

Hot-flash fitness

An Ottawa-area therapist and her trainer have developed a unique exercise program to battle menopausal symptoms

By Julie Beun , Canwest News Service February 26, 2010 [Comments \(2\)](#)

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Head trainer Jennifer Hicks runs a fitness program called Hot Flash Fitness in Carleton Place, Ontario. Hicks is pictured with menopause expert Dr. Jane Blouin (pink shirt), who advocates fitness over hormones.

Photograph by: Pat McGrath, Ottawa Citizen

For a former figure skater, Dr. Jane Blouin's performance on the Rideau Canal two winters ago was abysmal.

Always athletic -- she was an Olympic-level equestrian, an avid downhill racer, as well as a skater in her younger years -- the then-52-year-old cognitive therapist could barely muster the energy to keep up with the old folks gliding on Ottawa's favourite public rink. Although she had been working out every day, "I was just dragging myself along," hampered by an energy-draining litany of menopause symptoms: bone-deep fatigue, weight gain, poor sleep, irritability, mood swings and hot flashes.

That was then. Two weeks ago, Blouin strapped on her picks once more, accompanied by her athletic husband and co-therapist, Art Blouin. "I was beating him up and down the canal," she says, barely containing a laugh. "I was shocked that I was ahead of him . . . at how much more strong and energetic I am."

Her secret? A unique exercise and lifestyle program designed for -- and by -- menopausal women. Initially a casual idea

dreamt up by Blouin and her personal trainer, Jennifer Hicks, the program Hicks eventually dubbed Hot Flash Fitness now helps otherwise sedentary women uncomfortable with the idea of “working out next to skinny 25-year-olds,” says Blouin.

Set in a group environment at Ottawa’s Heritage Fitness, the regime is designed entirely to manage menopausal symptoms, improve bone density and, through a 15-minute educational portion, explore everything from sex education to sleep deprivation.

For Blouin, the difference in her health has been as transformative as menopause itself.

Two years ago, she began to notice a surge in symptoms -- hot flashes, fatigue, moodiness, irritability. “You name it, I had it.” Although put on a very low dose of plant-based hormone-replacement therapy, she still suffered. “As my own symptoms increased, and with my knowledge of women’s health, I wondered if there was a more specific approach,” says Blouin, who is co-director of the Ottawa Centre for Cognitive Therapy. During one of their regular training sessions, Blouin asked Hicks if she could devise a menopause-specific exercise regimen.

Hicks had experienced menopause from age 40 and knew just what to do. Before long, Hot Flash Fitness had morphed into an eight-week program -- now so popular, Hicks says she expects the next session at the end of March will be sold out.

That’s because the program works. By focusing on menopause-specific exercises such as balance, strength and flexibility training, plus weight-bearing to counteract the effects of osteoporosis, Hicks says her clients sleep better, build muscle, and increase flexibility, which declines with age. The key is to recognize that, with age, recovery from exercise takes longer, so “you need to make your cardio workouts shorter, and perhaps more intense, twice a week.” To combat the worst of estrogenic bone loss, she adds, use heavier weights, but maybe 10 repetitions, and do a circuit twice a week.

“By the time they’re menopausal, women also get what I call the ‘meno-pot,’ because they don’t know how to activate their transverse abdominal muscles, so you need to do functional core work, like a plank, rather than crunches,” says Hicks. “With all of my programs, we’re looking at posture, so we work on the stability balls, which put your spine into neutral.

“You may exercise all the time leading into your 40s, but people get into a rut, so you need to revisit what you’re doing in the gym.”

Hicks also encourages clients to eat five small, 300- to 400-calorie meals, featuring protein and monounsaturated fat, to maintain brain function and even out blood sugar and hormone production throughout the day.

Hicks may be on to something. Although researchers have yet to nail down the exact mechanism that links exercise to an easing of all menopausal symptoms -- except for those related to estrogen, such as vaginal dryness and hot flashes -- evidence is mounting. A 2006 study at Spain’s University of Granada found that after a yearlong, three-hours-a-week exercise program, the number of women who reported severe symptoms dropped by a quarter. Another eight-year study at Temple University in Philadelphia found that menopausal women who exercised regularly had significantly less stress and could better cope with the changes. But not all exercise has the same effect. University of Salzburg researcher Alexandra Sanger found the most effective regimen is a slow version of hypertrophy, a method of resistance training designed to induce muscle growth.

For Blouin, who has gained a few of the typical menopause-induced kilos, but has dropped a dress size due to her fitness program, the evidence is in how she feels. “My husband would tell you I’m less irritable, my posture has improved, my energy level has dramatically improved, my strength and sleep have improved,” she says. “I’m back to being me.”

Women who either can’t or don’t want to take hormone-replacement therapy still have options to manage their symptoms. Here are a few natural alternatives. Always seek medical advice before trying any natural remedies.

Black cohosh: Related to the buttercup, the gnarled root of the black cohosh was used by Native Americans to treat reproductive problems. Similar to estradiol, black cohosh may be useful for vasomotor symptoms, such as hot flashes and night sweats, as well as mood swings and irritability. But it comes with baggage. It can interfere with HRT, birth control, high blood pressure and sedative medications, has some side effects and shouldn’t be taken for more than six months at a time.

Chasteberry: Once taken by monks in an attempt to put a lid on their libidos, chasteberry is now widely used in Europe to treat PMS, breast tenderness, irregular ovulation and period-related acne. Some literature suggests it works by stimulating the pituitary gland, and thus, the production of the luteinizing hormone, so ovaries produce more progesterone. For menopausal women, when combined with black cohosh, it may alleviate hot flashes, sweating and vaginal dryness.

Phytoestrogens, estrogenic isoflavones, calcium, vitamins D and E: Phytoestrogens can be found not only in soy products, but flaxseed, whole grains, apples, nuts, celery and parsley; isoflavones from soy-based products and legumes found in typical Asian diets have been linked to a lower incidence of hot flashes in Asian women. The amino acid tryptophan, better known as the turkey drug for its soporific effects after Thanksgiving, eases insomnia and depression and is

found in peanuts, turkey, chicken and milk.

To combat osteoporosis, try calcium-rich foods such as broccoli, bok choy, yogurt, soybeans, tofu, low-fat cheese, fresh beans, kale, salmon and milk. A recent study by the University of Toronto's Calcium Research Laboratory also found that a combination of calcium and vitamin D taken with Greens+ supplements by Genuine Health was four times more effective at stimulating osteoblasts, or cells that build and repair the internal micro-architecture of bones.

To reduce the worst of hot flashes, night sweats and vaginal dryness, try vitamin E-rich foods, such as almonds, mangos, peanuts, sunflower seeds, avocados and broccoli.

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