



A FREE REPORT FOR RENO WOMEN 45+

THE RULES CHANGED.

Why weight piles on after 45 – even when you haven't changed a thing – and the 3 changes that actually reverse it.

MASTER TRAINER · 16 YEARS COACHING WOMEN
BEFORE, DURING & AFTER MENOPAUSE
FROM THRIVE FITNESS · RENO, NV



THE FULL REPORT

Why Everything You've Always Done Stopped Working

*The Over-45 Woman's Guide to Losing Menopause Weight —
Without Eating Less or Doing More Cardio*

From **Thrive Fitness** · Reno, NV
16 Years Coaching Women Through Menopause
Functional Aging Specialist + NASM Certified

INTRODUCTION

You Didn't Change. Your Body Did.

Somewhere in the last few years, something happened that nobody warned you about.

You didn't start eating more. You didn't stop moving. You were the healthy one — you walked, you watched what you ate, you did everything the magazines and the doctors told you to do.

And the weight showed up anyway.

Here's how real women describe it, in their own words, on the menopause forums where millions of women are quietly comparing notes:

"Almost overnight my weight piled on despite not eating differently."

— MUMSNET MENOPAUSE BOARD

"Found weight was piling on despite a very active and healthy lifestyle."

— HEALTHUNLOCKED

"Ever since going through menopause 2 years ago my weight has gone up 20 lb without me changing anything... I just don't know what else to do."

— YOUTUBE COMMENTER

"It's rubbish feeling like you have no control over your own body!"

— MUMSNET

If any of those sentences could have come out of your mouth, I want you to hear this clearly:

You are not crazy. You are not lazy. And you are not imagining it.

You didn't break the rules. The rules changed. Menopause rewrites how your body responds to food, exercise, and stress — and nobody handed you the new rulebook.

This report is the new rulebook. It covers three changes. Not thirty. Three. Each one exists because of what's actually happening in a woman's body after 45 — not because it worked for a 26-year-old influencer. By the end you'll know exactly what to do differently, why it works, and how to tell within about 30 days whether it's working for you.

Let's start with the hardest truth in the whole report.

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CHAPTER 1

Why Eating Less and Doing More Cardio Is Making It Worse

When the weight showed up, you did the sensible thing. The thing that always worked before. You ate a little less and you moved a little more. More walks, more elliptical, smaller portions.

And your body ignored you. Or worse — things went backwards:

"I cannot lose one lb of body fat without gaining three more."

— YOUTUBE COMMENTER, 54

"Whatever I eat I now know for me personally that food alone isn't even going to maintain my weight."

— HEALTHUNLOCKED

Here's why the old playbook fails after 45.

Estrogen was doing more jobs than you knew. For decades, estrogen quietly helped your body build and keep muscle, manage blood sugar, and decide where fat gets stored. As it declines through perimenopause and beyond, three things shift at once: it gets harder to keep muscle, your body handles carbohydrates and stress differently, and fat storage migrates to your middle. That's why your shape changed even when the scale barely moved — and why women say things like "my stomach is fat... plus my bum disappeared."

Muscle is the engine — and the engine is shrinking. Muscle is the most metabolically expensive tissue you own. It's where you burn fuel, and it's what keeps you strong, stable, and independent for the next forty years. From midlife on, women lose muscle steadily — and menopause presses the accelerator.

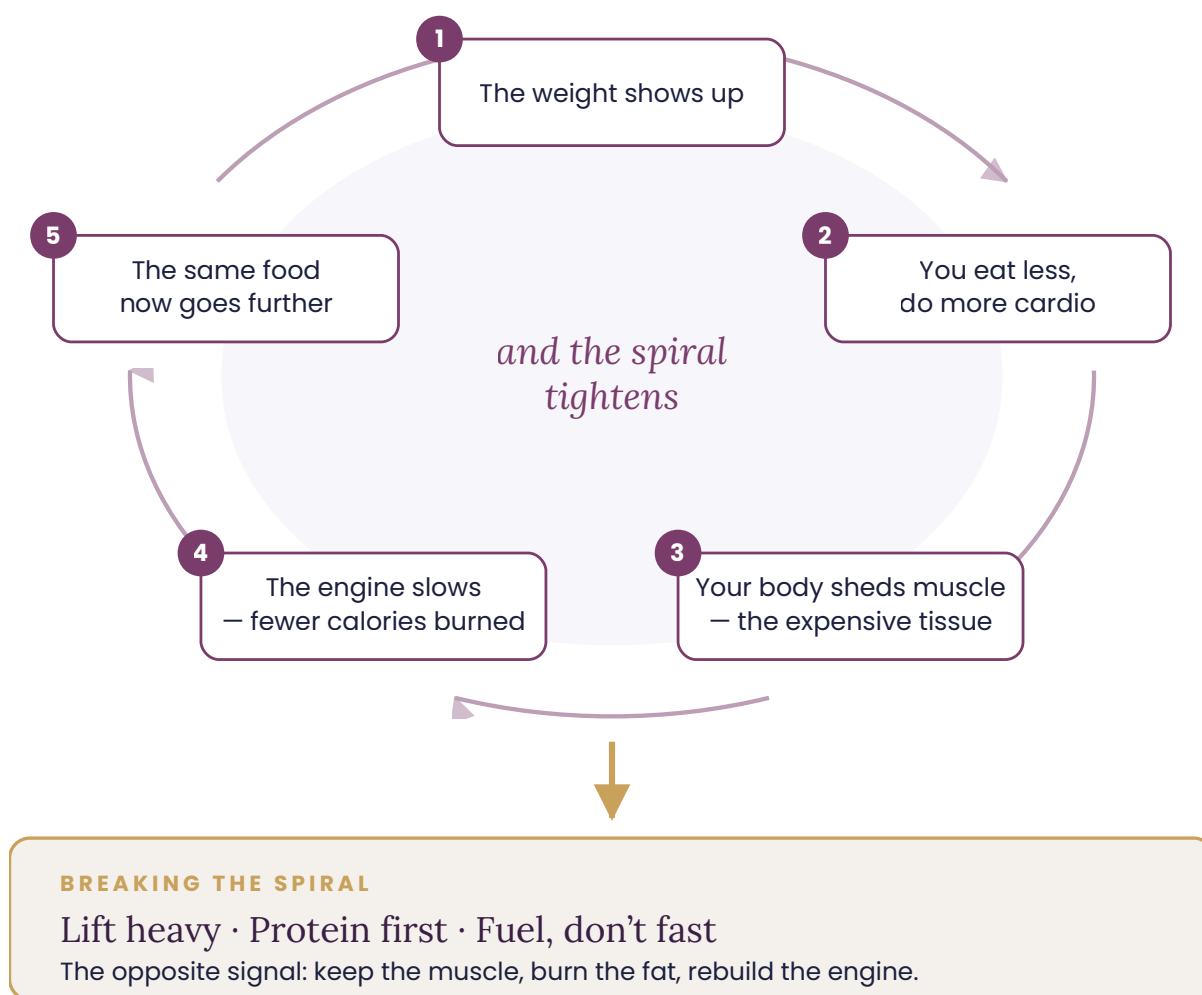
Now here's the trap. When you eat less and do more cardio, your body doesn't just burn fat. Without a strong signal to *keep* muscle, it burns muscle too. Less muscle means a slower

engine. A slower engine means the same food now goes further — so you eat even less, lose even more muscle, and the spiral tightens. You end up smaller on the scale but softer in the mirror, more exhausted, and more convinced your body is broken.

Your body isn't broken. It's responding exactly as designed to the signals it's getting. Eating less and cardio-ing more sends the signal: *scarce times — shed the expensive muscle*.

The three changes in this report send the opposite signal: *keep the muscle, burn the fat, rebuild the engine*.

One more thing before we get to them. This is a **strength problem, not a fat problem**. Read that again, because it changes everything about how you train, how you eat, and how you talk to yourself. The goal is not a smaller body that's weaker. It's a stronger body that carries less fat, has energy again, and holds up for decades. Chase strength, and the body composition follows. Chase smallness, and you dig the hole deeper.



Lift Heavy. (No, Heavier Than That.)

If you take one thing from this report, take this: **after 45, lifting weights — real, challenging weights — is not optional. It is the intervention.**

Not 3-pound dumbbells. Not "toning." Not the pink-weights circuit class. Those are cardio in disguise, and your body already knows cardio isn't the answer.

Here's a woman on r/Menopause describing what happened when she made the switch:

"I started feeling like my previous, energetic self just a week or so after I committed to lifting heavy... and abandoning my previous routine of 45 minutes on the elliptical."

— R/MENOPAUSE

"Lifting heavy is the best thing ever. Not only do I get stronger and improve my mobility, but I also get rid of some of this obscene rage."

— R/MENOPAUSE

Why heavy? After menopause, your body has lost estrogen's help with keeping muscle. To convince it to keep — and build — muscle anyway, the signal has to be loud. Walking doesn't do it. Light weights for 20 easy reps don't do it. What does it: lifting a weight heavy enough that roughly 6 to 8 good reps is all you've got, with maybe 1–2 more left in the tank. That effort level is the signal. It tells your body: *this muscle is needed — keep it, feed it, build it.* Strong muscles also pull on bone, which is exactly what bone density needs at this stage of life.

What this looks like in practice:

- **2–3 sessions a week.** That's it. This is not a live-at-the-gym plan.
- **Big, simple movements** that use the whole body: squat, hinge (deadlift pattern), push, pull, carry. Machines or free weights both work.

- **3–4 working sets of 5–8 reps**, at a weight where the last rep is hard but your form stays clean.
- **Progress on purpose.** When 8 reps gets manageable, the weight goes up. That steady climb is the whole game.

And a short, sharp finisher — sprint intervals. Once or twice a week, after lifting or on a separate day: 20–30 seconds of genuinely hard effort on a bike, a hill, or a rower, then fully recover, and repeat 4–8 times. Ten minutes, done. These short bursts do for your metabolism what an hour of steady cardio no longer can. Long, slow cardio isn't evil — walk all you like, it's wonderful for your head and your heart — but it is no longer the tool that changes your body. Heavy lifting plus short bursts is.

"But I'm intimidated." Then you're in good company:

"Going to the gym is so daunting I get intimidated every time I go in there because I'm out of shape... Now I just feel like an old fool when I go in there."

— R/MENOPAUSE

Hear this: the barrier isn't your body. It's the room. A crowded gym full of 25-year-olds is an awful place to learn to lift at 52. You don't need that room. You need a bar, some weight, and someone who knows how to teach a midlife body — in a private studio or in your own garage. Where you lift matters far less than whether you lift.

Before you load the bar: two things decide whether you can lift heavy safely, and almost no woman is tested for either. **Stability** — whether the joint holds position while the weight moves. A hip that collapses, or a shoulder that rides up, doesn't get stronger under load. It gets injured. **Repeatability** — whether rep eight still looks like rep one. Both are fixable in weeks, not months, and neither is a gate: they tell you *where* to load first, not whether to start. Begin tonight with a goblet squat to a chair. Heavy is still relative — a barbell for one woman, a pair of 15s for another — and with joint issues or an osteoporosis diagnosis, have someone qualified watch you move first.

CHECK YOURSELF

How many times in the last month did you lift something heavy enough that 8 reps was a true challenge? If the answer is zero, you've found the biggest lever in this report.

Protein First

Muscle isn't just built in the gym. It's built at the table — and almost every woman over 45 is under-eating the one nutrient that matters most.

The number: aim for roughly **1 gram of protein per pound of your goal body weight, per day**. Goal weight 150? That's about 150 grams of protein a day. If you just did that math and thought "that's enormous" — right. That reaction is the point. Most women over 45 are eating half that, and their bodies are quietly cannibalizing muscle to cover the shortfall.

Why so much? An older body is less efficient at turning protein into muscle than a younger one — the same meal produces a weaker building signal at 52 than it did at 32. You overcome that by raising the dose. And when you're lifting (Change #1), protein is the raw material for everything you're asking your body to build. Lifting without protein is a construction site with no bricks.

The habit that makes it real: a protein-first first meal. Forget overhauling your whole diet on day one. Just win breakfast: **30–40 grams of protein in your first meal**. Eggs plus Greek yogurt. Cottage cheese and fruit. A proper protein shake. Leftover chicken, if you're the savory type — there are no breakfast police. Front-loading protein steadies your energy and appetite for the whole day, protects muscle, and makes hitting the daily number achievable instead of heroic.

On training days, get 40–60 grams within a couple of hours after lifting. That's the window when your muscles are asking to be fed.

What a 150g day actually looks like:

- Breakfast: 3 eggs + a cup of Greek yogurt → ~38g
- Lunch: big salad with a real portion of chicken (6 oz) → ~42g
- Snack: cottage cheese or a protein shake → ~25g
- Dinner: salmon or lean beef (6 oz) with whatever your family's having → ~40g

No elimination rules. No forbidden foods. Notice what's missing from this chapter: nothing was taken away from you. Protein-first is about *adding* the right thing, not subtracting everything else. After decades of diets built on less, this is the change women resist the most — and the one they end up loving.

CHECK YOURSELF

What did you eat first yesterday, and how much protein was in it? If you don't know, start counting just that one meal for a week.

WHAT 40 GRAMS ACTUALLY LOOKS LIKE

A TYPICAL “HEALTHY” BREAKFAST

1/2 cup rolled oats (dry)	5 g
1/2 cup blueberries	<1 g
1 cup almond milk	1 g

TOTAL PROTEIN	6 g
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A PROTEIN-FIRST BREAKFAST

3 large eggs	19 g
1 cup plain Greek yogurt, 0%	23 g

TOTAL PROTEIN	42 g
---------------	------



Goal weight 150 lb means about 150 g a day — and breakfast is only one of your chances at it.

OTHER WAYS TO GET THERE

4 oz cooked chicken breast	35 g	1 cup low-fat cottage cheese	28 g
4 oz cooked salmon	29 g	1 scoop whey protein	25 g

Protein values are approximate, per typical serving (USDA FoodData Central).

Fuel, Don't Fast

This is the chapter that will contradict half of what's on your Instagram feed. Stay with me.

Intermittent fasting is everywhere. Skip breakfast, eat in an 8-hour window, "give your body a rest." And for some people — particularly men, particularly younger — it can be a reasonable tool.

For a woman in perimenopause or beyond, it usually backfires. Here's the plain-English why.

Your body after 45 is already managing a heavier stress load: fluctuating hormones, disrupted sleep, a career, aging parents, everyone needing you. Fasting — especially skipping breakfast and training on empty — piles more stress on top. A midlife female body under that much stress does the opposite of what you want: it clings to fat (especially around the middle), sheds muscle, and drains your energy. Many women fasting their way through menopause are working *hard* to get the exact result they're trying to escape.

You may have already lived the evidence: months of a shrinking eating window, and a waistline that didn't shrink with it.

What to do instead:

- **Eat within an hour or so of waking** — and make it that protein-first meal from Chapter 3. This tells your body the opposite of what fasting tells it: *resources are here, it's safe to build*.
- **Fuel your training.** Don't lift on empty. Even something small beforehand — and real protein after — turns a workout from a stress event into a building event.
- **Front-load your day.** Bigger earlier, lighter later, most days. Late-evening eating is where most quiet overconsumption hides anyway.

To be clear: this isn't permission-slip marketing ("eat whatever you want!"). It's sequencing. Same food, placed where a menopausal body can actually use it.

CHECK YOURSELF

How many hours after waking do you currently eat your first real meal? If the answer is "four or five, I'm not hungry in the morning" — that's not discipline. That's the pattern this chapter exists to break.

FASTING DOESN'T REMOVE STRESS. IT ADDS A LAYER.

+ FASTING

Everyone needing you

Aging parents

A career

Disrupted sleep

Fluctuating hormones

the load she already carries

A midlife body under that much stress does the opposite of what you want.

- Clings to fat — especially around the middle
- Sheds muscle
- Drains your energy

Many women fasting their way through menopause are working hard to get the result they're escaping.

THE FASTING DAY

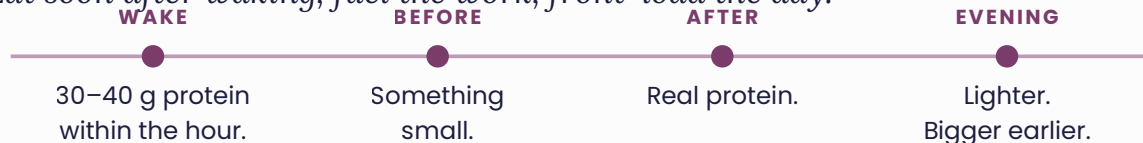
Skip breakfast, train empty, eat at eleven.



The signal your body hears: resources are scarce — shed the muscle, hold the fat.

THE FUELLED DAY

Eat soon after waking, fuel the work, front-load the day.



The signal your body hears: resources are here — it's safe to build.

Same food. Placed where a menopausal body can actually use it.

CHAPTER 5

Can't Take HRT? Strength Is the Menopause Therapy Nobody Can Take Away From You

On one of the biggest menopause videos on YouTube, the single most-agreed-with comment — hundreds of women nodding along — was this:

"I feel like you should've started with the fact that you're on HRT. That makes a world of difference. After breast cancer at 50, I'm not allowed to use it."

— YOUTUBE COMMENTER

If that's you — post-breast-cancer, a clotting risk, a family history, or simply a doctor who said no — you've probably noticed that every menopause success story seems to start with a prescription you're not allowed to have. Every door has a "not for you" sign on it.

This chapter is the door that's open.

Everything in this report works without HRT. Heavy lifting, protein, fueling — none of it requires a prescription, none of it is off-limits after cancer (clear your training with your oncology team, then go), and none of it can be taken away from you by a lab result or a family history.

More than that: for the woman who can't take HRT, strength training isn't the consolation prize. It's the most powerful lever she has left — and it's a big one. Lifting directly addresses the things menopause attacks: muscle, bone, metabolism, energy, and the sense that your body is still *yours*.

One of Thrive's own clients lived this. From her public Google review:

★★★★★

"I started working with Daniel in Oct 2025 to work on stability and strength after a battle with cancer and a brain tumor that caused numbness and balance issues. I was

looking for 1-on-1 training tailored to my individual needs. It's January 2026 and I can't say enough about the program he created for me. His program has allowed me to significantly increase my stability and strength."

JULIE D. · THRIVE FITNESS CLIENT · GOOGLE REVIEW

And if you *are* on HRT and it's helping — wonderful. This isn't an either/or. HRT can ease the symptoms; it doesn't build the muscle. Every woman, on hormones or off, still has to do Chapters 2 through 4. The iron doesn't check your prescription history.



OLGA, IN THE THRIVE STUDIO · RENO, NV

★★★★★

"I would like to recommend my personal trainer, Daniel, who has been helping me over the last few months to improve my body composition. I feel much stronger and fit now thanks to Dan! And it's really great to work out in a private studio Dan has set up in part of his house in N.W. Reno."

OLGA C. · THRIVE FITNESS CLIENT · GOOGLE REVIEW

CHECK YOURSELF

If hormones are off the table for you — has anyone ever handed you a plan for the part that doesn't need a prescription? Chapters 2 through 4 are that plan, and not one line of it requires anybody's permission.

CHAPTER 6

On a GLP-1? Don't Lose the Muscle With the Fat.

I'm a coach, not a prescriber. This chapter isn't about whether to take the medication — that's between you and your doctor. It's about what to do alongside it.

If you're on semaglutide or tirzepatide — Ozempic, Wegovy, Mounjaro, Zepbound — the scale is probably moving for the first time in years. Good. That's real, and you owe nobody an apology for it.

Here's the part nobody mentions at the pharmacy counter.

When weight comes off on a GLP-1, a large share of it isn't fat. Across trials, lean tissue has accounted for roughly a quarter to 40% of the total weight lost. At the top of that range, for every 10 pounds gone, close to 4 came off your muscle, your bone and your organs — not your waistline.

Now put that beside Chapter 1. A GLP-1 works by quieting appetite: you eat considerably less without deciding to. And a body in a steep deficit, with no loud signal telling it otherwise, does exactly what Chapter 1 described — it spends the expensive tissue. The drug didn't cause that. The deficit did, and the deficit is the point of the drug.

The medication is doing its job. The muscle is a separate job, and it's yours.

And you face two headwinds, not one. You have already lost estrogen's help with holding muscle — that was Chapter 1. Add an appetite suppressant on top and you are asking a body already struggling to keep muscle to do it on far less food.

WHAT TO DO ABOUT IT

Lift heavy (Chapter 2). This is the “keep this” signal, and on a GLP-1 it stops being optional. Without it you are asking your body to lose weight with no instruction about *which* weight to lose.

Protein first (Chapter 3). Harder on this medication and more important. Appetite suppression makes it easy to drift down to 40 or 50 grams a day without noticing. Aim for the Chapter 3 number — but if that feels impossible right now, treat 100 grams a day as your floor and climb from there.

Eat around your training. Something before you lift, real protein after — especially on the days you are not hungry. Lifting hard on an empty tank is how you get hurt and how recovery falls apart.

Don't stack fasting on top (Chapter 4). A GLP-1 already compresses your intake for you. Adding an eating window is a deficit on top of a deficit.

A WORD ON PEPTIDES

You will see them everywhere right now. I am not going to tell you what to take — that is a conversation with a licensed prescriber, not with me.

But here is the part worth carrying away: **not one of them builds muscle on your behalf.** Every compound in this category, GLP-1s included, changes the environment your body works in. None supply the stimulus or the raw material. That is still lifting, and that is still protein. The more of this you take, the more the basics decide your result — not less.

And one honest word on measuring it. The scale cannot tell you whether the pounds leaving are fat or muscle. A body-composition scan can — and on these medications it is the only way to know whether the weight you are losing is the weight you wanted to lose.

Muscle is what you will live on for the next forty years. Come off the medication — many women do, by choice, cost or supply — and you return to a body with a smaller engine than the one you left. That is the setup for regain.

The women who do best on these drugs are not the ones who lose fastest. They are the ones who arrive at the other end still strong.

CHECK YOURSELF

If you are on a GLP-1 or any peptide: how much protein did you eat yesterday, and when did you last lift something heavy? If the honest answers are “not much” and “I haven't” — that is the gap this chapter exists to close, and you can start closing it this week.

CHAPTER 7

"Is It Too Late for Me?" (No. Here's the Proof.)

At 67, a woman left this comment under a menopause video:

"Now I'm 67, still have persistent belly fat... I worry that it's too late."

— YOUTUBE COMMENTER, 67

Too late is the fear underneath every other fear in this report. Too late at 55, too late at 60, definitely too late at 67. Some version of "that ship has sailed."

Here is what the evidence — and every coach who works with midlife and older women — will tell you: **muscle responds to training at every age**. Not "somewhat." Not "a little, if you're lucky." Women who start lifting in their 50s, 60s, and 70s get stronger — measurably, repeatably, sometimes dramatically. The building machinery slows with age; it never shuts off. The only people it's too late for are the ones who never start.

Listen to women who started late, in their own words:

"It works and I have abs and I feel more energized."

— R/MENOPAUSE

"I started feeling like my previous, energetic self just a week or so after I committed to lifting heavy."

— R/MENOPAUSE

"I lost 5 lbs and just wanted to tell someone."

— R/MENOPAUSE

That's what a win actually looks like. Not a magazine cover. Strength coming back. Energy coming back. Clothes fitting. A scan number moving the right way. Feeling like *yourself* — and having someone notice.

And here is a real Thrive client, in her own words, from a public Google review:

★★★★★

"When I began my training program a couple of years ago, I needed to gain muscle, lose fat, work on my balance and regain my vitality. Daniel's knowledge about a truly healthy diet and preventing and healing injuries is amazing. Thanks to him, I feel at least 10 years younger!"

VALARIE R. · THRIVE FITNESS CLIENT · GOOGLE REVIEW

And another, who started exactly where you might be — hesitant:

★★★★★

"As a woman dealing with a severely bad back and diabetes, I was hesitant to start any exercise program. But from day one, Daniel took the time to understand my unique health challenges and crafted a personalized fitness plan that was safe, supportive, and incredibly effective. I have grown noticeably stronger, my mobility has improved, and I feel better overall — something I never thought possible given where I started."

ALLISON M. · THRIVE FITNESS CLIENT · GOOGLE REVIEW

The women in this chapter aren't genetic exceptions. They did the three things in this report, consistently, with support. The same three things now sitting in front of you.

GET STARTED

Your First 7 Days — Start Tonight, No Equipment Required

You don't need a gym membership, a program, or a Monday to start. You need this list:

-
- DAY 1** Count the protein in your first meal tomorrow — just look it up. That's the whole task.
-
- DAY 2** Eat a 30–40g protein breakfast within an hour of waking. Eggs + Greek yogurt gets you there.
-
- DAY 3** Find your weights. Dust off the dumbbells in the garage, or locate the nearest place you could lift. You don't have to go yet. Just know where.
-
- DAY 4** Protein breakfast again. Then one set of squats to a chair — as many as you can with clean form. Write the number down. That's your baseline.
-
- DAY 5** Ask yourself Chapter 2's question honestly: when did you last lift something where 8 reps was a true challenge? Decide where lifting will happen for you — at home or in a studio.
-
- DAY 6** Protein at breakfast, and push one meal's protein portion up to the size of your palm-and-a-half.
-
- DAY 7** Book the scan (last page) — or if you're not ready, repeat the week. Either way: breakfast, protein, and your chair-squat number one more time. It's probably already gone up.
-

Seven days. No food eliminated, no gym required, nothing purchased. That's how the new rules start.

CLOSING

The One Number That Actually Explains What Changed

Let's put the whole report on one page.

- 1 **Lift heavy, 2-3× a week** — big movements, 5-8 hard reps, progress the weight — plus a few short sprint bursts. That's the signal to keep muscle and burn fat.
- 2 **Protein first** — about 1g per pound of goal body weight daily, starting with a 30-40g first meal.
- 3 **Fuel, don't fast** — eat soon after waking, fuel your training, front-load your day.

Do those three things for 30 days and you should feel the first proof: strength climbing week to week, steadier energy, the rage and fog easing. The mirror and the tape measure follow.

Now — one honest question.

You've read this far because everything you've always done stopped working, and you wanted to know why. Now you know why. So: **would it be worth 60 minutes to see the one number that actually explains what changed in your body?**

Not the scale. The scale is why you've felt gaslit for five years — it barely moves while your whole shape changes. The number that matters is your **body composition**: how much of you is muscle, how much is fat, and where. It's the number this entire report has been about, and it's the honest starting line for everything.

Here's what that number looks like when it moves. A Thrive client, from a public Google review, after nine months:

★★★★★

"I have lost weight (15 lbs), while gaining muscle and toning, and have reduced my metabolic age by 7 years — now at my actual age."

E.F. • THRIVE FITNESS CLIENT • GOOGLE REVIEW

Your Free Results Roadmap Session

Your own personalized **60-minute** session with Daniel — 16 years coaching women through this, Functional Aging Specialist + NASM. No pressure, no commitment, whether you ever train with us or not.

- ◆ **Expose what's really sabotaging you**
And it's not your age.
- ◆ **Find out if you're ready for heavy**
The two things that decide it — measured, not guessed.
- ◆ **Flip your muscle switch back on**
The one system that reverses how your body feels.
- ◆ **Discover the anti-diet**
Fuel that builds muscle instead of starving it.
- ◆ **Unlock effortless movement**
Stairs, groceries, getting off the floor — easy again.

It happens in a **private Reno studio** — one coach, no crowd, no mirrors full of 25-year-olds, no feeling like “an old fool.” Just you and your coach.

BOOK YOUR FREE RESULTS ROADMAP →

thrivefitnesscoach.com · or simply reply to the email that sent you this report

YOURS TO KEEP

You'll Walk Away With

Whatever you decide afterwards, these are yours — written down, in your hands, at the end of the hour.

- ◆ A full **body-composition scan**: exactly how much muscle to build and fat to burn
- ◆ **Your metabolic age** — where it sits today, and how to get it below your actual age
- ◆ A **strength-training plan** built for a menopausal body
- ◆ **Nutrition guidelines** that work with how you actually eat
- ◆ **The benchmarks** for a genuinely healthy midlife body, so you know what you're aiming at
- ◆ A **realistic timeframe** for the result you want — and a clear map from here to there

THE "FEEL IT IN 30 DAYS" GUARANTEE

Complete your first 30 days of coaching at Thrive, and if you're not measurably stronger — shown in black and white by your own coach-tracked lifting numbers from day 1 to day 30 — and your follow-up body-composition scan isn't moving in the right direction, you get every cent back. No forms, no hoops, no hard feelings.

One hour. One scan. One plan you keep either way.

BOOK YOUR FREE RESULTS ROADMAP →

THE WHOLE REPORT ON ONE PAGE

Three changes. Not thirty.

1

Lift heavy

2–3× a week. Big movements, 5–8 hard reps, and the weight goes up as they get easier — plus a few short sprint bursts.

The signal: keep the muscle, burn the fat.

2

Protein first

About 1 g per pound of your goal body weight, every day — starting with a 30–40 g first meal.

Goal weight 150 lb means roughly 150 g a day.

3

Fuel, don't fast

Eat within an hour of waking. Fuel your training. Front-load your day — bigger earlier, lighter later.

Same food, placed where a menopausal body can actually use it.

WHAT THE FIRST 30 DAYS SHOULD FEEL LIKE

Strength climbing week to week. Steadier energy.

The rage and the fog easing.

The mirror and the tape measure follow.

The number that matters isn't the scale. It's your body composition.

THRIVE FITNESS · RENO, NV · thrivefitnesscoach.com

You've spent years taking care of everyone else. The rules changed on you once, without your permission.

This time, you change them back.



A THRIVE CLIENT IN SESSION · RENO, NV

Thrive Fitness · Reno, NV · Private in-person studio · Functional Aging Specialist + NASM · 16 years
This report is educational and not medical advice. Consult your physician before beginning any new exercise or nutrition program.

GET YOUR FREE RESULTS ROADMAP →