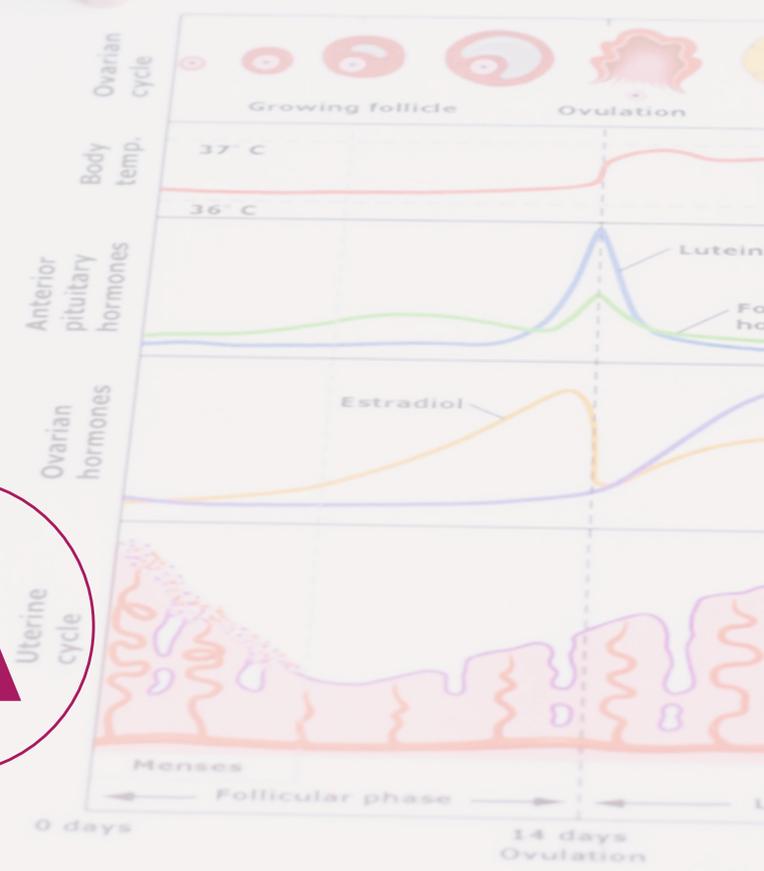




# PERIMENOPAUSE PRIMER

**DR. LAURIE ALPERT**  
PERIMENOPAUSE WITH CONFIDENCE *md*



## DISCLAIMER

This Primer is for educational purposes and is not considered medical advice. Nothing in this document is intended to diagnose, treat, or prevent disease. Please consult a qualified healthcare professional for guidance on how to best support your specific concerns.



# HI, I'M LAURIE

A Naturopathic Doctor and Certified Menopause Society Practitioner helping you navigate perimenopause with more confidence, clarity, choice, and connection.

If you're wondering how your hormones are impacting your mood swings, insomnia, and body changes you are not alone. Whether your periods are starting to shift, your mood swings are new or familiar, or you just don't feel like yourself anymore, these are challenges I help my patients overcome every day.

I have helped countless people navigate the hormonal fluctuations of perimenopause (and all that comes along with it) with more confidence and comfort. My approach is unique because I offer more than just a prescription with whole person care. It works because of shared decision making and evidence based strategies.

This workbook helps you understand your perimenopause status and evaluate what aspects of your experience might be related to hormonal changes leading up to menopause. Start by exploring this Primer and then we'll take it from there.

**Perimenopause doesn't have to suck!! Let's get started!**

*Dr. Laurie Albert*

# WHAT IS PERIMENOPAUSE?

- 📢 Perimenopause **literally** translates to “**the time around menopause**”
- 📢 Perimenopause is **non-binary**: Anyone assigned female at birth who lives long enough will experience menopause.
- 📢 Perimenopause **varies in length** between individuals and can **span 7-10 years** on average.
- 📢 The **average age** of menopause (day of your final period) ranges from **48-51** depending on the population studies

- Symptoms of perimenopause most commonly begin in one's early to mid 40s, however many people will experience menopause earlier or later than the average meaning perimenopause is possible anywhere between the ages of 30-60.
- Loosely speaking Perimenopause encompasses the years of irregularly fluctuating hormones leading up to and including the 12 months following your final period and is often associated with signs and symptoms ranging from simply inconvenient to outright debilitating.





# HOW DO YOU FEEL?

The following are some of the most commonly reported signs and symptoms experienced during perimenopause. Check all that apply to you.

## **Physical (General)**

- Hot flashes
- Night sweats
- Difficulty falling asleep
- Difficulty staying asleep
- Heart palpitations or feeling of butterflies in your chest/stomach
- Skin crawling/itching
- Headaches
- Bloating
- Weight gain
- Breast tenderness
- Joint pain

## **Brain/Mood/Mental Health**

- Difficult concentrating
- Memory problems
- Increased Irritability
- Increased anxiety
- More depressed moods
- More teary/weepy than usual
- Mood swings

## **Pelvic/Sexual**

- Needing to pee more often
- Leaking urine
- Discomfort or pain when peeing
- UTIs
- Vaginal dryness
- Vaginal itching
- Unusual vaginal discharge
- Increased vaginal infections
- Painful intercourse
- Bleeding after intercourse
- Decreased interest in sex
- Difficulty achieving orgasm
- Decreased opportunity for sexual activity

*\*Of course many of these things can have causes other than perimenopause so the next step is to figure out where you fall on the menopause timeline.*



# THE MENOPAUSE ROADMAP

## WHERE DO I FALL?

To know if how you feel is related to your menopause transition it is helpful to know where you sit on the menopause timeline.

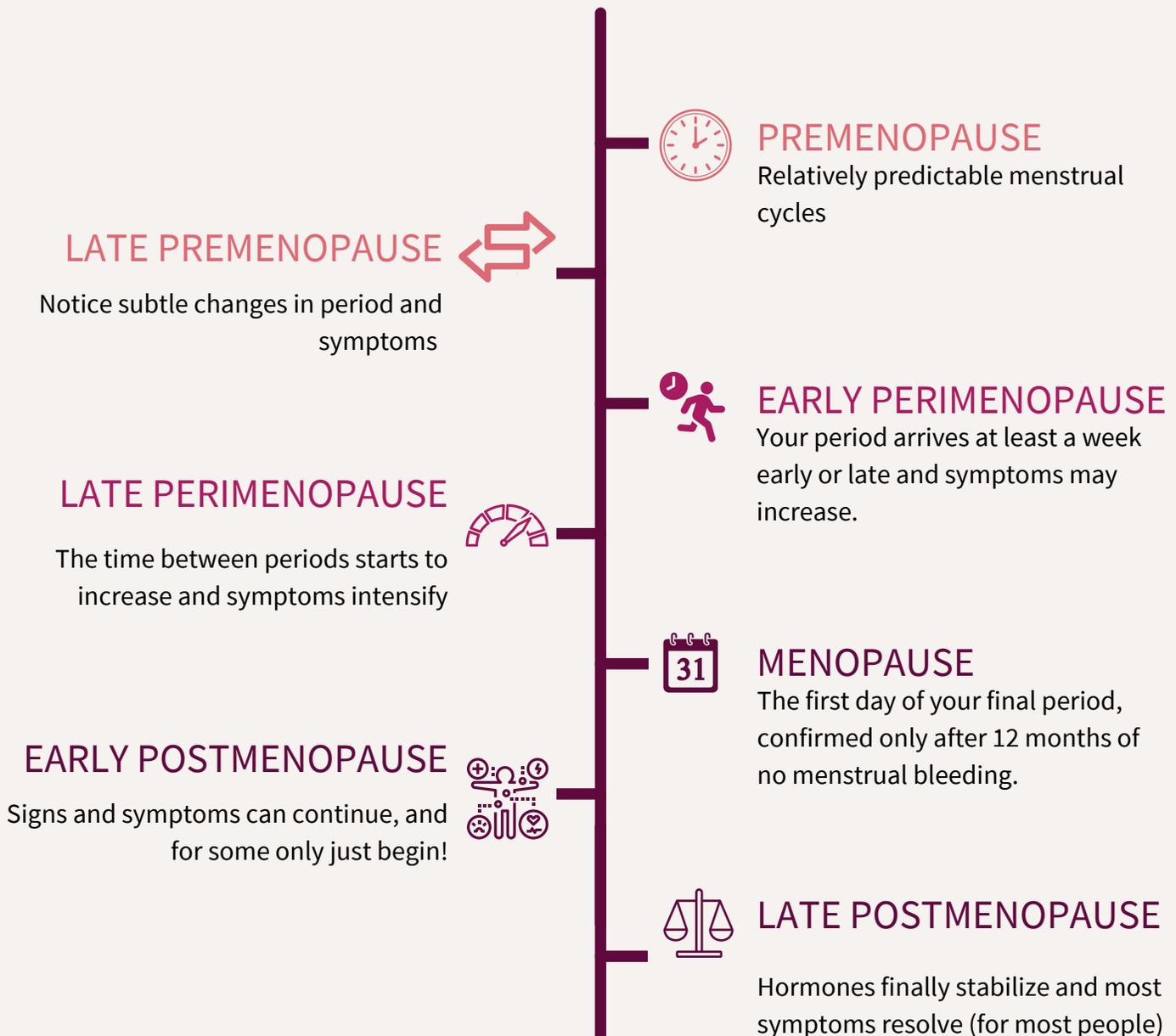
One of the of the key indicators of your menopause status is your menstrual cycle. If you don't already track your cycle you can use an app, or the following worksheet to take note of your cycle trends.

Ideally, collecting several months of data like this can help you communicate your concerns with your care provider and facilitate conversations around what kind of therapies are most appropriate for you.

**\*If you don't have this data yet do not worry, you don't have to wait before seeking support! You can still get help now.**

# THE MENOPAUSE ROADMAP

## WHERE DO I FALL?



# THE MENOPAUSE ROADMAP

## WHERE DO I FALL?



**Premenopause:** Regular and relatively predictable menstrual cycles with or without PMS symptoms.



**Late Premenopause:** You may start to notice subtle changes in period flow or timing, possibly with some mild signs like worsening PMS and more difficulty sleeping in the week prior to your period. It is common for periods to first become heavier and more frequent before becoming lighter and more spaced out over time.



**Early Perimenopause:** Your period arrives at least a week early or late and perimenopausal signs are more common (more volatile mood, increased nighttime wakings, and possibly mild temperature fluctuations).



**Late Perimenopause:** The time between periods starts to increase, with absences of 2 months or longer, and signs and symptoms can continue to intensify. This phase actually lasts until your 1 year anniversary or your final menstrual period (menopause).



**Menopause:** is one day, clinically defined as the first day of your final menstrual period which can only be confirmed retrospectively after 12 months of no menstrual bleeding.



**Early Postmenopause:** The first few years after menopause when signs and symptoms can continue, and for some only just begin!



**Late Postmenopause:** The rest of your years post menopause. Hormones finally stabilize and most symptoms resolve while a small percentage of people may continue to experience things like hot flashes for several years, even decades, after menopause.

### REMEMBER:

There are other reasons than perimenopause why someone would have irregular or absent menstrual cycles that should first be ruled out in a younger people under the age of 45.

# CYCLE TRACKER

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## SYMPTOMS KEY

 Spotting

 Light

 Medium

 Heavy

Acne

Cramps

Cravings

Fatigue

Headaches

## NOTES

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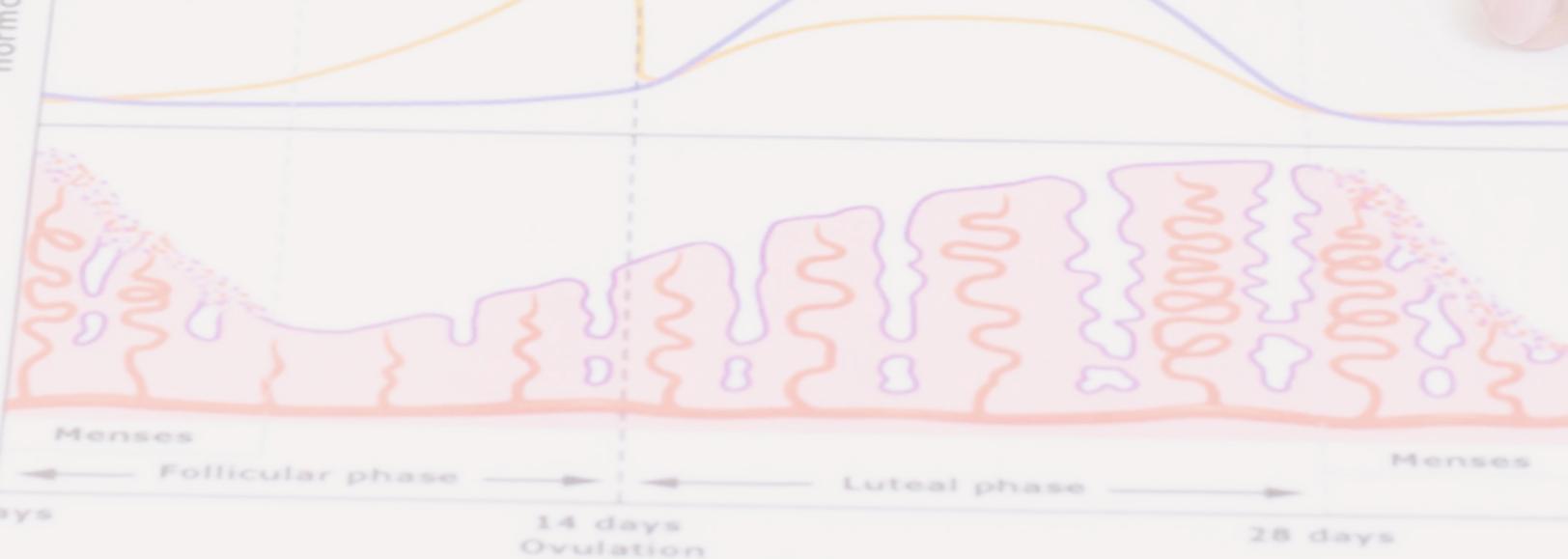
# CYCLE TRACKING

## **CYCLE TRACKING TIPS:**

- ✓ Day 1 is the first day of your period when bleeding begins. Track each day that you bleed and note the general amount and consistency of blood flow. (I.E. heavy with clots, brown spotting, etc)
- ✓ Take note of when your most bothersome symptoms occur during your cycle. Many things like headaches, insomnia, mood changes, night sweats, etc can follow more predictable patterns (although not always) once we start to pay closer attention.
- ✓ Track how many days pass between Day 1 of a period and Day 1 of the following period - this is called your cycle length and is one of the key indicators of where you are on the menopause timeline.

## **OTHER NOTES:**

You may not have a cycle to track if you have a hormonal IUD, or have had your uterus removed. In these cases I recommend you speak to a menopause informed care provider who can help assess your perimenopausal status in other ways.



## NEXT STEPS

Now that you have completed the **checklist and assessed your menstrual cycle** - you have important information that can help guide the conversation around exactly what kind of support you need at this time and through perimenopause.

### MY ADVICE?

Get started today. You don't have to wait until you reach a certain stage of menopause before you seek support. If you checked off anything on that symptom list, it is worth a conversation with your provider.

# I'M HERE TO HELP

I am a Menopause Society Certified Practitioner and Naturopathic Doctor on a mission to help you go from frustrated and overwhelmed by perimenopause to feeling informed and confident in your options and support. I believe menopause care is so much more than a prescription and that this time of vulnerability is also a unique opportunity to start feeling better today and for decades to come.

**TAKE THE NEXT STEP** AND BOOK AN INITIAL CONSULT WITH ME (OR VISIT MY WEBSITE FOR OTHER WAYS TO WORK TOGETHER)

[Book your visit here.](#) You'll get a full assessment, a chance to discuss both hormonal and non-hormonal options, and a strategic plan to set you on the path to start feeling like yourself again.

