

NEWSLETTER

RESOLVE EXERCISE PHYSIOLOGY

WHO ARE WE?

We provide personalised clinical exercise support for chronic conditions, musculoskeletal issues, disabilities and more—helping you reach your health and wellbeing goals. Find us at the back of the RSL, near the big helicopter!

SPRING HAS
SPRUNG
LET'S SPRING INTO ACTION!

Exercising in Your 40s–50s
Midlife strength & Metabolic Health

What changes in midlife?

- Less muscle mass and strength
- More body fat, particularly around the abdomen
- Reduced aerobic fitness
- Greater risk of chronic disease
- Changes in bone density and joint health

What exercise should you aim for?

- 150–300 minutes of moderate cardio per week, OR
- 75–150 minutes of vigorous cardio per week
- Strength training at least 2 days per week
- Adding balance exercises can also help reduce fall risk.

Why strength training matters

- Maintain muscle mass and strength
- Support metabolism
- Protect against injury and frailty
- Maintain independence with everyday activities
- Support bone health

Men vs women

Men: Testosterone gradually declines with age, which can contribute to reductions in muscle mass, strength and fitness.

Women: Perimenopause/menopause brings a significant decline in oestrogen, which can accelerate muscle and bone loss and increase abdominal fat. Sleep problems, fatigue and hot flushes can also make exercise and recovery harder.

Best types of exercise

-  **Resistance/strength training**
-  **Brisk walking**
-  **Cycling**
-  **Swimming**
-  **Functional strength exercises**
-  **Mobility and flexibility work**

Bottom line:

Midlife strength and fitness is an investment in your future health.

WOMENS HEALTH WEEK MONDAY SEP 7 - SEP 11

This year's theme, **"DO IT ANYWAY"**. This week is a reminder to all women to prioritise their health and wellbeing by remembering;

o **TO FUEL** – Food is fuel. But sometimes eating well can feel like one more thing on an already long list – too expensive, too time-consuming or just too hard to get right. Get back to basics.

o **TO MOVE** – Being active is not just for people who love the gym. It's for everyone – in all bodies, at all life stages and in whatever form that fits your day

o **TO REST** -Rest shouldn't have to be a reward. It's important for your health.

o **TO BREATHE** -Your mental health is just as important as your physical health

o **TO CONNECT** – Celebrate the power of human connection in all its forms. The small steps to finding connection – the voice message to a friend you haven't spoken to in a while, the community group you've been meaning to try or the coffee with a neighbour.

Women's bodies are extraordinary and we should take care of them.

Menopause & Beyond , Muscle & Bone Health

Your bones are made of living tissue. Your body builds new bone tissue to replace old bone tissue in an ongoing cycle throughout your life. Hormones, such as estrogen, help to maintain bone strength. Around the time of menopause, there's a big drop in estrogen levels. This is when women experience the most rapid bone loss.

- Menopause → lower oestrogen → faster bone loss and muscle loss.
- Bone health: Strength training 2–3x/week + weight-bearing/impact exercise 3x+/week.
- Muscle health: Women are at increased risk of sarcopenia after menopause – loss of muscle mass, strength and function.
- Physical activity is the best way to prevent and manage sarcopenia.
- Calcium is a major component of bone – around 99% of the body's calcium is stored in bones.
- Vitamin D helps the body absorb and retain calcium and supports bone and muscle health.
- Balance training: Helps reduce falls and fracture risk.
- Big takeaway: After menopause, progressive resistance training + weight-bearing exercise are key for maintaining muscle, strength, bone density and independence