



Hormone Harmony

Module 1: Understanding the Hormonal Transition

The Evolution of Hormones



Hormones don't disappear at midlife; they evolve. And understanding how they change is the key to reclaiming your rhythm.

What is Perimenopause? What Happens in Post-Menopause?

Perimenopause is not the moment your period stops. It's the years leading up to that point, a hormonal transition that can start as early as your mid-30s and typically intensifies in your 40s. During this time, oestrogen and progesterone levels become more erratic. You may ovulate one month and not the next. This inconsistency leads to many of the symptoms commonly (and confusingly) dismissed as "just stress" or "just aging."



You may still get a period, but your cycle might shorten, lengthen, or become heavier or lighter. You might feel tired but wired, notice sudden weight gain, or experience mood shifts without explanation. These changes aren't in your head; they're hormonal.

Menopause is defined as the point at which you've gone 12 consecutive months without a menstrual cycle. After that, you enter post-menopause, a stage that continues for the rest of your life. Although hormone levels stabilise somewhat, they remain low. While some symptoms may ease, new vulnerabilities can emerge, including an increased risk of bone loss, cardiovascular disease, and cognitive changes. The good news? Understanding these changes allows you to make better choices, nutritionally, emotionally, and physically, that support your energy, weight, sleep, and mood long after your periods have stopped.

The Big Four Hormones and How They Shift Over Time

- **Oestrogen:** Peaks and valleys become more unpredictable in your 40s. Oestrogen can swing high one month (causing heavy periods, mood swings, and bloating) and drop low the next (leading to dryness, poor sleep, and low mood). Post-menopause, levels drop and remain low.
- **Progesterone:** This is typically the first hormone to decline, often starting in the late 30s. Because it helps with calming, sleep, and balancing oestrogen, its loss can lead to anxiety, poor sleep, and PMS-like symptoms, even if your period is still regular.
- **Testosterone:** Slowly declines over time but may dip more noticeably around menopause. This affects strength, confidence, sexual desire, and overall vitality.
- **Cortisol:** This stress hormone can become overactive during perimenopause if your system is under pressure. Elevated cortisol disrupts sleep, increases belly fat, and competes with other hormones like progesterone.



The Big Four

Hormone	What it Does	Low Levels	High Levels	How to Support
Oestrogen	Supports bones, skin, and regulates cycle	Dry skin, fatigue, and low mood	PMS, bloating, heavy periods	Cruciferous veg, flaxseeds, healthy fats, and reduce alcohol
Progesterone	Calms, supports sleep, balances oestrogen	Anxiety, insomnia, PMS, irregular cycle	Sluggishness, bloating	Reduce stress, and magnesium, create a wind-down routine
Testosterone	Reduce stress, and magnesium, create a wind-down routine	Low drive, low energy, poor muscle tone	Acne, unwanted hair, and aggression	Strength training, healthy fats, protein, and set clear boundaries
Cortisol	Regulates stress, blood sugar, and energy	Burnout, low energy, flat mood	Belly fat, anxiety, wired-tired sleep patterns	Breathwork, balanced meals, rest, stress-reducing rituals

The Four Phases of the Menstrual Cycle

Even if your cycle is irregular or has ended, understanding these four phases can help you reflect on how your body may still follow a rhythm:

- **Follicular Phase (Day 1–14):** Starts on the first day of your period. Oestrogen begins to rise, bringing more energy, mental clarity, and optimism. It's a good time for goal-setting and creative work.
- **Ovulation (Around Day 14):** Oestrogen peaks, and testosterone rises briefly. You may feel most magnetic, energetic, and socially confident.
- **Luteal Phase (Day 15–28):** Progesterone takes the lead. This is your body's natural slow-down window. Rest, introspection, and gentle movement are key. If progesterone is low, this is when symptoms tend to flare.
- **Menstrual Phase (Day 1 of next cycle):** All hormones are at their lowest. It's a time for rest and renewal. Tune into your needs and go gently.

Blood Sugar, Stress, and Hormone Health

Midlife hormone shifts make women more sensitive to blood sugar imbalances. When insulin levels spike or crash, they can trigger inflammation and elevate cortisol, both of which disrupt the balance of oestrogen and progesterone.

Skipping meals, eating too many refined carbs, or living in chronic stress mode can worsen symptoms like fatigue, anxiety, and weight gain. Stabilising your blood sugar through protein-rich meals, regular eating windows, and daily movement is one of the most powerful things you can do to support hormonal balance. Cortisol and insulin influence each other. An imbalance in one often leads to dysfunction in the other, affecting overall hormonal stability. Learning to manage your stress gently, rather than powering through, is a game-changer.

When to Test and Why?

Testing helps provide clarity when symptoms are confusing. You might consider:

- Saliva or urine hormone testing to measure active hormone levels.
- Blood tests to check for deficiencies (like vitamin D or B12), thyroid function,
- or blood sugar markers.
- DNA Hormones testing for personalised insight into how your body detoxifies
- oestrogen or produces cortisol.

Testing isn't always essential, but it can offer confirmation, direction, and peace of mind, especially when you're not feeling like yourself.

Case Study: Leanne

From Burnout to Balance

Leanne, in her early 40s, arrived feeling emotionally flat and physically drained. Her cycle was erratic, sleep was broken, and she was leaning on caffeine and wine to get through the day. She hadn't tracked her cycle in years and had no idea her hormones were out of sync. Her main symptoms were fatigue, mood swings, low libido, and weight gain. After exploring her history and habits, it became clear that cortisol was high, progesterone was low, oestrogen clearance was poor, and testosterone was depleted.

Over three months, we:

- Prioritised a consistent morning routine: hydration, light movement, and
- breathwork.
- Balanced blood sugar with protein-rich meals and removed meal-skipping.
- Replaced high-intensity evening workouts with walking and restorative yoga.
- Added magnesium, B6, zinc, and cruciferous vegetables.
- Reduced alcohol and reintroduced strength training.

The result? Better sleep, fewer PMS symptoms, restored libido, and a regular cycle. Most importantly, Leanne felt empowered again. As she said, "I feel like I've woken up."