

LESSON ONE • FREE SAMPLE

# The Perimenopause Guide

*Read your body. Work with your doctor. Build your ninety days.*

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*Menopause is a moment. Perimenopause is a phase.*

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## LESSON ONE

# The corridor: a phase, not a moment

If you had come to my clinic instead of buying this guide, the first thing I would do is ask you to talk. Not in the rushed, symptom-cataloguing way of a short medical appointment. In the slow, thorough way that lets the real picture surface.

I would ask when you first noticed that something was different. Not the first day. Women rarely remember the first day. There was a season, though. A specific month, a particular weekend after which something was no longer what it had been. I would ask what changed. Sleep often goes first. Or mood. Or the way your body holds weight. Or the way your cycle arrives. Or stops arriving. Then I would ask what you have already tried, what worked and what did not. Whether your periods in your twenties were easy or hard. How many children, how many pregnancies, how many losses. About iron. About alcohol. About the year your mother went through menopause and what she told you about it, if anything. I would ask all of this not because I need the information in a clinical sense. A form could give me that. I would ask because the pattern is already there in how you tell the story. By the time you have finished telling it, I know most of what I need to know. So do you, if someone helps you see it.

That conversation is what this guide tries to give you, in print form, over these pages. It is slower than an appointment. It asks more of you. Still, it lets you sit with the information in a way a consultation cannot, and by the end of it you will know things about your own body that most women never discover. I want to begin with the part most women have never been told plainly. What perimenopause is.

### **Menopause is a moment. Perimenopause is a phase.**

These two words get used as though they mean the same thing, and the confusion causes real harm. Let me be precise about them, because the precision matters.

Menopause is a single point in time. Diagnosed after the fact, twelve months after your final menstrual period. That is the definition. A moment, not a stage. The day you reach twelve months without a period, you have passed through menopause. The day before, you had not. A day. Not a year. Not a decade. Perimenopause is the phase. The transition that leads into

menopause. During perimenopause your ovaries produce less estrogen and progesterone by degrees, but the decline is not orderly. Your hormones shift without pattern. A blood test on Tuesday can look nothing like the one on Friday. One cycle looks like your old cycles. The next looks like nothing you have seen before. This phase can last anywhere from four to ten years for most women. For some it is shorter. For others it is longer.

Postmenopause is everything after. The rest of your life, from the day of menopause on. A woman in postmenopause is no longer in transition. Her hormones have found a new, lower, more stable baseline.

If you hold only one piece of information from this page, let it be this. When women talk about going through menopause, most of them are talking about perimenopause. The hot flashes. The sleep disruption. The mood shifts, the cognitive fog, the cycle changes, the libido changes. The weight that moves to your middle, the thinning hair, the joints that have developed opinions. These happen inside perimenopause, not after menopause. By the time a woman has been postmenopausal for a year or two, most of the acute turbulence has passed. The hard part, for most women, is the corridor leading in. And nobody prepares you for the corridor.

## **When does it begin**

Most women have been told that perimenopause is something that happens in the late forties and early fifties. This is the average. Averages are useful for population statistics. They mislead individual women.

Here is what the current research shows. A 2025 study from UVA Health and the Flo women's health app, surveying more than 4,400 women, found that 55.4 percent of women aged 30 to 35 reported symptoms meeting the criteria for moderate or severe on the Menopause Rating Scale. Among women aged 36 to 40, that number rose to 64.3 percent.

Read that again. Over half of women in their early thirties already have moderate or severe symptoms. Close to two thirds of women in their late thirties.

These are women who, in the mainstream story, are still considered decades away from anything worth discussing. If they brought their symptoms to a doctor, they would often be told they were too young for this to be perimenopause. So it is told to them as something else. Stress. Anxiety. A thyroid screen that comes back in range. An antidepressant. The

study's authors found that despite the prevalence of symptoms, most women do not seek treatment until they are 56 or older. Women wait, on average, twenty years between the onset of real symptoms and treatment for them. Twenty years. That is not a clinical failure at the level of the individual. It is a systemic failure at the level of how medicine teaches, recognises, and treats this stage of a woman's life. The Evernorth analysis of 1.5 million commercially insured women aged 40 to 64 found that over half had experienced symptoms related to menopause. Only 8 percent had received a confirmed diagnosis.

Part of the reason sits in the training of the clinicians women ask for help. A recent survey found that only 6.8 percent of medical residents felt prepared to manage menopausal symptoms. 20.3 percent received no training on menopause at all during residency.

None of this is your fault. None of it is your doctor's fault, in most cases. The education was not there. You are asking questions the clinical system has not caught up with, and many practitioners are doing their best with what they have. So here is a framing to hold on to, whatever any individual appointment produces. If you are in your late thirties or forties and your body is not behaving the way it used to, you are permitted to consider that you may be in perimenopause. You do not need a blood test to earn the right to that word. No doctor's permission is required to take your own symptoms as the evidence they are. You are allowed to begin reading the stage you are in, whether or not the clinical system has caught up with you yet.

## WHERE THIS GOES

You now know what the corridor is and why nobody prepared you for it. The rest of the course does the work: the pattern your body is expressing, the eight foundations, the appointment that takes you seriously, and your first ninety days.

**Lesson one is free on the platform, with its figures.**  
[perimenopause.wholistica.com](https://perimenopause.wholistica.com) — no card, just an email.

**The whole course: twenty lessons and eight printable worksheets.**  
One payment, lifetime access, seven-day refund.

**Some symptoms should not wait for a course.**  
[perimenopause.wholistica.com/medical-disclaimer](https://perimenopause.wholistica.com/medical-disclaimer) lists the red flags.

*Read at your own pace. Nobody needs to know you started.*