your energy and hunger levels respond after seven days.

Chapter 8

Move Your Body, Lift Your Mood–

Exercise That Supports, Not Stresses, Your Changing Hormones

Sarah used to love her high-intensity spin classes and long weekend runs. But at 49, the same workouts that once energized her now left her exhausted, sore, and battling worse hot flashes and mood swings. “I feel like my body is rejecting the exercise I used to thrive on,” she told me. “I’m afraid if I stop moving completely, I’ll gain even more weight and lose all my strength.”

If Sarah’s experience sounds familiar, you’re not alone. Many women discover that the exercise routines that worked beautifully in their 30s and early 40s can actually backfire during perimenopause and menopause. The good news? You don’t have to give up movement, you just need to move in a way that supports your changing hormones instead of stressing them.

Why Exercise Needs to Change in Midlife

As estrogen, progesterone, and testosterone decline, your body responds differently to physical activity:

High-intensity workouts can raise cortisol (stress hormone), worsen hot flashes, disrupt sleep, and promote belly fat storage.

Declining estrogen and testosterone make recovery slower and increase injury risk.

Loss of muscle mass lowers your metabolism, so preserving muscle becomes more important than burning maximum calories.

Joints and connective tissue become more sensitive, making high-impact activities potentially problematic.

The goal shifts from “pushing harder” to “moving smarter” — choosing exercise that builds strength, supports mood, improves insulin sensitivity, and respects your body’s new needs.

The Best Types of Exercise for Perimenopause and Menopause

Here are the most supportive forms of movement during this transition:

1. Strength Training 2–3 Times Per Week

This is the single most important type of exercise for midlife women. Lifting weights or using resistance bands helps maintain and build muscle, boosts metabolism, supports

bone density, improves insulin sensitivity, and naturally raises testosterone levels. Start with bodyweight or light weights and focus on proper form. Major muscle groups (legs, glutes, back, chest, arms) should be worked.

2. Daily Walking

A 30–45 minute brisk walk most days is incredibly beneficial. It improves mood through endorphins, supports heart health, helps regulate blood sugar, and is gentle on joints. Walking outdoors in natural light also helps reset your circadian rhythm and reduce stress.

3. Gentle Yoga or Pilates

These practices improve flexibility, balance, core strength, and mind-body connection. They are excellent for reducing stress, calming the nervous system, and relieving joint stiffness without overtaxing the body.

4. Low-Impact Cardio

Swimming, cycling, or using an elliptical machine can provide cardiovascular benefits without the cortisol spike of high-intensity interval training. Keep sessions moderate. You should be able to hold a conversation.

5. Recovery and Rest Days

Build in at least one or two full rest or active recovery days per week. Over-exercising can worsen fatigue, hot flashes, and hormonal imbalance.

Important Guidelines for Midlife Exercise

Listen to your body. If a workout leaves you more exhausted or inflamed the next day, scale it back.

Focus on consistency rather than intensity. Short, regular sessions are far more effective than occasional long, hard workouts.

Prioritize form and recovery. Warm up properly and include mobility work.

Combine strength training with daily movement for the best results on metabolism, mood, and body composition.

When to Add Bioidentical Hormone Support

Many women see excellent improvements with an exercise program alone. However, when fatigue, mood issues, or difficulty building muscle persist, bioidentical hormones can make movement far more effective. Restoring balanced estrogen, progesterone, and especially a

small amount of testosterone often improves energy, recovery, muscle maintenance, and motivation to move. As I explain in *Bioidentical Hormones 101, Second Edition (2025)*, women on properly individualized bioidentical hormone therapy frequently report that exercise finally “works” again — they recover faster, build muscle more easily, and enjoy movement without the previous burnout.

Rachel’s Story

Rachel, 50, used to run several miles most mornings, but during perimenopause the same runs left her completely drained and sore for days. She felt like her body was punishing her for moving. After switching to strength training three times a week, daily walking, and starting a low-dose bioidentical hormone program, everything changed. “I have more energy for my workouts, I’m actually building muscle instead of losing it, and my mood is so much steadier,” she said. “For the first time in years, I look forward to moving my body instead of dreading it.”

Jennifer’s Story

Jennifer, 48, had always been dedicated to her gym routine, but intense HIT (high intensity training) classes started triggering severe hot flashes and left her exhausted for days. “I felt defeated,” she shared. Switching to strength training with lighter weights and adding daily walks, combined with bioidentical hormone support, transformed her experience. “My hot flashes are much milder, I sleep better, and I actually look forward to my workouts now. I’m getting stronger without burning out.”

Carol’s Story

Carol, 53, avoided exercise altogether because everything made her joints ache and her fatigue worse. After starting gentle strength training, walking, and a balanced bioidentical hormone program, she noticed a big shift. “I have energy again, my mood is lighter, and I’m finally building some muscle tone. I never thought I’d enjoy moving my body at this age.”

You Can Move in a Way That Feels Good Again

Exercise during perimenopause and menopause isn’t about pushing through pain or burning the most calories. It’s about choosing movement that builds strength, lifts mood, supports your hormones, and helps you feel strong and capable in your body.

Key Takeaway: The high-intensity workouts of your younger years often stress a changing hormonal system. Strength training, daily walking, and gentle practices like yoga are far more supportive. When energy or recovery remains poor, bioidentical hormones can make movement more effective and enjoyable, as detailed in Chapters 11–13 and *Bioidentical Hormones 101, Second Edition (2025)*.

Your Action Step This Week:

Add two strength training sessions (even 20–30 minutes each) and aim for daily walking. Notice how your energy, mood, and body feel afterward. Move in a way that feels supportive, not punishing.

Chapter 9

Mind, Identity & Emotional Resilience

One afternoon, Karen looked at herself in the mirror and barely recognized the woman staring back. At 52, she had always been the strong, capable one, the person everyone relied on. But lately she felt irritable, emotional, and strangely lost. “Who am I now?” she asked quietly. “My body is changing, my moods are all over the place, and I don’t feel like the same person anymore.”

If you’ve had moments like this: feeling like a stranger in your own skin, questioning your identity, or wondering if you’ll ever feel like “you” again, please know you are not alone. This emotional and identity shift is one of the deepest parts of perimenopause and menopause. The good news is that this transition, while challenging, can become a powerful time of rediscovery and growth. You can redefine yourself with more wisdom, compassion, and strength than ever before.

Why Identity Feels Shaken During This Time

The hormonal changes happening in your body don’t just affect physical symptoms, they touch your emotions, self-image, and sense of who you are:

Fluctuating estrogen and progesterone can intensify mood swings, anxiety, and emotional sensitivity.

Declining testosterone can reduce feelings of confidence, drive, and resilience.

Sleep disruption and fatigue make it harder to feel grounded and capable.

Societal messages about aging and “losing your value” after menopause can deepen the sense of loss.

Many women describe it as a kind of grieving process, letting go of the younger version of themselves while learning to embrace who they are becoming. This is not a crisis. It is a transition.

Practical Ways to Build Emotional Resilience and Redefine Yourself

You can actively support your mind and sense of self during this season. Here are gentle, effective practices:

1. Practice Daily Self-Compassion

Speak to yourself with the same kindness you would offer a dear friend. When negative

thoughts arise, gently remind yourself: “This is a transition, not a failure. I am doing my best.”

2. Journal Your Thoughts and Feelings

Spend 10 minutes a day writing about what you’re experiencing. Notice patterns in your emotions. Many women find that putting feelings on paper helps them feel less overwhelmed and more in control.

3. Redefine Your Worth Beyond Youth and Appearance

Make a list of qualities you value in yourself that have nothing to do with looks or productivity — wisdom, kindness, resilience, creativity, experience. Revisit this list often.

4. Strengthen Your Support Network

Connect with other women going through similar changes. Talking openly with others reduces negative thinking and helps you feel more companionship and understanding.

5. Engage in Meaningful Activities

Spend time doing things that bring you joy and a sense of purpose — whether it’s gardening, volunteering, learning a new skill, or spending quality time with people you love.

6. Use Breathing and Mindfulness Practices

Simple daily breathing exercises or short mindfulness moments can calm emotional storms and help you stay present instead of getting lost in worry about the future.

7. Celebrate Small Wins and Progress

Acknowledge every positive step: better sleep, a kinder thought about yourself, or showing up for yourself in a new way. These moments build emotional strength.

8. Consider Bioidentical Hormones for Emotional Stability

When mood swings, anxiety, or emotional flatness feel overwhelming, bioidentical hormones (especially balanced estrogen and progesterone) can provide significant emotional steadiness and clarity, making it easier to navigate this identity shift.

Self-Compassion Techniques: Being Kind to Yourself During This Transition

One of the most powerful gifts you can give yourself right now is self-compassion: treating yourself with the same kindness, understanding, and care you would offer a good friend going through a difficult time.

Many women are harder on themselves during this transition than at any other point in their lives. When hot flashes hit, moods swing, sleep disappears, or the mirror shows changes they didn't expect, the inner critic often gets loud: "What's wrong with me?" "I should be handling this better." "I'm falling apart."

Self-compassion gently quiets that critic and reminds you: "This is hard. I'm not broken. I'm doing my best in a body that is changing."

Simple Self-Compassion Practices You Can Use Today

1. The Self-Compassion Break (30–60 seconds)

When you notice negative thinking, negative self-talk, or overwhelming emotions, pause for a moment and place a hand gently over your heart and silently acknowledge to yourself: "Yes I am having momentary suffering, but this is part of being human, and I am not alone, and I will be kind to myself."

2. Self-Compassionate Journaling

Each evening, write one or two sentences answering these prompts:

What was hard for me today?

What would I say to a dear friend who was going through the same thing?

What small act of kindness can I offer myself right now?

3. Self-Compassionate Touch

When you feel overwhelmed, place both hands over your heart or give yourself a gentle hug. The physical touch activates your body's soothing system.

4. Speaking to Yourself with Kindness

Catch critical thoughts and consciously reframe them. Change:

"I'm such a mess" to "This is really hard right now, and I'm doing the best I can."

"I look terrible" to "My body is going through a big transition. I'm still worthy of love and care."

5. The "Dear Friend" Exercise

Write a short letter to yourself as if you were writing to a beloved friend experiencing the same symptoms. Read it aloud when you need encouragement.

Start with just one technique (many women begin with the Self-Compassion Break) and practice it consistently for one week. You'll likely notice you feel less overwhelmed and more emotionally steady.

Real Women, Real Growth

Susan's Story

Susan, 53, felt like she had lost her spark. "I used to be so confident and outgoing," she said. "Now I feel invisible and unsure of myself." After starting a bioidentical hormone program and beginning a simple journaling practice, she gradually felt more grounded. "I'm not the same person I was at 40, but I'm starting to like this wiser, calmer version of me. I'm redefining what matters most."

Linda's Story

Linda, 50, struggled with intense irritability and self-doubt. "I didn't like who I was becoming," she admitted. Through gentle strength training, daily walks, and bioidentical hormone support, her emotional resilience grew. At her follow-up she shared, "I feel more patient with myself and others. This transition forced me to slow down and discover strengths I didn't know I had."

This Can Be Your Second Spring

Perimenopause and menopause are not the end of your vitality or value. They are an invitation to let go of old expectations and step into a new chapter with greater self-awareness, compassion, and authenticity. Many women look back and say this was the time they finally started living for themselves.

Key Takeaway: The emotional and identity shifts during perimenopause and menopause are real and normal. They stem from hormonal changes that affect mood, confidence, and self-perception. By practicing self-compassion, building supportive habits, and considering bioidentical hormone support when needed, you can move through this transition with greater emotional resilience and emerge with a stronger, wiser sense of self, as discussed in *Bioidentical Hormones 101, Second Edition (2025)*.

Your Action Step This Week:

Spend a few minutes each day practicing self-compassion or journaling one thing you appreciate about the woman you are becoming. Notice how it shifts your inner dialogue.

Chapter 10

Putting It All Together

Your 30-Day Action Plan

You've reached the tenth chapter. By now you understand what's happening in your body during perimenopause and menopause: the hormonal shifts, the mood swings, the hot flashes, the sleep struggles, the crushing fatigue, the stubborn belly weight, and the deep identity changes that come with perimenopause and menopause. You also know practical strategies for each area and when bioidentical hormone support can make a profound difference.

This chapter brings everything together into a clear, doable 30-day plan so you can start taking action right away. Remember: you don't have to do everything perfectly. Small, consistent steps create the biggest transformation.

Your 30-Day Action Plan

Week 1: Foundation Week – Create Stability

- Start a simple daily symptom tracker (hot flashes, sleep, energy, mood, weight, and cravings).
- Focus on blood sugar balance: include protein, healthy fat, and fiber at every meal.
- Add magnesium glycinate (300–400 mg) at bedtime.
- Begin a gentle wind-down routine each evening (dim lights, no screens).
- Practice one self-compassion break per day.
- Walk 20–30 minutes daily.

Week 2: Build Strength and Support

- Include two strength training sessions (20–30 minutes each).
- Continue daily walking and blood sugar focus.
- Consider natural micronized progesterone (starting at 100 mg at bedtime) after discussing with your provider.
- Try low-dose melatonin (0.5–3 mg) 30–60 minutes before bed if sleep is still difficult.
- Journal one thing you appreciate about yourself each evening.

Week 3: Deepen Nourishment and Recovery

- Increase protein to 25–35 grams per meal and add more non-starchy vegetables.
- Request a full thyroid panel (TSH, free T3, free T4, reverse T3, and thyroid antibodies).
- Add one rest or gentle yoga day per week.
- Continue self-compassion and stress-management practices.

Week 4: Integrate, Evaluate, and Plan Ahead

- Review your symptom tracker and celebrate every improvement, no matter how small.
- Schedule a consultation with a knowledgeable provider experienced in bioidentical hormones and thyroid care.
- Create a sustainable weekly routine that feels supportive rather than overwhelming.
- Decide if a full bioidentical hormone program is the right next step for you.

Long-Term Thriving: Your New Normal

After the first 30 days, continue building on what works best for your body. The ultimate goal is not to return to your pre-menopausal self, but to create a new, vibrant version of you, one that feels balanced, strong, and authentically yourself.

Long-term success comes from:

- Consistent protein-rich, blood-sugar-friendly meals
- Regular strength training and daily movement
- Quality sleep and stress management
- Daily self-compassion practices
- Bioidentical hormone support when natural approaches aren't enough
- Regular monitoring of thyroid function (including free T3 and reverse T3)

Many women look back after 6–12 months and say, “This was the hardest and best thing that happened to me. I finally learned how to take care of myself.”

Note from the Author

Much of the information in this book is drawn from my earlier works, *Bioidentical Hormones 101, Second Edition (2025)* and *Natural Thyroid Toolkit*. These books go into

greater depth on hormone balance, thyroid testing, reverse T3, natural desiccated thyroid (NDT), and individualized treatment approaches.

As a special gift to readers of this guide, you can download a free PDF version of the first edition of Bioidentical Hormones 101 (2011) from my website: <https://jeffreychmd.com/>

You've Got This

This transition is not the end of your vitality: it is an invitation to step into a wiser, kinder, and more empowered version of yourself. Be patient with your body, be consistent with your actions, and above all, be kind to yourself along the way. You deserve to feel comfortable, energized, and at home in your body again.

Your Final Action Step Today

Open your calendar right now and block out time for your first strength training session this week. Then write down one kind sentence you will say to yourself every day moving forward. You are already on the path to feeling better, one gentle step at a time.

Chapter 11

Bioidentical Hormones 101, The Foundation

Many women reach the point where natural strategies help but do not provide the complete relief they need. This is where bioidentical hormone replacement comes in as an integral and highly effective part of the menopause program.

Bioidentical hormones are chemically identical to the hormones your own body produces. They are typically derived from plant sources and compounded into precise dosages tailored to your individual needs. Unlike synthetic hormones used in many conventional treatments, bioidentical hormones match your body's natural molecular structure, allowing them to fit perfectly into your hormone receptors.

In my book *Bioidentical Hormones 101, Second Edition (2025)*, I explain why this distinction matters. When hormones match your body's own chemistry, they are better tolerated and safer. The goal is not simply to eliminate symptoms but to restore balance so you can feel like yourself again, with steady mood, restful sleep, reliable energy, comfortable body temperature, and a healthy metabolism.

Bioidentical hormone therapy is highly individualized. A knowledgeable provider will review your symptoms, medical history, and laboratory results before creating a custom plan. Common hormones included are:

- Bioidentical estrogen (usually a combination of estriol and estradiol, often called BiEst)
- Bioidentical progesterone (micronized progesterone)
- Bioidentical testosterone (in doses appropriate for women)

These hormones can be delivered through several safe methods, which we will explore in detail in Chapter 12. The key principle is “do no harm while providing maximum benefit.” When used appropriately under medical supervision, bioidentical hormones often provide dramatic and lasting improvement in quality of life.

Many of my patients describe the difference as “turning the lights back on.” Hot flashes fade, sleep returns, mood stabilizes, energy improves, and the midlife fog lifts. This chapter lays the foundation so you can approach later chapters with confidence and realistic expectations.

Key Takeaway: Bioidentical hormones are identical in structure to those your body naturally produces. When natural lifestyle strategies are not enough for complete relief, a thoughtfully prescribed bioidentical hormone program can safely and effectively restore

balance. This is an essential part of the comprehensive menopause care described throughout this book and in greater detail in *Bioidentical Hormones 101, Second Edition* (2025).

Your Action Step: If you feel ready for more support beyond lifestyle measures, begin researching providers experienced in bioidentical hormone therapy. Bring your symptom tracker and questions to the consultation.

Chapter 12:

Safe Delivery Systems and Practical Protocols

Safety and effectiveness depend heavily on the exact hormone formula and how hormones are delivered. Transdermal (through the skin) and vaginal routes are generally preferred because they bypass the liver and provide steady hormone levels with fewer side effects.

Transdermal Delivery

Creams or gels applied to the skin allow hormones to enter the bloodstream directly. This method is convenient and allows easy dose adjustments. Many women start with a compounded BiEst cream (80% estriol + 20% estradiol). The estriol component is particularly helpful because it preferentially activates ER-beta receptors, which are protective for breast tissue.

Vaginal Delivery is Superior

Vaginal application of BiEst is frequently the preferred route for many women. It more closely mimics the high local estrogen levels seen during pregnancy, which are known to be breast-cancer protective. Vaginal delivery provides excellent symptom relief for hot flashes, night sweats, vaginal dryness, and urinary symptoms. Adding bioidentical progesterone in the same vaginal capsule helps protect the uterine lining and prevents endometrial hyperplasia in women who still have their uterus.

Progesterone with BiEst

When using vaginal BiEst, it is important to include natural micronized progesterone in the same capsule. This combination protects the endometrium and provides the calming, sleep-supporting benefits of progesterone.

Testosterone is Always Recommended

Testosterone is breast-cancer preventive according to studies by Drs. Rebecca Glaser and Gary Donovitz. For this reason, topical testosterone cream is an integral part of the hormone replacement program for all women. It improves energy, mood, motivation, muscle tone, and libido while contributing to overall breast safety.

Typical starting protocols (always individualized and monitored by your provider):

BiEst 80/20 topical cream or vaginal capsule: Low starting dose, adjusted upwards based on symptoms and labs

Natural progesterone: 100 mg oral at bedtime for perimenopause or included in vaginal capsule for menopause

Testosterone cream: applied daily or several times per week

These hormone formulas and hormone protocols are discussed in detail in *Bioidentical Hormones 101, Second Edition (2025)*. Regular follow-up with symptom review and appropriate laboratory testing ensures the program remains safe and effective.

Key Takeaway: Delivery method matters. Vaginal BiEst combined with progesterone in a capsule often provides superior relief while closely mimicking the protective hormonal environment of pregnancy. Adding topical testosterone further enhances benefits and supports breast health. These safe, individualized protocols form the core of an effective bioidentical hormone program.

Your Action Step: Discuss transdermal and vaginal options with a knowledgeable provider. Ask specifically about combining BiEst with progesterone vaginally and including topical testosterone.

Chapter 13

Breast Cancer Safety and Long-Term Benefits

Many doctors and menopausal women are afraid of estrogen, thinking estrogen causes breast cancer. This fear of estrogen is one of the errors of modern medicine. Estrogen is breast cancer preventive and does not cause breast cancer. All the studies showing this can be found in my book, *Bioidentical Hormones 101* second edition (2025).

The 18-year follow-up data from the Women's Health Initiative (WHI) study showed a 45 percent reduction in breast cancer mortality in the Premarin-treated group. This is the strongest evidence that estrogen prevents rather than causes breast cancer, and challenges the irrational and unfounded fear of estrogen that has caused unnecessary suffering in millions of menopausal women.

When the correct formula is used, bioidentical hormones do not increase breast cancer risk. They are preventive. The exact formula matters. Long-term health benefits extend far beyond symptom relief to include better bone density, joint health, brain protection, heart health, and overall quality of life.

Synthetic Progestins

Synthetic progestins such as medroxyprogesterone (MPA) are commonly prescribed by mainstream medicine. These are known endocrine disrupting chemicals (EDC's) and increase risk for breast cancer. These should be avoided.

What about Breast Cancer Survivors?

Mainstream medicine dogma states that hormone replacement is contraindicated for breast cancer survivors. This is another error of modern medicine. Twenty-four out of twenty-five studies compiled by Avrum Bluming, MD, a retired oncologist, show less breast cancer recurrence in breast cancer survivors taking hormone replacement. Bioidentical progesterone (unlike synthetic progestins) is preventive not only for breast cancer, this hormone is also preventive for many other cancers as discussed in my book, *Bioidentical Hormones 101, Second Edition (2025)*. Our breast cancer prevention program includes supplements such as iodine, DIM, vitamin D, and selenium, all covered in detail in *Bioidentical Hormones 101 (2025)*.

Key Takeaway: Fear of breast cancer has been overhyped and is an error of modern medicine. The vast preponderance of evidence, including long-term WHI 18 year follow-up data and studies of hormone replacement in breast cancer survivors is all strongly supportive of estrogen as breast cancer preventive. Combining bioidentical progesterone,

BiEst which contains 80% estriol, and testosterone, along with supportive nutrients like iodine, DIM, vitamin D, and selenium, provides a superior program with symptom relief and breast cancer prevention combined.

Your Action Step: Find a medical provider experienced in bioidentical hormones who is knowledgeable of different hormone formulas, and who can discuss the health benefits of estrogen, progesterone, estriol, and testosterone.

Chapter 14

Your Personalized Hormone Program and Final Action Plan

You now have the complete picture: understanding the hormonal changes of perimenopause and menopause, practical natural strategies for daily support, and the powerful role of bioidentical hormones for more complete relief of menopausal hot flashes, night sweats, insomnia and brain fog. Long-term health benefits are prevention of chronic diseases such as: osteoarthritis, osteoporosis, coronary artery disease, dementia, macular degeneration, and others.

Putting It All Together – Your Personalized Program

1. Begin with foundational lifestyle changes (Chapters 1–10) and then consider bioidentical hormone replacement (Chapters 10-14).
2. Add targeted supplements and thyroid evaluation when appropriate (especially natural desiccated thyroid if indicated).
3. When natural approaches provide only partial relief, move to a bioidentical hormone program using safe delivery methods (transdermal or vaginal BiEst with progesterone, plus topical testosterone) (Chapters 11-14).
4. Work with a knowledgeable provider for individualized dosing and regular monitoring.
5. Continue self-compassion and realistic expectations — this is a journey, not an overnight fix.

Much of this book was taken from *Bioidentical Hormones 101, Second Edition (2025)* and *Natural Thyroid Toolkit*.

My gift to you is a free book. You can download a free PDF version of the first edition of *Bioidentical Hormones 101 (2011)* from my website <https://jeffreychmd.com/>

Final Encouragement

You deserve to feel like yourself again, steady, comfortable, energetic, and confident. Whether you need gentle lifestyle shifts or a full bioidentical hormone program, the tools are now in your hands. This transition can truly become your Second Spring.

With warmth and respect,

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Epilogue

Dear Reader,

You've reached the end of this book, but in reality, you have reached a new beginning, a new relationship with your changing body. Perimenopause and menopause are not the end of life, however, they are a profound transition. One that asks you to slow down, listen more deeply, and care for yourself in ways you may never have before. The symptoms you've experienced are signals that your body is asking for new kinds of support.

Throughout these pages, we've explored practical tools and the powerful role of bioidentical hormones in restoring vitality and wellbeing. Much of the science and clinical wisdom shared here is taken from my earlier books, *Bioidentical Hormones 101, Second Edition (2025)* and *Natural Thyroid Toolkit*. For a more in-depth discussion the reader is encouraged to read these two more authoritative books which contain thousands of references to the medical literature.

This is your Second Spring:

You are not losing yourself. You are moving into a new season in life, a season that can be filled with greater clarity, strength, compassion, and freedom. You deserve to feel comfortable, energized, and at home in your body again. This is your Second Spring.

With warmth and respect,

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