Menopause and Nutrition

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What is Perimenopause?

Perimenopause is when you have symptoms of menopause but your periods have not stopped. Perimenopause ends and you reach menopause when you have not had a period for 12 months.

Once you've gone through 12 consecutive months without a menstrual period, you've officially reached menopause, and the perimenopause period is over.

Menopause and perimenopause can cause symptoms like anxiety, mood swings, brain fog, hot flushes and irregular periods. These symptoms can start years before your periods stop and carry on afterwards.



What are the signs of perimenopause?

- Hot flushes
- Vaginal dryness
- Sleep disturbances
- Mood changes
- Irregular periods

What is the menopause?

Menopause is the natural and permanent cessation of menses resulting from estrogen deficiency that is not associated with a pathologic process.

This occurs between the ages of 45 and 56 years in most women.

Menopause can also be caused by treatment for certain conditions, like endometriosis, cancer chemotherapy, especially with alkylating agents, radiation, chronic illnesses, like HIV-AIDS, or other therapies with antiestrogenic agents.

Physical changes

to hot flashes and night sweats. Other physical symptoms include:
Vaginal dryness
Changes in skin conditions, such as dryness, oiliness, or acne
Headaches
Muscle and joint pains
Difficulty sleeping
Discomfort during sex
Weight gain

Mental health changes

Menopause can cause mood changes, such as anxiety, depression, irritability, or low mood.

Other mental health symptoms include:

Difficulty concentrating (brain fog)

Feelings of loss of self

Hopelessness

De-motivation

Tips on how to deal with brain fog

Stress Management

- Mindfulness: Engage in mindfulness practices to reduce stress and improve focus.
- Hobbies: Participate in activities that you enjoy and find relaxing to help manage stress.

Cognitive Exercises

- **Brain Games**: Challenge your brain with puzzles, memory games, and other cognitive activities to keep your mind sharp.
- Learning New Skills: Take up new hobbies or learn new skills to stimulate your brain

Tips on how to deal with brain fog

Regular Exercise

- Aerobic Exercise: Engage in activities such as walking, swimming, or cycling. Aim for at least 150 minutes of moderate-intensity exercise per week.
- Strength Training: Include weight-bearing exercises to maintain muscle mass and overall health.

Nutrition during perimenopause/Menopause



Key preventive nutrients in menopause: vitamin D, calcium, vitamin C, B vitamins, and protein intake.



A healthy diet can help counter the symptoms of perimenopause and menopause and prevent many chronic diseases, such as cardiovascular disease and diabetes.



Energy intake below BMR does not lead to weight loss in the long term and is more difficult to maintain on a daily basis.

Protein and calorie intake



Diets with an energy content of less than 1200 kcal/day are associated with a higher risk of micronutrient deficiency.



To maintain or increase fat-free body weight and skeletal muscle mass, the daily protein intake should be 1-1.2 g/kg body weight (20% of energy).



Regular exercise along with weight training at least 2 x per week

Fluid intake

Adequate daily fluid intake is important in the transport of nutrients and oxygen and contributes to the health of the skeletal system.

Estrogen and progesterone significantly affect not only the *cardiovascular system* but also fluid and electrolyte balance.

During menopause, hormonal changes affect the thirst as well, which may result in a significant decrease in fluid intake

The individualized, appropriate amount of fluid intake is 33 mL/kg/day, which is recommended to be evenly distributed over the day.

Dietary fats

During perimenopause and menopause, the risk of cardiovascular diseases (CVD) increases with the decrease in estrogen levels.

Therefore it is important obtain a higher level of essential fatty acids from the diet.

- Dietary intake of omega-3 fatty acids, including eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA), is extremely important.
- Sources include oily fish, nuts, seeds etc
- · Or supplementing with an omega 3 supplement

Dietary fiber

Increasing the fiber content is beneficial since it slows down the absorption of carbohydrates.

A dietary fiber intake of 30-45 g/day is recommended.

Mainly by consuming whole grains e.g. brown rice, quinoa, barley etc.

It is recommended to consume at least 400 g of vegetables and fruits per day

Replacing refined grains with whole grains is associated with a lower risk of coronary heart disease.

Higher intake of legumes and nuts

2-3 servings of fish per week are associated
with a reduction in the
risk of cardiovascular
diseases.

British Dietetic Association Recommendations

Consume at least **four to five servings** of unsalted nuts, seeds, and legumes per week and avoiding refined sugars, such as sweets, cakes, and soft drinks.

Highlights the heart-friendly nature of oats, whole grains, and whole wheat bread.

Legumes such as lentils, chickpeas, and beans excellent sources of fibre

Bone health

- Osteoporosis is a chronic, progressive health problem that affects most women during menopause
- Average annual rate of bone loss during menopause, beginning 1-3 years before menopause and lasting 5-10 years, is approximately 2% resulting in an average 10-12% decrease in bone mineral density (BMD) in the spine and hip.
- Ensure adequate intake of vitamin D and calcium
- Regular exercise 2 x resistance training a week
- Reduce smoking and alcohol

The Role of micronutrients in Menopause – Vitamin D

- Vitamin D intake is important (e.g., in Central Europe from
 October to March, or if someone does not spend enough
 time outdoors, uses sun protection creams, or wears
 clothing that fully covers the skin).
- With ageing, the rate of hydroxylation of vitamin D
 precursors in the body decreases, so the importance of
 vitamin D intake increases with age.
- Vitamin D is a fat-soluble vitamin. Its sources are egg yolks, dairy products, and foods supplemented with vitamin D
 e.g. mushrooms
- About 80% of dietary vitamin D is absorbed in the small intestine.





Vitamin D

- Clinical studies have proven that osteoporosis treatments only achieve their effectiveness with adequate vitamin D supplementation (more than 1000 IU per day)
- From October to March in Central Europe, the UV-B radiation is so low that not enough vitamin D can be synthesized in the skin.
- Continuous vitamin D3 supplementation is recommended in these months for preventive purposes with a dose of 2000 IU per day.

Calcium

- The calcium requirements can be covered by a balanced diet
- The absorption of calcium is primarily influenced by vitamin D status, but it can be improved by the acidic components of dairy products.
- Dairy products contain the most easily absorbable calcium.
- · Consumption of mineral waters with high mineral content or hard water also contributes to ensuring the need.
- Regular consumption of soft-boned fish (eaten with bones), such as canned sardines, pickled herring, and anchovy, as well as oilseeds and foods supplemented with calcium, also contribute to calcium intake

Vitamin C

- Vitamin C is necessary for bone formation due to its role in collagen formation. Its absorption is about 80% if the daily intake is 100 mg/day.
- RDA is 100 mg/day, which can be provided through diet.
- Its sources are freshly eaten vegetables and fruits, especially peppers, currants, citrus fruits, and sauerkraut



Summary

Dietary recommendations

Protein-0.8-1-1.2 g/bwkg/day

Calcium, vitamin D, vitamin C, vitamin B

n-3 LCPUFA, omega-3 fatty acids

Vegetables: 300-400 g/day, 3-4 portions/day

Fruits: 100-200 g, 1-2 portions/day

Legumes: beans, peas, lentils, chickpeas, soy/at least once a week

Low-fat dairy products, half a liter of milk-calcium

Red meat: 350-500 g boiled/steamed/fried-per week

Deep-sea fish: 100-120 g/occasion/at least two servings per week

30 g unsalted nuts, oily seeds/per day

30-45 g/day dietary fiber: whole grain, fiber-rich cereals

To be avoided

Simple, fast-acting sugars

Smoking

Sugary and alcoholic beverages

Sedentary life

Salt (max. 5 g/day)

Saturated fat-not exceed 10% of the total energy intake

How to deal with stress?

- · Ashwagandha extract Small trials have been carried out on it affects to help reduce depression and cortisol levels (stress hormone).
- It has shown to help regulate cortisol levels In the body

Agnus Castus

Agnus castus, also known as **chasteberry** or **Vitex agnus-castus**, is a herbal remedy often used to alleviate symptoms associated with menopause. Here are some of its benefits and how it works:

Benefits of Agnus Castus for Menopause

Hormone Balance: Agnus castus helps balance hormones, particularly by increasing progesterone levels and reducing prolactin levels. This can help alleviate symptoms like hot flashes, night sweats, and mood swings.

Reduced Breast Tenderness: It can help reduce breast pain and tenderness, which are common symptoms during menopause.

References

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