

Stephanie  
Dodier

Podcast Episode # 9

**TBTFS - 009 - Cracking the conversation on menopause with the menopause chick Shirley Weir**



*the*  
BEYOND THE FOOD  
*Show*

WITH STEPHANIE DODIER

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Stephanie: Welcome to episode 9.

Do you believe that everything happens for a reason? I use to not believe so for years, till about the age of 37, 38 when I went through my home healing in health crisis in my life.

For years attempted to control nearly everything in my life because crisis frankly, I can control what's inside of me so my attempt was control everything outside of me, and if I had control then I would be better.

And then health crisis happened in my life and I have to find the reason why such thing would happen to me. And I tripped over a book and I wanted to share that with you today, it's called "Zen and the Art of Happiness" and I will link to it in this show note. It's a tiny little book, not even a hundred pages. And it completely changed the way I looked at things that happen in our life and why they happen, and how to find the good out of things that maybe difficult at time.

And that's exactly what we're going to talk about today with our guest. We are going to talk about a different way of looking at menopause, because let's face it, all of us woman at some point we are going to go through menopause.

What about if there was an actual positive reason why menopause would be in our life? What about if menopause was just not about going through a hell of a time, but actually going through something positive? So that's the episode.

Are you ready? Let's do this.

Shirley Weir introduces herself as a 49-year-old menopause chick. Shirley's perimenopause journey began 10 years ago. Sore boobs, sleep deprivation, depression and brain fog initially led Shirley to her doctor's office, the bookstore and my favorite Dr. Google, but she was last feeling confused, overwhelmed and alone.

At 46, she created the [menopausechicks.com](http://menopausechicks.com), a mission-based platform that empowers women to talk openly about perimenopause and menopause, navigate midlife health information and connect to professional who can support their journey.

So welcome, Shirley.

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Shirley: Thank you. Hi.

Stephanie: Hi. I was saying to you before we start that I'm so excited to have you here.

Shirley: Thank you.

Stephanie: I'm very excited for my followers to get introduced to your work, because I think it's going to be a life-changing for my girls.

Shirley: Well let's leave up to that.

Stephanie: Yeah. I first met you online when I was doing research for one of my upcoming program on menopause and I found your group, and I started to participate. And it's like, "Oh my God, this is finally a group about menopause that doesn't just whine all the time, they're actually something positive in it." And that's how I started my journey with you. So tell me a little bit more about Shirley and the menopause chick, and how this whole thing began for you.

Shirley: Shirley: Sure. Well first of all, thank you for having me. I can't wait to interview you actually, but I will tell you about menopausechicks.com. I originally began with the mission of simply cracking open a conversation because I found that the word "menopause" could shut down the cocktail party rather quickly. I even found that with my close girlfriends some of them didn't like the word; they didn't want to talk about it. And I got a lot of "whoa I'm not there yet" as if 50 was like the appropriate time to research your own health, and I became very curious about that. And so, when I launched Menopause Chicks 3 years ago, it was simply to crack open a conversation because I felt that if we talked about it and that women could get informed, and find the journey that was right for them, then that would be the answer. However, as I got into it, what I learned is it doesn't take brain surgeon to figure out that every bookstore, magazine article, Google search, comes up with something negative around the words perimenopause, menopause and midlife. And so, my mission has evolved, it's not just to crack open a conversation but it's really to change the conversation. Because I believe wholeheartedly with myself and with a lot of the women that I speak to on a daily basis that the real work begins with us and changing our perception and the stereotypes around this natural transition. Having said that, there are many women, who are currently have their world rocked upside down and they need support. And so, you know, part of my role is to help them find the support and find the journey that's right for them as well.

Stephanie: That's amazing. How did you say in your bio that it started at 39 for you? So how was your own journey through menopause?

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Shirley: Sure. So I reached menopause in 2016 actually at the age of 49, menopause is just one day. It's the 12-month anniversary of your very last period. Looking back at 39, I was having, I would say maybe mild to medium experiences, but the thing was I didn't know what was happening to me. So yes, my boobs hurt but then that went away after I figured out that I was indeed not pregnant again, but I've later learned that is a very common experience for perimenopause. I didn't know anything about that. I was also very busy running a business, running a family as women are in their mid to late-30s, to mid-40s. You know, we're just like really busy people, so I was sleep deprived. I was waking up in the middle of the night, and jumping out of bed and going to work because I thought that's what I should do.

And so chronic sleep deprivation that led to brain fog, which I also found as very common when our hormones just start to fluctuate and perimenopause. So, I thought I had dementia at one point, you know. I just wasn't trusting myself. I wasn't functioning at the level. I didn't feel like me, and maybe some of your listeners will resonate with that. It didn't prevent me from really missing out on anything in my life, but I just wasn't feeling like myself.

And so after doing just a little bit of research, I decided to bring that up with my doctor. And I mentioned to my doctor, "You know, I think I'm experiencing the first signs of menopause." And I love this doctor, she delivered my baby. She's an amazing woman. She looked at me and then she looked at my chart, and she said, "Oh you're 41. You're too young." That's kind of the response I had, I was really embarrassed. I thought "Wow, this is all in my head. I've made this up. Maybe I have dementia thing." Like I was just confused, and scared, and embarrassed, and there was something in the back of my head that thought "I can't be the only woman in the world that's ever felt this way." And so that's really what ignited my initial research.

Stephanie: It's very similar to my "Journey to your own health" that is the power behind your mission right now in the menopause chick.

Shirley: Yeah. I mean I'm just passionate. To be honest with you Stephanie, I have a 13-year-old daughter, and I really don't want her to grow up in a world where she doesn't have the information about her own health, and where she might one day be embarrassed like I was. And I often equate the perimenopausal transition with puberty. Would I let my daughter or my son arrive in puberty without knowing what to expect? No, we would never do that as parents. It just wouldn't happen, and so why would we do that to ourselves.

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Stephanie: So that brings up a great point. Why is it that you think we don't have the information readily available when we have doctor Google and all kinds of information out there? Why do you think menopausal information and perimenopause is not out there?

Shirley: First answer is fear. We've been a fear-based society where media and I've worked in media for 30 years, so I do like to speak out on this though. Media and advertisers into a certain extent, the medical community, the pharmaceutical community has led us to believe that something is wrong, some folks has the answer. And I think through the work that you're doing and hopefully through some of the work that Menopause Chicks is doing that can bridge that gap, because yes, there is definitely a need for pharmaceuticals. There's definitely a need for the medical community, but maybe it's not all for menopause. Menopause is a natural transition, right? And 20 percent of women sail through perimenopause without missing a beat. And as I mentioned earlier, 20 percent of women sort of really have their quality of life impacted. And then there's the other 60 percent of us who might have experiences that are mildly annoying or disruptive. And we immediately, if what I'm saying is true, then our conditioning with the media takes us to a place of "something must be wrong with me and somebody else must have the answer."

Stephanie: Yeah. It's the whole putting responsibility for your health into somebody else's hands, and therefore they will decide what the outcome is. And currently the outcome of allopathic medicine is pharmaceutical, instead of taking control of our own health and your responsibility in our own life, in our own choices every single day and how much we can impact through our own choices.

Shirley: Yeah. I mean, I am of the belief that the pendulum doesn't have to swing fully to the other side, but I think it has to swing back to the middle. And so, what I like to talk about at Menopause Chicks is encouraging women to be the leader of their own healthcare team, and that we get to decide who's on that team. So, you know, "I see a natural path, therefore I fired my GP." No, it's not that. Don't fire your doctor, but you male also need nutrition.

You may need to explore yoga and meditation. You may need help getting your sleep back on track. So it's really up to you to ask yourself those questions, and decide who you want on your healthcare team but you're in the driver seat. And if that means going to your doctor and getting a prescription to get you out of who you are, then I want to support you in that role. And if that also means just you becoming educated in what to expect and how your body is going to behave, for the next 10, 15, 50 years, then that's part of your role as well.

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Stephanie: Yeah, it's being the CEO of your own health.

Shirley: Exactly.

Stephanie: You got a bunch of vice president under you but you're the one making the call at the very top of it. So, menopause is one day.

Shirley: Yes.

Stephanie: Perimenopause is— from what you said with us—up to ten years prior to that one day.

Shirley: Yeah. I usually say 5 to 15, for me it was 10. Everyone's journey is different, it's really important to underscore that.

Stephanie: Yeah. Not everybody is the same because we don't have the same body, we're not a machine. So it's more than just that our motto change, and from what I heard you say it's also a life transition.

Shirley: Yes. And the term "perimenopause", I think this is really important to point out, it has been around for probably centuries. The term "perimenopause" was coined in the 1990s. Super new and that explains some of what our generation is going through right now in terms of confusing and conflicting information, because your doctor might be interchanging menopause with perimenopause. Your doctor may be under the assumption that as long as you still have a period then this is not a discussion worth having, and that's simply not true. So, menopause one day is a 12-month anniversary after you haven't had a period for a year. Perimenopause is 5 to 15 years of hormone fluctuations leading up to that date. And sometimes those fluctuations are wild or they're rapid, and then they ease off, and then you think, "Oh, did that happen?" Yes it did. And then it might become more intense as you get closer to that one year anniversary.

Stephanie: I think that's brilliant what you just said because based on the doctor you have and based on their own time of education, they may have a completely different perspective than what reality really is. So cracking open that conversation with your doctor maybe different based where the doctor is coming from, I guess.

Shirley: Absolutely.

Stephanie: So, what would be your top 3 advice for women who need to begin and crack open that conversation with their GP or their doctor?

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Shirley: I have lots of tips for that.

Stephanie: Stephanie: Go for it.

Shirley: So, I think that the number one tip... I usually begin this by saying "Don't do what I did" which was, I wanted to mention it to my doctor so I did it at the very tail end of my pap smear. So I've already been in her office for 10 to 12 minutes, and then I bring up a very large topic. And that's not fair to your physician who has a waiting room full of people, and she had no clue that that's what I wanted to talk to her about that day. So my number one tip is to book an appointment to have the conversation with your GP. Another tip that recommend to women is just to simply in how you present yourselves. So, often we walk into healthcare practitioners office, and we wait for them to ask us the question, right? "How many drinks a week do you have?" "How much do you smoke?" "Can you just sit there and you check the boxes?" but you're not really telling your story. If you happen to be in your physician's office and things are ticking along, then maybe you say, "I'm just here because I am on a journey to learn about my own health, and I want to be proactive.

And I want to know what to expect, and I want to know what options are available to me." It might be that situation. Another woman might have a situation where she's actually experiencing things that are causing her concern, and one of those things might be changes to your period. So let's say that you are having heavy bleeding, you can say, "I'm having heavy bleeding." And your doctor might hear you say, "Well that's a normal experience for perimenopause." I mean, when you go down the checklist that they might have in their mind, it's a normal experience. And sometimes if it doesn't last very long, women can transition. No problem, they can put up with that. But you might also be there to say, "My periods are so heavy, it's impacting my ability to leave the house or to exercise. By telling your story to your physician, it gives them clues and information about how they might be able to respond with some possible, either ways to investigate further or possible solutions.

Stephanie: So there has to be a link with the impact that has on the quality of your life and how it makes you feel, as supposed to just giving them a fact.

Shirley: Absolutely. I think they say they're taking a history. As a patient advocate, I try to help women tell their story. So how is it impacting your life? Doctors are scientists, they love evidence. And so, if there's any tracking or evidence that you can bring with you, either to recall and just verbalize it or to even keep a diary and bring that tracker to your appointment.



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Physicians love that because it gives them a picture, and it helps them see, “Oh wow, this wasn’t happening three months ago and now it’s happening regularly” or “It happened three times in the last year.” You know, it helps them digest the story and the information.

Stephanie: And put some colors and graving of how sever the symptoms are. And that has the key point of making a whole appointment to be around that and come prepared with information, with fact, with how it impacts your life so you can have a more “serious” discussion where you will feel heard, as supposed to just beyond the corner of the table as you leave the office.

Shirley: Those are tips that I offer. I still think that it’s important that women really know for themselves what they expect from that appointment. Because I did hear from a woman just a week and a half ago, she said, “Shirley, I took all your advices. I booked a special appointment. I left work early. I paid for parking. I got into the appointment, and the doctor wrote a website down on a piece of paper, toward the corner of a piece of paper and handed it to me.” And she was like flat out over disappointed. So now, you know, she felt like she’s backtracking and having to revisit. So it’s really important for patients to say, “I am here today, this is what I’m looking for. This is what I expect from you.” And know that you may get it, you may not get it.

Stephanie: And if she don’t get it, what do you do?

Shirley: Then you have other resources, other disposal. I mean, I would welcome everybody to contact me or to join my Facebook community. But, I mean, that’s not the deal. Or ask girlfriends, talk about it, whatever you do don’t stay silent. Never in silence if that’s something that you’re doing, because you deserve quality of life.

Stephanie: Yes. And that’s the exact same thing that I say to people when it comes to general health. When we start to be conscious of this whole responsibility that we have towards our own body and towards our health, often it impacts the relationship we have with our existing healthcare practitioner family because maybe for the past 20 or 30 years, we let them be in-charge. And all of a sudden, we have this awakening in our life, now we become in-charge and the relationship between us and them no longer responding to our needs.

Shirley: Yeah. I mean there’s something good news happening in the sector. I see more and more integrated health locations, so I’m encouraged by

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that. You know, the next popping up where there's a GP, a naturopath, a massage therapist, a nutritionist. And they're all working out of the same office that gets me really excited. It's not the norm yet, but I think that if we can just flip who's driving the bus, you're driving the bus for your own health. You're the leader. You're in the driver seat. People may come on to that bus at different times in your life and get off as well.

Stephanie: Yes. And I'm going to go to a little bit of another topic but still related to menopause. Again, I was doing some research and I was reading a stat that kind of outlined the whole situation with regards to how we live perimenopause and menopause. And the statistic was showing that 70 to 80 percent of the women in western society experience what is commonly known as "hot flash". And then when you look at non-western societies such as India, Indonesia, even South America, only 10 percent of the women experience what is known as hot flashes. Why do you think that is, Shirley?

Shirley: Well I am not a scientist or a medical expert so this is my own personal opinion. I believe that the level of stress, lack of sleep, the amount of new toxins that are food that we consume, I believe that those things and probably a whole list of others are contributing to hormone imbalance, possibly contributing to why girls are getting their periods earlier, why they be experiencing earlier or more intense experiences in perimenopause. All that I just said is a pure personal hunch, but yeah, that would be my answer to that.

Stephanie: I would have to agree with you. But although this is disturbing, it's also a very positive one because it gives us hope that those symptoms that we're living through can actually be significantly reduced if we do some lifestyle change or nutritional change into our life. So we can breeze or ease through this perimenopause and menopause much easier than what we think at to be or hot to be.

Shirley: I'm encouraged by that as well. I'm also encouraged about the placebo effect. I mean, you gave a stat which is a fairly high stat of women in North America who experience hot flashes, is that we're conditioned to expect, to experience hot flashes? I don't know. I mean, I could take us way off down in tangent with topic, but yeah I believe in the placebo effect. I believe that if someone tells you that this will have a positive effect on you... And most of what I talk about in Menopause Chicks, if we can flip the conversation and change the way we think about it, it will significantly impact our experience.

Stephanie: And that brings me to the whole topic of the mind-body connection, and that's the whole piece of what I do "The Beyond the Food Show" is to,

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yes, it does start with food but there's so much more to this. And menopause is also very much tangled and that there's much more than just hot flashes and hormonal imbalance that the transition of your mind, and body, and your soul through another face of life. Would you agree with that?

Shirley: I totally agree. I see it as a rebirth almost. I mean to get really spiritual... At the turn of the last century, women live to be 50, and now we plan to live to be a hundred. So, menopause is really just that midway point, it's the time where we are saying goodbye to life stages - the reproductive stage to be specific. We might be saying goodbye to other things. We might be saying goodbye to our last career, or last spouse, or our children leaving the house, all those things, and we're saying "hello" to the other half of our life. It's very exciting.

Stephanie: It's not that certificate that you're getting old and you're about to die, it's a rebirthing process and that is a beautiful phase of your life.

Shirley: Totally yeah. Who doesn't love a fresh green slate, right?

Stephanie: Yeah. And I like to say my rebirthing for me happened at the age of 36 when my help knock me in the back of the head and threw me through the ground. I had to reinvent and rebirth myself in something totally different. It was scary as anything I have done in my life, but I can tell you that this whole rebirthing is an opportunity for you to become who you want to be. And in menopause, perimenopause transition, it can also be that, only if you are even introduced to be such thing because many women are not introduced to that.

Shirley: So I do like to say that if we could get together, and if we have the ability to park some of the inconvenient experiences because I want to meet women where they are, and sometimes you have to meet them where they're in that disruptive stage. But if we can park those to the side just for a second and also realize that midlife is shining a big bright spotlight on who we want to be, that those things can live together, right?

Stephanie: Yeah. The whole transition of your physical body while your soul, your spirit, your mind, your emotional body, whatever you call it, evolves on the same trajectory as your physical body.

Shirley: Yeah. That's very exciting.

Stephanie: I think it's very romantic way of looking at menopause.

Shirley: Yeah. But it doesn't look good with romance.

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Stephanie: Yes. One last question before we end this, what is the top 5 myths that you would say are what woman believe menopause or perimenopause to be about but in fact is not true?

Shirley: Oh geez, I don't know about five. There are so many myths and stereotypes that menopause means you're old. It means you're tired. It means that you don't want to have sex anymore. There are lots of those myths but I think that probably the biggest thing that we need to demystify that it doesn't just mean those things. So what I mean by that is, we need to stop thinking about it as if it's something nasty that's out there, and start having conversations about "Hey this is important" because it affects 100 percent of women. But if you only think about it in a negative tone, women are inclined to say, "Oh, that doesn't have to do anything with me." You know, put their hand in my face, and say, "Oh, not there yet." Well but you're going to be there, so don't you want to learn about what that transition looks like? And what it means and what it could mean for you. And so, I think that part of the demystifying is really about redefining and reframing, because we can't change the word but the word typically comes with negative baggage. And if we can open that up, or as I'd like to say flip it around and say "Yeah, we'll navigate the challenges together, and then we've got a whole bunch of things that we can start to celebrate."

Stephanie: Stephanie: Yes. I was reading about you celebrate your menopause with the graduation party, didn't you?

Shirley: With myself a party.

Stephanie: Oh that's so cool, I loved it. And that's what we do in certain culture with puberty, right? When girls have their first menses, we throw a party for them because they've now become a woman. Why don't we do the same thing with menopause?

Shirley: Well let's do it.

Stephanie: Yes.

Shirley: Yeah. I did it for my 1 year anniversary the other day. I was thinking, maybe I just need to throw a party every year, and whoever wants to jump on the call or come over I'll make you a cocktail.

Stephanie: We should do that, life call with everybody to just celebrate your second, third, fourth, and fifth year. So question that I ask everyone that is on this show, I teach a lot about having ah-ha moments. You know, when you have that moment that things click, for you what was the ah-ha moment that



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taught you that there was more than what you knew about menopause? If there was a connection between the mind and the body, and you could alter the future if you only change your mindset.

Shirley: I was given the gift of my ah-ha moment someone I believe was in her early-20s. So shortly after I had launched Menopause Chicks, of course I've done a lot of research and a young reporter called me one day. And she started asking questions that I was so excited to tell her everything that I have learned about menopause and perimenopause, and I was just talking, and talking, and talking. And she interrupted me, and she said, "Wow you sound like the smartest you've ever been." And no one had ever said that to me, and I certainly didn't feel very smart because I was on such a steep learning curve. But after a few days or weeks, I can't remember, but I started to think about her words. And I thought, you know what, I am moving into a new phase of my life, and I am smart, and I am confident, and I am beautiful. I just started to rephrase the way I talk to myself. And that's when I realize that this is way more than menopause. This is about the rest of my life.

Stephanie: That's an amazingly beautiful story. And I'm sure many things changed after you have this ah-ha moment for you in your menopause journey.

Shirley: What changed?

Stephanie: Yeah.

Shirley: My relationship with my husband, my relationship with my kids, what I wanted to do for my career, for my work, and my contribution, yeah everything kind of changed after that.

Stephanie: Because you shifted from a fear-based to a love-based approach to perimenopause and menopause.

Shirley: And I still went through some tough times after that, but I surrendered myself with resources that could help me and lift me through that tough times. And now it's kind of like I can reflect back on that as, "That was growth. That was the cocoon that was really tightly round-up."

Stephanie: And that, we're going to slide into the next segment which is all about what you do now is offering that community to uphold women to go through this journey. So how can we reach you? How can we get that support that you're talking about?

Shirley: Sure. So I have a website [menopausechicks.com](http://menopausechicks.com), and I'm on social

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media @menopausechicks. And earlier this year, about six months ago, I started a private online Facebook group that you can find on Facebook. Just type in Menopause Chicks and it should pop up, and there are about 2000 women in there right now. The goal of the group is to first of all, educate women on their own health. That would be first and foremost. We encourage women not to make it a beach fest, it's not an opportunity to simply complain although it's the best place to go to, to learn that you're not alone and experiences. And if there are forwards that I type the most, it's that you are not alone and "I am too old. And I found out myself..." That is really comforting and it's healing to know that you're not the only person going through whatever it is that you happen to be experiencing. And then, experts, who pop in from time to time and they moderate the questions, and they provide support and answers. As well as women who had similar experiences support one another, so that's a beautiful thing to watch unfold as well.

Stephanie: That's amazing. So for everybody, if you refer to the show notes, the link to the Facebook group will be in there. It's a private group so you've got to ask to join, and then Shirley will approve you. All of that will be linked in there. And I heard that you did a tech-talk also recently, is that true?

Shirley: Yeah. About a week and a half ago I did a TEDx Talk. I live in Vancouver, and it was called "TEDxGastownWomen". Yeah, I'll be posting that video as soon as I have it. I don't have it yet so... That was so much fun.

Stephanie: I am looking forward to watching that, and can only assume that the topic was about the menopause.

Shirley: Shirley: It was. So the title of my talk was "Menopause Needs a Makeover".

Stephanie: Stephanie: Amazing. So if it is published by the time we put up the show note then will add it to it. If not, by joining Shirley's group, you'll be able to access it. It was an amazing discussion. Thank you very much for sharing your experience, your wisdom, and your positivity around a topic that's too often wrapped up in negativity. I think you're a light to the women that are going through or will be going through these experiences, phase of their life. So, thank you very much for being on this show, Shirley.

Shirley: Good work that you do.

Stephanie: Thanks.

There you have it, a new fresh perspective on menopause. All the links of

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everything we talked about today will be available in the show note at [stephaniedodier.com/009](http://stephaniedodier.com/009). That's where you can also pick up the transcript and the link to join my private community so you can ask question and be featured to our Q&A show. I want to take a moment thank our sponsor for today's show.

Today's sponsor is the Keto Connector Program, a program that will teach you the nutritional foundation that you need. In particular, go through perimenopause, this program will help you stabilize your insulin level and your blood sugar so you can reduce the impact of perimenopause and menopause symptoms.

It is also a program that will help you begin your journey in connecting your mind and your body, and start listening to your symptoms as body messages to guide you in your life journey. The program is available under two options.

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Thank you again. I'm looking forward to serving you in the next episode.