Overview of Post-Menopause:
After menopause, a woman is considered to be in post-menopause the rest of her life.¹ Post-menopausal women are at increased risk for osteoporosis, heart disease and urinary incontinence.² ⁴ ⁵ Exercising can help strengthen bones, improve heart function and prevent accidental urine leakage.

Post-Menopause Health Concerns:
- Osteoporosis
- Coronary artery disease
- Urinary incontinence

Maintaining Healthy Bones:
Weight-bearing exercises prevent osteoporosis by increasing bone strength and reducing the risk for fractures.² Resistance exercises on both land and water can be beneficial for preventing osteoporosis. Aquatic exercises might be the best option for those who have joint pain.³

Try these Weight-Bearing Exercises!
- Walking
- Jogging
- Step-Ups
- Lifting weights while standing²
Preventing Heart Disease:
The loss of estrogen in post-menopausal women may be associated with an increased risk of heart disease.\(^4\) A goal for women should be 150 minutes of moderate physical activity each week to reduce their risk.\(^4\) Talk to a physical therapist for a customized exercise plan to prevent both osteoporosis and coronary artery disease.

**Examples of Aerobic Exercise:**
- Yardwork
- Circuit Training
- Swimming
- Cycling
- Yoga

Managing Urinary Incontinence:
Pelvic floor exercises, such as Kegel exercises, have been shown to be beneficial in reducing urinary incontinence.\(^5\) Talk to your doctor or a physical therapist who specializes in pelvic floor rehabilitation. Treatment from a knowledgeable physical therapist will increase your chances of fixing urinary incontinence associated with post-menopausal changes.

**Authors:** Charlotte Cahill, SPT, Tyler Martin, SPT, Sam Waelde, SPT

**University of Michigan – Flint**

**References:**
5. Maryam Kashanian, et al., Evaluation of the effect of pelvic floor muscle training (PFMT or Kegel exercise) and assisted pelvic floor muscle training (APFMT) by a resistance device (Kegelmaster device) on the urinary incontinence in women “comparison between them: a randomized trial”, European Journal of Obstetrics & Gynecology and Reproductive Biology, Volume 159, Issue 1, November 2011, Pages 218-223.