

Ep #262: Fueling Your Body Through Menopause with Elizabeth Sherman



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Jill Angie

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Welcome to *The Not Your Average Runner Podcast*. If you've never felt athletic but you still dream about becoming a runner, you are in the right place. I'm Jill Angie, your fat running coach. I help fat women over 40 to start running, feel confident, and change their lives. I have worked with thousands of women to help them achieve their running goals and now I want to help you.

Jill: Hey runners, so I'm here this week with the one and only Elizabeth Sherman and you're going to love her. She is a health coach for women in midlife, and host of the podcast *Done With Dieting*. And Elizabeth and I met in a class called the Advanced Certification for Feminist Coaching, which has been an absolute eye opener. And we've bonded over a lot of things during this class.

And I was recently on your podcast and I'm really excited to have you here because we've got a pretty important topic to talk about today. And that is menopause, and also fueling your body for menopause, during menopause. Like all things menopause and fueling your body. And we are going to do like a little feminist ranting today as well. So buckle up for that.

So, Elizabeth, thank you so much for joining me today.

Elizabeth: Thanks for having me, this is going to be so much fun because now I get to be on the other side of the microphone from when I interviewed you.

Jill: I know.

Elizabeth: Which was tons of fun too.

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Jill: It's good stuff. So why don't we just start with you kind of sharing a little bit about yourself and how you came to be doing this work in the world?

Elizabeth: Yeah, so similar to you I started out as a personal trainer. I started out in actually, what made me pursue this line of work was in 2001 my mom passed away from breast cancer. And watching her body die and get ravaged from this disease was so impactful for me. And what happened is I clearly saw that if I kept doing what I was doing, that I would end up just like her. And I did not want to do that because she was 65 years old.

And so what that did was it started me searching the internet to find out how do I avoid getting breast cancer. And what I found out was that my health was actually a big indicator to that. Like what I ate, how I moved, all of those things were a huge risk factor for cancer, as well as all sorts of other diseases.

So I started getting myself in shape. And at the same time I was working as a business analyst for a software company. And I was kind of having this midlife crisis I guess you could say, at the ripe old age of 33. Where I was like, how am I making the world a better place? And so I went to see a psychologist, probably more as a life coach than anything.

And she was like, I think that you would be a great wellness coach. And I was like, great, I could totally do that. That's a theme in my life. I'm like, yeah, sign me up. And then I'm like, wait, how do I do that? So yeah, I got my certification together for personal training and nutrition. And then I got laid off by this job and I was like, oh, Kismet, it's perfect.

Now, this was in 2005, no one knew what coaches were. And so I knew that I could help people so much more than I was allowing myself to, than they were allowing myself to. I didn't know how to market myself and so for

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a long time I was “just” a personal trainer. But as time went on and I started getting more information and I started helping my clients more, I kind of grew into a more health coach type of role.

And the one thing that really was frustrating to me, which was when I joined the Life Coach School, which you're certified through, is that I would see my clients get really good results. They'd be consistent in their eating, they'd be consistent in their exercise habit, and then something in their life would happen.

That something would be like their job would get busy, or maybe one of their kids would get in trouble, or their partner would be called away on work. Whatever it was, it was this stress. And the stress that they were experiencing would just pull the rug right out from under them. And it prevented them from being able to take care of themselves.

And it was really frustrating for me because I was like, how do I coach my client around their money problems, or their relationship with their partner, or saying no to their parent when their parent is sick when I'm just a personal trainer? And so when I found the Life Coach School and life coaching, that's when I was like, oh, this makes everything make sense.

Because we think that our health, and dieting, and all of that stuff is this silo. That if all I know need to know is what to eat and how to move, then I'm going to be golden, I'm going to lose all this weight. But what happens is all of that other stuff in our lives, our problems, how we think about them, that's what influences our ability to take care of ourselves. So that's kind of a long answer to how I arrived at where I am today.

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Jill: So basically you've created a space where you cannot just help your clients become more intentional with their movement and their nutrition, but also to ride the waves of life.

Elizabeth: Yeah.

Jill: I think you're right, because I experience this with my runners as well. They're like, okay, here's my training plan and I'm going to run on Monday, and Wednesday, and Friday. I'm going to strength train on Tuesday and Thursday. And then, I don't know, like a hurricane rolls through and the power goes out, or their job.

Elizabeth: Or their kid calls them up and they're like, "Hey, I forgot my band uniform. Will you send it to me? Or will you bring it over?"

Jill: Exactly.

Elizabeth: And then they abandon themselves for their kid.

Jill: Right. And so it isn't, like we have this expectation that if I say I'm going to do it, I should just be able to do it. And we sort of discount all of the other shit that's going to get in the way. I love that. But you also are like really knowledgeable about the impact that menopause has on a woman's body as well. So do you want to touch on that a little bit?

Elizabeth: Sure. Yeah, so everything that I kind of know today, I know because I went out and I sought the answers for myself. And so I've been taught about women's hormones through a naturopath. Everything that I know about how the female body works in midlife is through this mentor of mine.

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And so it started out with me like having hormonal problems. I was waking up in the middle of the night. And I was waking up because I was having night sweats and I was like, what the hell is happening? And actually even before that I was in that restrict, binge, regret cycle that so many women have, where I was working out all the time and I was restricting my food.

And I was like, this is no way to live. I cannot see myself at age 70 years old, 65, whatever, sometime in the future, and still be logging my food, still weighing myself every day, beating myself up. My inner critic was just harsh. And I was like, I need to figure out how to fuel my body or accept my body for who she is.

And through that whole process, and then also learning how to work with my body, listen to my body, I've been able to manage so many of the symptoms of menopause through that.

Jill: So my jaw just dropped at something you said a moment ago, which I don't think I ever thought about it that way. But when you said, "I don't want to be 70 years old and still tracking my food." Because I think that we don't really think of it that way. We're like, I just need to solve the problem that's in front of me right now. Whether it's like, I think I need to lose 20 pounds or whatever it is.

And we're like, I'm just going to track my food and I'm going to control every little thing. And we're not seeing like, am I willing to be doing this when I'm 70 fucking years old, right? Playing with my grandkids saying like, "Oh, sorry, Grandma's got to go over to my fitness pal and track her macros." Like fuck that.

Elizabeth: Right.

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Jill: So I just want to take a moment and like really appreciate that perspective because I don't think most women think of it. That's all I had to say.

Elizabeth: No, and so I was like I need to figure this out because if I keep doing, I mean, you know this from life coaching. If we want the future to be different, we have to start acting that way today.

Jill: Yeah.

Elizabeth: And so, yeah, I live in Mexico. And when I moved to Mexico I threw away all of my scales. My food scale, my weight scale, and I was like, okay, now all the rubber is going to hit the road. Like, Elizabeth, you need to figure this stuff out if you want to be able to maintain your weight. I had these ideas that I was going to be at the local beach bar at like, two o'clock on a Tuesday smoking cigarettes, drinking pina coladas all of a sudden, but no.

Jill: It does not sound like the worst life, honestly.

Elizabeth: It doesn't. But not for a health coach, maybe.

Jill: Yeah, that's true, and definitely not every day. But okay, so I kind of distracted us from the topic of menopause, and I apologize for that. But can you kind of speak a little bit to the mental toll that menopause takes on a woman and why that happens?

Elizabeth: Yeah, well, so there's data to suggest that there are some cultures where women spend more time with their parents or with their mothers. And so in those cultures menopause isn't as much of a surprise

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as it is for the American culture, where we really don't see aging women as much as maybe other cultures do.

And so I think that menopause takes a lot of women by surprise. They're like, wait a minute, nobody told me that it was going to be like this. Or they'll start having these symptoms and they're like, what is going on with me? I feel like I'm going crazy. Like women speaking their mind, right? And like getting this brain fog, or waking up in the middle of the night.

I mean, I used to be a sound sleeper. I could sleep in any bed seven days a week and not have trouble. I would sleep eight and a half hours a night. Today I can't do that anymore. If I get eight hours asleep, that's amazing. But normally like seven and a half is good for me. Last night I think I only got six because I had a glass of wine.

Jill: Yeah. So why do you think that menopause is such a mentally painful thing for women? I feel like it's kind of a socialization thing, right?

Elizabeth: Absolutely. Okay, so let's think about this. Historically we've been socialized to not talk about menstrual cycles, right? Like, ew, that's gross, that's blood. I have so many thoughts right now. But we don't talk about the female anatomy and what's going on.

And so when a woman moves into midlife and moves out of reproductive years, we just kind of feel like we need to shrink into a corner and like die, right? Because women are socialized that the most important thing for us is to be beautiful.

Jill: And young looking.

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Elizabeth: And as an American culture we don't find aging beautiful for women.

Jill: Yeah, good point. Yeah, there's a silver fox, right? Like you hear that term for men. But you do not hear that term for women. There's no like silver pussycat or I don't know, that was terrible. Scratch that. Let's just pretend I never said that. But right, there's no like equivalent silver fox term for women.

Yeah, like we're socialized to be beautiful and then men are socialized, right, to be...

Elizabeth: To be successful, to get a beautiful wife.

Jill: Yeah.

Elizabeth: And so what happens for many women is we are brought up in the age of 17 Magazine and Cosmopolitan, where there's one beauty ideal and if you don't fit that beauty ideal, well I don't know, fuck you? Like I don't know.

And so what happens is, we have been taught that we should be thin at any cost, right? The cost to our finances. How much money have you spent on weight loss? I know I've spent just thousands and thousands and thousands of dollars.

Jill: Yes, same.

Elizabeth: And my husband doesn't understand it because he wasn't socialized this way. He's like, you're fine.

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Jill: Right, and so like we've got this belief that we have to be constantly making ourselves more attractive, looking younger. And then menopause hits and suddenly it's like everything's out of control. Like my hair is turning gray, my body shape is changing. Even if you're not gaining weight, very often your body fat redistributes itself and your skin gets dry. Like it's just everything changes.

And it seems to happen kind of suddenly. It's like one minute you're just living the dream, and the next minute you're like, what just happened? Like when did I get wrinkles? When did my hair turn gray? When did all of this happen? It feels like it happens real fast.

Elizabeth: When did I start getting chin hairs?

Jill: Oh my God, the fucking chin hairs. Everybody's got, every woman over 40 has the one chin hair that you look in the mirror and you're like, how is that two inches long? Like, why did nobody tell me? And it's like it grows overnight. What is that? What is that thing?

Elizabeth: Mine happens when I'm like on Zoom calls and I'm like, "Oh, what's going on there?"

Jill: You can feel it, it's like a little, yeah. That's so funny. I have a friend and it doesn't grow on her chin, it grows out of the middle of her forehead. And I'm like, girl, it's your horn. It's your unicorn horn. So funny.

Right, so the financial cost. And then, of course, if you're thinking like, oh my gosh, the worst thing that in the world that I could be is fat. Right? Because fat women don't keep their husbands. And the truth is sometimes when women gain weight, their husbands leave because men can be dicks,

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you know? They're socialized in the same system that we're socialized in, right? And so it hurts everyone. So menopause comes along and, yeah.

Elizabeth: Well, and so I think that what happens is that for so many women it depends on how we identify ourselves. That for some women because we identify ourselves through our looks, that going through menopause can be actually more traumatic than someone who might identify themselves through their career or some other thing.

So women who grow up like really being the beauty queen, as they age out and move into the menopausal years or move into the post childbearing years, then what happens is they really feel this lack of relevancy because they're noticing that they're not getting the accolades. On the street, for example, people aren't looking at them and saying hello to them, where they used to when they were younger women who were very attractive, right?

Jill: I love that you used the word trauma, because I do think it's traumatic when you've created an entire identity around a certain thing, whether it's a healthy identity or not. When you've created your entire identity, planned your whole life, and then all of a sudden there's this huge shift and everything changes and you're not prepared for it. I think it can be traumatic.

Elizabeth: Yeah.

Jill: I kind of feel like that's probably where a lot of like women getting addicted to plastic surgery and so forth, where that comes in because they're desperately trying to fix a moving target.

Elizabeth: Exactly.

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Jill: Yeah.

Elizabeth: And unfortunately the other symptoms of menopause just kind of go by the wayside. They just become an inconvenience. Things like insomnia, brain fog, lack of energy, cravings, those types of things. We just see that as like, oh, yeah, whatever. But I'm just solely fixated on my appearance.

Jill: Yeah. And so then, when we're putting all our energy into "fixing" our appearance, especially if you're somebody who's like, okay, I gained weight in menopause, I need to lose the weight, and then you start dieting. Does that even like make the other symptoms worse?

Elizabeth: Well yeah because, so first of all, all of the weight loss, not all of, its changing. However, most of the weight loss information that we have today, all of the data that we have today is based off of college aged men. College age men were done in the studies of all of these diets. And women in midlife, our hormonal profile is very different than a college aged man.

And so everything we hear about weight loss and weight management is calories in versus calories out. And that worked for us when we were younger women, when we were 20 years old. We could go out and binge drink and then just exercise a little bit harder or cut back during the week and our weight would bounce back.

But then as we get older, what happens is our bodies become more sensitive to insulin and our bodies also become more reactive to stress. And so what that does is since we grew up in this diet culture where we had to become thin at any cost and there's fat phobia, what happens is that we have this list of good foods and bad foods that isn't even our list.

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It's the list of like our Weight Watchers leader or our parent or some random dude that we met on an airplane who said, "I read a magazine and I heard that Kale was bad for you." So now we take that on as our own belief system. And passersby who look at our food and say, "Oh, should you really be eating french fries?" Well, leave me alone, right?

Jill: You're just like, "Fuck off, random person."

Elizabeth: Exactly. And we see this pervasive culture of shaming food and shaming fat bodies. And so why that's important is because when we were 20 and we were being a guy's girl, right, and eating the pizza and drinking the beer with the boys so that they would get to like us. Then what happens is we have created this just weird, fucked up relationship with food and our bodies. And we never learned having a really good relationship with food.

And so now when we're in midlife, all we know is restrict and over exercise in order to manage our weight. And most traditional diets, what they do is they actually take out one entire food group. So like keto takes out all carbohydrates. There's low fat, there's veganism, and vegetarianism, which takes out protein.

And everyone's body has a unique makeup of how many carbohydrates, how many fats, and how many proteins they need in order to fuel their body properly. And so we have become completely disconnected from our bodies because we follow this rule of you have to be thin. Don't pay attention to your body, you're hungry, suck it up, because this is the way.

And so we don't have a good relationship with our body anymore. And so, yeah, everything just kind of is this big, steamy mess of poop.

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Jill: Just a big steamy mess of poop. I love it. So I think what I'm hearing is that, first of all, we're kind of ignoring all of these other symptoms because we're like, the worst thing you could do is gain weight or not look young anymore. So we're so much more concerned about like I need to fix my appearance so that I can feel young.

And there's so much other stuff going on in menopause that, first of all, I feel like you look less haggard when you've actually gotten some sleep or when you're actually hydrated, right? So you could probably manage some of those other symptoms and actually see a change in your appearance, but that's kind of neither here nor there.

I mean, when we talk about fueling and menopause, like what are some ways you can fuel your body when you are in perimenopause or post menopause, that will help you with some of those other symptoms, which then can make your life so much easier?

Elizabeth: Yeah, so I actually have a really good freebie, which is called the Eight Basic Habits That Healthy People Do. And it's just the basic stuff, I'll tell you what it is right now. It's not brain science, it's really easy.

So drink enough water, eat vegetables, get protein with every one of your meals. Most meals preferably, again that's completely determinant on what your body needs. Move daily, manage your stress, get enough sleep, limit your treats, and eat just enough, not too much. It's simple.

If you can start there, then what can happen is you can actually start to go on the road to feeling better. Because what we really want to do when we're talking about menopausal symptoms, is we want to start connecting the dots between behaviors that I do and how that makes me feel.

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And so you and I were talking before we came on air about some of the things that we've experienced now that we're in menopause that we can't do today that we could do before. So like, for example, I mentioned wine earlier. And now I notice that I might be able to have one glass of wine at night, but anything more than that and my sleep gets disrupted.

Jill: Yeah, and then when your sleep gets disrupted that kind of has a knock on effect because then the next day your cortisol is probably higher. You're probably feeling like you got maybe a little bit more brain fog and like it just sort of propagates.

Elizabeth: Well, exactly. And not only that, but when we don't sleep well, the cells in our body actually don't regenerate correctly. And so you may notice that after a night of not sleeping well, you're probably going to get the munchies at about three o'clock in the afternoon.

Jill: Interesting.

Elizabeth: So, yeah, totally do a reflection. Like if you ever get hungry for something carby midday, notice like is this a habit? Or is it that I didn't sleep well last night? Because the brain knows that the easiest way to get energy is through something carby. And depending on whether you're one of those people that like salty carby or sweet carby, that's what you will go ahead and seek out.

Jill: Yeah, that makes perfect sense. It makes perfect sense.

Elizabeth: And then, of course, if you're not fueling your body correctly, then you're not going to feel like running. Because if you're not sleeping well, then you don't have the energy to run. And if you're not eating properly, you don't have the energy to run. And if you're stressed out, well

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first I kind of find that if I have anxiety or if I'm stressed out, running is the best thing for me.

Jill: Yeah.

Elizabeth: But I do have that default script in my brain that I don't want to do anything, I want to shut it down. So I just know that after years of exercising that the best thing for me to do is break a sweat.

Jill: Yeah. And I love all of this that you're kind of like drawing a lot of good points here. Because so often I'll have a client that comes to me and they'll say, "I don't know, I just had a really bad run today." And I'm like, well, let's talk about the past three to four days of your life, right? Like what were you eating? What were you drinking? What was your sleep like? What was your stress level like?

And it's like, oh, well, I didn't sleep well last night because I had to work late. And then I came home and I had a glass of wine, so I didn't sleep well. And I woke up and then I was tired and then I had a terrible run. And I'm like, okay, that makes sense. But we're not going to beat ourselves up, right? Like this is data, it's a data point.

But it's that like listening to your body. Like what's sort of the short term and medium term effect on your running, on your life of doing things that maybe you just can't do anymore once you're menopausal? I mean, I tell people all the time how I'm caffeine free, and people are like, oh my God, how can you not drink caffeine?

I'm like, well, about 10 years ago my body made it real clear that caffeine and I were done. Because I would start getting the shakes and I started getting like- It's funny, there's this like weird serial killer show with Kevin

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Bacon I used to watch. It was like probably 2015, 2016. And I would get these like panic attacks while I was watching the show.

And I thought that it was, oh, I can't just watch like several episodes of a serial killer show. It's too much for my brain. And then I started to kind of like put two and two together and realize like, oh, no, it's I'm watching that at a certain time of day and it's sometimes after I'm drinking coffee. And it was literally the caffeine interacting with my perimenopausal body that was creating this like racing heart, kind of nauseous feeling.

And as soon as I started dialing back the caffeine I was like, oh, all of that just went away. And so now I'm like, I still drink coffee, I just drink decaf because I actually love coffee. But I had coffee, a few years after I went caffeine free I had a cup of coffee and I had such a violent reaction to it. I mean like nausea, shakes, racing heart for several hours. So I was like, I will never ever do that again, like once I got it out of my system.

So I feel like yeah, and red wine, that's another thing I can't do. I could do white wine, I could do beer, I can't do red wine anymore. It's just okay. And every single time I say, "Oh, just a taste," I regret it. And so it's to the point where I'm like, nope, I'm just not going to do it anymore. Sometimes I feel like we need to learn lessons multiple times.

Elizabeth: Absolutely, because your brain is still on that old habit loop of, oh yeah, this is totally fine. Right?

Jill: Yeah, I think you're right. So what are some, I mean, I know there's not really one size fits all. And you've given us like the water and eating vegetables and maybe, can you review the eight things again?

Elizabeth: Yes. Okay, so to go over these a little bit more in depth.

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Jill: Yeah, let's do that. Let's do that.

Elizabeth: You want your urine to be a pale yellow color by the end of the day, okay? So that's your water. So there are lots of different foods that have water in them. Vegetables have water, of course, you know spaghetti sauce has water. So you just want to make sure that you have your fluid intake.

Jill: I love that you said that, right? Because it's not just about chugging water, it's about getting the water in various forms.

Elizabeth: Exactly.

Jill: Yeah, thank you for saying that. Okay.

Elizabeth: However, that being said, we really don't want to use coffee as water because I know someone out there right now is thinking, "Can I use coffee as my water intake?" Maybe, but try to get some water.

Jill: What if it's decaf? There is no diuretic in there, so yeah. I'm like no, but can I bargain my way into the coffee that way?

Elizabeth: Then there's vegetables. So eat something green once in a while. And when I talk about vegetables, so there is a differentiation between non-starchy vegetables and starchy vegetables. Starchy vegetables generally grow below ground, non-starchy vegetables generally grow above ground. And starchy vegetables, we want to be a little bit more careful of. However, that being said, no one has gained weight eating carrots, okay?

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So don't freak out about fruit or vegetables or anything like that. And so when we're talking about eating something green once in a while, what I see as a serving is the size of your fist. And if it's leafy greens, then it would be two fists, three cooked, okay? So that's just one serving. And so you want to aim for wherever you are.

So one of the things that I do with my clients is we always start with awareness. How many are you doing right now? And we don't set a target until we know exactly how many servings we're normally eating on a regular basis because someone will say, "Oh, I can totally eat five servings." But if you're only eating two, that's a huge jump.

Jill: Yeah.

Elizabeth: So always start with where you are. Then protein, so have protein with each of your meals preferably. Everyone's protein needs are a little bit different. And when I'm talking about protein, I'm talking about complete proteins. So yes, broccoli has protein in it. Yes, beans have protein in it. But those sources of protein don't have the complete amino acid profile.

And so our body needs, I think it's 11 essential amino acids. And we can really only get those from animal proteins as well as soy protein. That's why soy protein is so popular.

Jill: Okay, that's good to know. What are your thoughts on like protein powders? Like if somebody wants to throw some protein powder in their smoothie?

Elizabeth: Yeah, everyone's completely different. And so protein powders can be really effective, but if you have too much throughout the day, then

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that can cause problems. And so really, again, pay attention to your body and know your body in order to determine whether protein powders as well as protein bars are good for you or not.

Jill: Okay, protein bars give me heartburn every time. Isn't that funny?

Elizabeth: Yeah, then for you they wouldn't be effective. But you might want to try different protein powders. So there are vegetarian protein powders right now, like pea protein, as well as soy and whey protein.

Jill: Oh, yeah. Okay.

Elizabeth: So you could try different variations. But yeah, figure out what works best for you and your body.

And then let's see, the next one is move daily. And so I recommend moving for 30 minutes a day. It does not have to be exercise, it does not have to be strength training, it does not have to be running. It does not have to be anything structured like that, where you're working out for 30 minutes.

But I want you to move daily because, as I said, women are more reactive to stress. And moving, preferably out in nature if it's available to you, is actually going to reduce your symptoms of stress.

Jill: I love that. It's like you can have a dance party in the backyard. So fun. Gardening, I feel like gardening is a good movement too.

Elizabeth: Gardening, fantastic. Shopping.

Jill: Yeah. Oh, thank you for saying that too. Like just go into the mall and kind of window shopping, right?

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Elizabeth: Yeah, absolutely.

Jill: 30 minutes of walking around. Yeah, so good. So good.

Elizabeth: Yeah, playing with your kids, playing with your grandkids, whatever. Yeah, just move and enjoy it.

Jill: I love it.

Elizabeth: Let's see, what else? Manage your sleep, which is kinda difficult sometimes when we have insomnia. And so when we're talking about insomnia, waking up in the middle of the night, really trying to manage your mood around that. I'm sure that you talk about that with your clients a lot in terms of managing their mind. And, you know, there's nothing urgent happening at three o'clock in the morning. You're not going to solve that problem.

Jill: Yeah. But I think like, and this is just from my own experience, and I'm definitely a lot better at it now. But in the beginning when I first started with with the insomnia from menopause, the insomnia itself wasn't the problem. It was my panic that I wasn't sleeping that would, first of all, make it harder to fall asleep because I would lay awake thinking, "I really need to be falling asleep right now. Oh my God, now I'm only going to get two hours. Now I'm only going to get one hour."

And then during the day, I would just be telling myself like, "Oh my God, you're so tired, you should sleep more." And that made it very difficult to actually get a good night's sleep. It was kind of like heaping all of this judgment and stress on top of the existing issue. So what would you suggest for that?

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Elizabeth: Well, what I generally suggest is that folks, when they go to bed, you create a bedtime routine. It doesn't have to be fancy. It doesn't have to have candles and incense and shit like that. But just preparing your brain with a series of tasks. It could be making coffee, putting your clothes out for the next day, brushing your teeth, doing some personal hygiene, maybe reading, trying to stay away from screens.

But ultimately, one of the things that I find works really well with my clients is that we review our schedule for the next day so that anything that we have to prepare for, we're actually preparing our brain for the next day. And then the other piece to that is doing a thought download if you have stuff on your mind, so that you can get it out ahead of time.

Jill: Oh, that's so good. I love that.

Elizabeth: There's a really good book called *The Gap and the Gain*. And he even takes it one step further where he actually writes down his wins for the following day so that it prepares your brain while you're sleeping for your successes during the day.

Jill: That's fun.

Elizabeth: Yeah.

Jill: *The Gap and to the Gain*, that's the name of it?

Elizabeth: *The Gap and the Gain*, yeah.

Jill: Okay, I'll check that out.

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Elizabeth: So it's based off of, the author's name is Benjamin Hardy and he interviewed, if you get the audible version he actually interviews Dan Sullivan. It's based off of the work of Dan Sullivan.

Jill: Okay.

Elizabeth: And he interviews Dan Sullivan in between the chapters about what they talk about in the chapter. It's a great book, it's fantastic.

Jill: I'll check that out. And we'll link to that in the show notes for sure. Okay.

Elizabeth: Let's see, what else? I did stress, I did sleep. Or no, I didn't do stress. So stress is a little bit ambiguous, right? Manage your stress. But one of the ways that you can do that is through exercising for your body and paying attention to your body.

And I can't remember if we were talking about it beforehand or if we talked about it in the interview. But you were talking about how we get fixated on that I have to run three days a week. And if one day I don't feel like it, like really pay attention to your body and do what is right for your body. And you kind of, again, have to start listening to that and paying attention to it and honor it. And just because your body isn't right for whatever was on your schedule, doesn't necessarily make you a failure.

And so as we age, I think that it's really important that we be a little bit more lenient with ourselves. Like I see you on Instagram doing these deadlifts. And I unfortunately, don't have the weights right now, but when I was doing it recently, I just couldn't lift heavy anymore because I used to do it as a younger woman and I probably wasn't taking proper care of my joints.

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Jill: Okay. Got it. So it's like really just kind of listening to your body. Like, it's possible you might not be able to do the same things that you were doing before. And there's nothing wrong with that.

Elizabeth: There's nothing wrong with that.

Jill: Yeah. I mean, even with runners, a lot of runners kind of have a, like there's always going to be a point in your life when you are the fastest you will ever get. And then you will be getting slower as you age. And depending on when you started running, right, if you started running when you were a teenager, hey, you might hit your fastest when you're in your 40s. And then after that it's going to be a decline.

If you started running in your 40s that fastest might be in your 50s and then there might be a decline. But it's not like a commentary on how you've let yourself go or how something's gone horribly wrong. It's like it's literally the cycle of life, right? We hit our physical peak at a certain point and then, you know.

And there's plenty of people, there's a woman out there, her name is Joan, she's on Instagram. Her Instagram is train with Joan. And she started lifting in her 70s, I think, and I want to say she's probably close to 80 right now. And this woman is such a badass, like the amount that she can lift is amazing to me.

But when you start in your 70s, right, you've still got that upswing of building your strength and finding, but there's going to be come a point in time where even she is like, "Okay, I'm not going to be able to build any more strength after this." And there's going to be sort of a little bit of a decline after that. I'm not sure why I'm telling this story.

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Elizabeth: And what I'm thinking about is the phrase, comparison is the thief of choice.

Jill: Yes, exactly.

Elizabeth: Especially when we're comparing ourselves to the version that we used to be last week, last month, last year, five years ago, when our circumstances were completely different. Well, I should be able to run five days a week today because I used to be able to do that five years ago.

Jill: Yeah. And I think that's why menopause is so painful for women, right? Aside from all the symptoms, there's that whole mental I don't have the same body I used to have, I don't have the same face I used to have. And there's this belief that like, oh, I'm getting old. What's the trope of the crone, who's like used up, dried up.

There are all of those images that we think of when we think of an older woman. It's like she's dried up, she's used up, she doesn't have anything to offer, she's ugly, she's not attractive. Like all those things, I think that is kind of in the back of every woman's head. Maybe not every woman, I think there are some that are not raised that way. But the majority of us are raised to believe that you become irrelevant after a certain age. And so it's normal, I think, that we freak out about that.

But it's also like, my mom told me when she was in her 70s, so she was 80 when she died. When she was in her mid-70s she said to me, "Every decade of my life has been better than the one before." And I was probably early 30s when she told me that. She was a lot older than me.

And I just remember thinking, you know, I was like 32 years old and I remember thinking every decade is better than the one before? Like how's

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that even possible, you're old? Right? That was in my brain. I was like, "Oh, yay!" You know? But in my mind, I was like, that doesn't make any sense.

And here I am 54 years old thinking like, "Damn if she wasn't right." Every decade has been better. And I'm like, I cannot even imagine how amazing my 60s are going to be given how much fucking fun the 50s have been. And I'm like, so maybe we've all just been wrong about menopause.

Elizabeth: Well, and it's interesting that you bring that up because I read a study once that said that when they surveyed people in different, not centuries, but decades, of what decade was their favorite, I think that the 60s actually become the favorite because we tend to have more disposable income.

We don't have our children around anymore. We don't have our parents around anymore. We have more freedom. We have a little bit more independence. We still have our ability to move around freely. And age really hasn't, our body hasn't started decaying as much yet.

Jill: Yeah, right? If you could understand when you were 20 that shit was just going to get better and better and better for the next 40 years, I feel like it would just completely shift our priorities. The time and effort that we put into our appearance and feeling young and everything if we were like, oh, actually, your 20s are going to be the hardest decade of your life because you don't know who you are.

Elizabeth: Absolutely.

Jill: Like so much like internal angst, like it just gets easier. The less and less estrogen a woman has in her body, I feel like the more free she is mentally, right?

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Elizabeth: Yeah, absolutely.

Jill: So specifically for runners, do you have any suggestions for like how menopausal symptoms can impact runners? And is there anything additional that a runner might need to consider as they're fueling themselves through and after menopause?

Elizabeth: Well, of course I'm going to say drink water, eat vegetables. But as far as the rules go about running fueled versus running on an empty stomach, I think that all of that is completely individual. And so you just kind of have to figure out what works for you. And also be open to the idea that what used to work for you might not work for you in the future.

Jill: Yeah. And I think, I mean, not to bring diets up, but I know a lot of my listeners are working on weight loss and are struggling because they're like, what used to work for me doesn't work anymore. And they think it's somehow a personal failing. It's like, no, your body changed, so of course your nutritional needs have changed. Of course they have.

Elizabeth: Yeah, absolutely. Yeah, and so again, going back to trying to listen to your body and the subtle cues that your body sends you. And I don't know if I talked about this, I think I did. I think I mentioned it, but I didn't really talk about it.

But energy, sleep quality, your mood, your cravings, and your appetite are all ways that your body is sending you signals that you're eating right and exercising and getting enough sleep for your body.

Jill: Okay, so can you say more about mood? Like what are some mood sort of red flags that maybe you're like, "Oh, it's possible I'm not eating enough or it's possible I'm not sleeping enough." What does that mean?

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Elizabeth: Yeah, so it could be lethargy and brain fog. And how I would interpret that would be that you're either eating too many carbohydrates or maybe not enough. Same thing with sleep, if you're waking up in the middle of the night, it could be that you're eating too many carbohydrates or not enough. Anxiety might be you're not eating enough in total, or depression.

Now, those are sometimes, you know, we come from The Life Coach School where we're taught that our emotions are generated by our thoughts. But I think that in midlife, sometimes our body just fires neurotransmitters that make us feel anxious even though we actually don't have anything to feel anxious about.

Jill: Well, it makes perfect sense because if you can eat sugar to create dopamine in your brain, why can't you eat another food that fires off a different neurotransmitter that like creates a different mood or vibration in your body?

Elizabeth: Yeah.

Jill: I mean, one thing I've noticed as menopause, and I've noticed it, I know this is how my body works and I still choose to ignore it, is if I eat ice cream within like three to four hours of bedtime, I will not sleep properly. I absolutely won't. I will be awake all night long. I will look at like my sleep data, my heart rate will be higher all night long.

And then there are also still nights that I choose to have ice cream while I'm watching TV before bed. Like knowing full well, right? Yeah.

Elizabeth: And I think that that's completely the difference between eating right for your body and following a diet. Because if I were to tell you, Jill,

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you can't eat ice cream. Then you'd be like, Elizabeth is not the boss of me. Fuck her, I'm going to eat ice cream anyway.

And then you're going to eat it and then you're going to feel bad because you failed me or you failed the diet or whatever. Versus being able to connect the dots yourself and saying, oh, well, when I eat ice cream at night, it doesn't work well with my body. And so therefore, if I do it I know that I'm going to have consequences.

Jill: Yeah, and then making the conscious decision, I'm choosing the consequences, or I'm not choosing the consequences and I'm choosing to like say I'll have this ice cream tomorrow or whatever, because it'll still be there.

Well, in my house it might not. But there's another human in my house that is equally obsessed with ice cream, and no ice cream is ever safe. And, Andy, if you're listening, you know I'm talking about you.

Elizabeth: You know who you are.

Jill: I love this, though, that it really is about listening to all of the signals that your body is giving you, not just the number on the scale or the number on the measuring tape or whatever. There's so much rich information that our bodies give us about our health and our quality of life that really have nothing to do with our body weight.

Elizabeth: Yeah, absolutely.

Jill: And I think that there's so much more richness to be gathered from looking at that information than there is to be looking at a scale or body fat percentage.

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Elizabeth: And to further illustrate that, when we think about how food makes us feel, oftentimes we'll start to notice how does food make me feel in the moment? Does it make me feel full? Does it make me feel satisfied or not? Sometimes we'll eat something and immediately we'll know that does not agree with me. Something that some of my clients notice as they age is that red meat doesn't agree with them.

And so what I do with my clients is we start to look at things on three different tiers of listening to your body. First of all, is the how does food make me feel in the moment? Does it keep me satisfied or not to move on to the next meal? But then the next phase from that is also moving out a little bit and starting to notice, like when I have dairy in my diet, for example, I exhibit these symptoms, versus when I get rid of it then I don't have as much joint pain, for example. Dairy can be an irritant for joints.

Jill: Oh, interesting. That explains a lot. I did not know that.

Elizabeth: Yeah, it's possible. And then, like on the macro level, talking about hot flashes, for example. One of the ways that I manage my own hot flashes is that for a month I cut out all sugar and flour and then I started to add it back into my diet. And for everyone, we have what's called this starch tipping point. It's the amount of starch that we can have in our diet without having symptoms from it.

And so I started adding one to two servings of flour and sugar back into my diet. And when I started getting hot flashes again I would just back off a little bit. And so now I know that I can have like two to three servings of flour and sugar in my diet per week before I start exhibiting signs of hot flashes and night sweats.

Jill: Interesting, yeah

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Elizabeth: Yeah.

Jill: So and I love how individual it is, right? Like, you're like, no, you're just going to be an experimenter on your own body and figure out what your information is. I mean, I do this with my runners. They're like, what's the best heart rate? I'm like, no, we got to figure that out, right? I can't just tell you. I can't just tell you what the best running shoe is. Everyone's shoe is different, everyone's feet are different.

So it's the same thing, I can't tell. Like somebody else might be able to tolerate two to three servings a day or more, and somebody else might be able to tolerate zero and you don't know that until you figure it out for yourself.

Elizabeth: Exactly, yeah.

Jill: And then still always get to choose the consequences if you want to.

Elizabeth: Exactly, 100% yeah.

Jill: Yeah. I love that. Okay, this has been like a really awesome discussion. Is there anything else that we didn't cover that you want to make sure people know?

Elizabeth: I don't think so. I think we've covered a lot.

Jill: We have covered a lot. So where can they find you? How can they find you? How can they work with you if they want to? All the things.

Elizabeth: Yeah, so my website is elizabethsherman.com. I have been following Jill and doing all sorts of reels and trying to copy you, because

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you are freaking amazing. You completely inspired me to get into reels. So I've started doing that on Instagram. My handle there is ESherman68. And then you can also find me on Facebook at Total Health by Eliz.

And yeah, I have some really amazing tools that I give for free. One is that 8 basic habits guide and checklist, you can find that through elizabethsherman.com/habits. And then I have a bunch of different webinars.

And, of course, there's my podcast, Don With Dieting. And I just give all of my best stuff there because I started my podcast so that I could teach my clients between sessions. So you're getting all of the information that I was going to tell my clients.

Jill: I love that. All right, well thank you so much for joining me today.

Elizabeth: Thanks for having me, this was so much fun.

Jill: Yes, as always. We always have a good time together.

Hey, real quick before you go, if you enjoyed listening to this episode, you have got to check out Up And Running. It's my 30 day online program that will teach you exactly how to start running, stick with it, and become the runner you have always wanted to be. Head on over to notyouraveragerunner.com/upandrrunning to join. I would love to be a part of your journey.