Your Ultimate Menopause Workout Plan Transcript

(Transcripts are generated by AI and may contain errors)

Introduction and guest welcome

Hello, ladies. Welcome back. I'm your host, doctor Sharon Stills, and you're at mastering your menopause transition 3.0, and I am I love doing this. I love being here with you all.

And I love having meaningful conversations that are going to really impact you and change the way you have your hormonal journey. And really, you know, I talk about this being stepping into your sacred second act, and I want that for all of you.

And that's why I have gathered experts from all of the arenas that I know are important for you to know about, so you can actually do that. And today I have my dear friend and colleague, Deborah Atkinson.

You may know her from flipping 50. She is the menopause exercise guru and this is such an important topic, right? We we need to exercise and we need to know how to exercise and when to exercise and what to exercise.

And these things change. I remember the first time I interviewed Deborah, I was like, you know, it was a rude awakening for me, and I had to change some things in my own life about how I move my body.

And so that's why I've got her here for you all today. I'm going to pick her brain. We're going to spend the next 30 minutes learning what you need to know about exercising and muscle in menopause.

So welcome, Deborah. It's amazing to have you here. Well, thank you so much for having me and for doing this. 3.0. That's huge. Such a big impact. Yes. Thank you.

Yeah I feel like, you know, the universe has gifted me as the guardian of spreading menopausal knowledge. And I and I, I don't take that lightly. I, I think as you know, being in the field, there's so much misinformation out there.

And I'm on like, this mission to set the record straight. So I love, you know, Deborah has a Ted talk and it's called, everything women in menopause learned about exercise may be a lie.

And so I would like to just start there. And that that's quite a provocative title. And, and I, as I know from Hanging Around You enough a true title.

So what what do the women need to know and what what is a lie? Can you kind of sort through that so we can kind of walk away from this talk on okay. Truths lie, truth lie, throw that out.

Keep this one so good and and just to in defense of the fitness industry, I think there are definitely some things we can do better.

Exercise myths in menopause

Probably any industry can say that. And we didn't intentionally set out to to create lies. But much of the science, quote unquote, that we as women in midlife, at every age were following the program and even working with the personal trainer, one on one, where we think you're getting a workout just for you, designed about you.

Let me tell you, based on my background, I, I've seen it. We haven't been we've been following research and guidelines, position statements based on research featuring men, often young, athletic men at the peak of their muscle mass.

You know, in really, you know, as you know better than anybody that hormones in some of the turn of the tides and perimenopause and mid menopause, we're at the peak of fat storage.

That's happening a whole lot easier than gaining lean muscle mass. So to think what works for young, athletic males is going to work in the same way, same same quota, same dose frequency intensity is going to have the same impact on us, I think is ridiculous.

And nobody questioned it, you know, and and at least of all me, I was for 15 years, senior lecturer in kinesiology at Iowa State University, teaching thousands of young adults who wanted to be fitness trainer, studio owners, gym owners.

And we didn't not during a minute of their four year degree. Talk about menopause. Talk about the difference between training men versus women. And they still today don't.

There isn't time number one, academics is a business and we promise we'll get them out on time. But in a certification exam, I'm also a subject matter expert.

I write that exam questions. One of the first things they will do to a group of us coming in to write questions is say, remember that we're only creating questions for that are minimal questions knowledge that a trainer would know entering the field.

Meaning don't make it too hard, right? So we're putting all of our faith in someone, and we're not asking, was that based on research based on women just like me, with the same, you know, hormonal status and profile?

You're not like any one. You know, you are. Your journey is different than your sister, than your neighbor. You know, even your bestie in the same age and stage.

But we have to have some kind of a blueprint to go off of. And that's what we really have intended to do with flipping the 50. So yes, we believe a lot of things about fat burning, about weight loss, about how we should strength train, what we should do in terms of how much that really isn't true at all.

The one thing we haven't been taught to do is ask, but how do you feel? It's such an important question, right? Yeah. Easily overlooked. So. So let's let's dive into that. What?

Because even and I love that you said that because it's so true. You know, our journeys are all individual. And then even within our own self. Right. I'm not the the body or the hormonal constituents that I was in my 20s or my 30s and and that's okay.

But we just need to love on ourselves and then attend to ourselves a little differently. And so maybe you can talk about why that's happening and then what we can do about it.

And what are some some of the biggest misconceptions. Oh yeah. And I think every woman here who's thinking, I just would like to get back to where I was, you know, that moment for you that you were in better shape or in a better weight or had better energy?

And I think the realization is we all have to kind of wash our hands of that because we're not going back. You know, we don't we don't have the hormone profile we had, then we're not going to get it.

Even if we're doing hormone replacement, it's not going to necessarily feel or be the exact same stimulus on your bones or your muscles that it was when you were 30.

So we've got to agree with that. But we want to look at, you know, if we've got lower levels of estrogen, we've got lower levels of progesterone or testosterone.

It's really the estrogen and testosterone that are going to have the greatest impact on the efficacy of any exercise that you do. So estrogen was a stimulus for a muscle, just a natural stimulus helping us keep that.

Strength training, recovery, and workout frequency

We've always associated estrogen, I think, with bone density, at least since the mid 90s when we all started learning about osteoporosis and and it was new to us.

Now it's a household word, right? Everybody understands that. But when we lose that estrogen stimulus, we have to counter in some way in order not to lose muscle and bone density.

And that means what you used to do doesn't work anymore, and it won't. But something else will is the good news. And a lot of times we don't finish that sense.

So can we do it right? That's something else will work. Just not that. So will it pivot, have a different strategy. And often it's surprising to a lot of women who think, well, I should slow down.

And honestly, truthfully, some women should or momentarily should slow down. But ultimately we all do need to pick up some weights. We need to reach muscular fatigue or get close to it.

We sometimes call that or, you know, 2 or 3 in reserve, meaning you could do 2 or 3 other repetitions. Don't have to quite get to full exhaustion, especially if you feel vulnerable knowing that sometimes is a good thing and a lot of a safety net for a lot of women.

But we need to do that. And have adequate stimulus for the muscle and for the bone, because that's how they push back. They overcompensate and get stronger.

Stay strong. If you're already a strong woman and we've got effects of aging, effects of gravity that otherwise will reverse and cause losses so we can overcome them if we have adequate stimulus and adequate recovery.

And that's a forgotten issue as well. Recovery is so we also are allowed to rest. So should we be lifting heavier and less repetitions or lighter? And how often are we needed to lift to really make a difference.

And is it different for everyone? Yes, yes and yes. All of so should you live lighter and do more repetitions? Everyone starting a program should do that it right.

So whether you have osteo rheumatoid arthritis and maybe that's going to be your sweet spot, you may reach a point where you can't progress because the risk and the reward ratio are skewed.

If you do so we want to stay safe and within sake. What can you do? No pain. So yes, we all start though. And then gradually increasing the weight, decreasing the repetitions to the point where what can you heavily but safely lift 2 to 3 times a week.

And the actual recommendation is really based on a volume of getting somewhere between 8 to 10 sets of exercise for major muscle groups. So for most of us, that's easily divided into two sessions and sometimes three.

But that's where it gets tricky. Where the the American woman's mind thinks more must be better. Three must be better. I will get in shape better faster if I do more.

But when we're over 40 and it really is more dramatic, over 50 more dramatic, yet over 60, we need equal dedication to our recovery because we're we're driving a vehicle that's got more miles on it.

Right. It's not going to run quite as well as that one. You just drove off the lot when you were 20, you know? So we just have to realize that you can be just as fit, but you're going to take more recovery in order for that to happen.

If anybody remembers Dara. Dara, Taurus, she was the over 40 swimmer who was in the Olympics, you know, and really competing with 19 year old 16 year olds in the Olympics.

Right. And she had gone back after, you know, years off and after having a child, I think her child was two at the time. And she was comparing her current training to her prior training, and she medaled.

You know, she did darn well as a either 42 or 44 year old and not sure. But her point and books and articles about her really were about the increased amount of recovery that it took.

She she couldn't just come right back to heart, and lung swims over and over again, or she would have been trashed and she never would have made it to the Olympics.

And that's a really key thing. So if you want to get to medal quality work, you're going to have to, yes, put in the work, but more recovery maybe before you do another challenging workout.

And the key is, you know, if you feel overly tired, if your cravings are out of control, your libido is under performing. You know, all those are signs you're probably doing some either overtraining or under recovery.

So I love that, you know, because we as women need to hear that it's okay to rest. Yes, okay to heal. It's okay to exhale. So on your recovery days. Yeah. Can you go for a hike?

Can you walk or do you just mean taking a break from lifting? Could you describe that a little more? Yeah. When we start talking about intensity that's where it comes in.

So when you said can you go for a hike? I could, but someone else who's been pretty sedentary might say a hike would just throw me under the bus. Right.

So it does depend on, you know, what's relaxing to you, what's enjoyable to you, but generally, yeah. Yoga, going for a walk, moving. Actually circulating blood and oxygen through the body will help your recovery much more than simply passive on the couch.

Couch compensation is not really the key we want to be moving. It's just when we talk intensity, we're talking either something cardiovascular that gets you breathless or was very long.

You know, you go on a four hour hike that's very different than, you know, an hour hike. There's also when you reach true muscle fatigue, you you really have done 3 to 4 stat.

So there's been considerable volume tapping on the the door of those muscles. They need some recovery in between. But yoga is recovery a walk is recovery.

Going swimming would be much more gentle and maybe recovery for some. If you're not a swimmer and you would struggle, you're thinking, no, not me, that's not recovery.

And that's exactly it. So it's from your perspective, what feels like recovery is lying on a float on your back in a pool, swimming. Is that that's of Murray.

Yeah. No. You know, after you have to earn that, then. Yes. But not I'm not first. So let's let's set the record straight right here, right now about cardiovascular exercise.

How much is too much? What can you do? And just to educate why why do the needs change? Why is too much cardio not a good thing? Now. Yeah. And there are all different kinds of cardio.

So first of all under the house of cardio if we can call it that, you know really almost anything qualify as if you're breathing harder than right now.

So you and I I think are both sitting down. Either that or maybe you're standing. I'm not I wish I was I'm just kidding. So anything where we're breathing harder and including walking becomes more cardiovascular if we're talking just about a continuum.

So walking is breathing a little bit more oxygen in than if you were sitting jogging even more so, or getting on a bicycle. Spinning bike or, you know, something sedentary.

I'm staring at a desk bike right here. That's going to be a little bit more getting on a stair climber, jumping rope. All of these things are going to be much more higher intensity.

And we've all heard of high intensity interval training, which can be done on any mode of exercise that you want. So if you are, love swimming, you can do it swimming.

If you prefer to keep your hair dry and stay upright in that pool, you can do that too by water jogging or movements that are designed to gain heart rate effect and get your heart rate up.

Without the impact you can still do in water, you can row, you can do elliptical, you can do any number of things. But when we're talking about middle zones, so not just going for a walk and not high intensity interval training where you're going to go really hard for maybe 15 30s and then completely recover in between before doing it again.

It's actually the middle zone that any of us who, you know, had legwarmers and tights back in the 70s and 80s, we lived in the middle zone, and that's really that area everyone is calling chronic cardio.

It's the chronic cardio that we're doing where we're in. There's got to be in my target heart rate zone. Do you remember those days I'm going to take my heart rate.

Cardio, steps, and chronic cardio

And if you feel Roberts, be sure you walk around or the blood will pool. We had everyone thinking they would faint if they stood still. And it's, you know, so not true.

We know so much better now. But we did the best we could with the science we had. And the truth is, at about 45 to 60 minutes, we seem to see cortisol levels continue to rise after exercise as opposed to coming down.

And if you're a woman watching who is like, but I love exercise and that's how I negate my stress, I have to exercise. You're probably thinking, well, that doesn't happen to me, but it probably does.

We're not very good judges of it for ourselves, and we tend to see this. And if you are exercising right now and you might say, I'm doing all the things and I'm not losing weight in fact, maybe you're getting the opposite of the desired effect and you're gaining belly fat.

It may be you're spending a little too much time and we call this middle zone no benefits zone unless you are someone who does half marathons. That's really not a great place for you to be.

We want the highs and lows. We want you to go for lots of walks, low level, your comfort zone, and I want you to do high intensity interval training. You can do them on your bike.

You can do them on the elliptical in the pool. You can do knee lifts in your living room with no impact and still get into interval effect. But all of those, that's how we elevate our VO2 max by getting breathless and create the base so that we can gain the VO2 max.

We need that base of walking more of that, far more of that than intervals. Are you a fan of get those ten k steps a day? Is that the magic number? You know, I'm probably in this place where I think my mind it goes back and forth right now.

So I never loved that. The number ten K there's really no science on it. The science out there says about 6 to 7000 is where the threshold of return is pretty high.

So getting that is is a great goal. And and for anybody who's so far below that, start where you are. Get more than you did. But you know, if you're exchanging the time that you could be spending weight training or maybe doing mobility work and getting some yoga in your life for that last 3000 steps, it may be worth it.

If you're limited in your time and your energy to spend that time strength training or doing mobility of some kind instead. Now, that said, I know that a lot of women will go through perimenopause and really struggle with the exercise that they do.

Doesn't work, may backfire where they can't seem to get lean and and lose that almost 10 pounds seems like a magic number for a lot of women that they gain in perimenopause.

And a lot of that, I think dissipates with simply walking, getting more movement into a day. And that's where maybe steps come in handy, that you have data to look at.

What if for a week or for two weeks, I just focused on getting more steps in and, you know, let the exercise drop off or not. I will tell you anecdotally, I, I like endurance exercise.

It's actually the nemesis of what I advocate. Right. But I had to learn the hard way because I kept thinking, oh, no, that's not going to happen to me.

And and of course it did. But even training for iron distance triathlons, I was never in as good a shape. And I had eight of them to compare. I was never in as good a shape as when I was doing a lot of walking, following my son around golf courses.

And I mean, imagine that when you're watching tournament play, if you're a golf parent, you know, and if you don't, that walk to the next shot and to stand around and wait.

This is not walking hard, but it's move met all day movement. That was the difference for me in being leaner and just being more fit overall. So I think that's a real amplified illustration of the power of movement in your day.

So I just want to make sure I'm understanding for the better for the cardio. Like if you like going for a hike and, you know, a brisk hike. Yeah, don't go more than 45 minutes.

Did I, did I is that correct? Did I hear that right or am I just hoping that's what I heard? Well, this would be wishful thinking. No. You know, I think that 45 to 60 minutes is if you are getting breathless the entire time.

I think most of us, if you're if you're going for a hike, usually there's some up, but there's also some down or there some up and then there's just cross.

It's mixed up. But I don't think also that you need to think of that as I'm going up a hill. So it must be interval training. It's potentially not that because you can stop at any point and take a break or take a picture or take a drink, you know, and you can break that up.

So I would qualify hiking very differently because often the very use of that word hike means it's an outdoor adventure, it's an experience. It's out there for the enjoyment.

And and yes, some of us just have a part of my words. Hell bent. You know, it's going to burn calories. I'm going to go hard all the time. But I think you're still getting benefit of being outdoors.

But it's if you I've got to go out for a run or I'm going to get on that elliptical trainer and I'm going to go hard for 45 or 60 minutes. That's the kind of chronic cardio that's probably going to throw you under the bus and not do as much good as maybe go outside and go for a walk, or let's do interval training instead.

Shorten it up to 20 minutes. That's including your warm up and your cooldown, and you're good. That's okay. It's nice to not taking away my hikes. I'm happy.

And I was I was a chronic cardio. I mean, even I remember at one point living like in this really small room. I was back at my parents house when my kids were young, after my divorce, and I was like, I had what was it called, the Nordic Track?

And I was like, I like I had to have my Nordic track. I was like, right next to my bed. And it was just like that. And a Nordic track and a desk like that was.

But I was like, I had to get my chronic cardio. And I. So I commiserate with anyone who's listening. Who is, you know, it took a lot of undoing that I that's not what I need right now.

That's not the best thing because I had all the things about it that was, you know, going to keep me in shape and that was going to keep me healthy and reduce my stress.

And on and on and on. So, you know, and I think that that brings up such a great point. I think, you know, there is a part of, you know, that discipline and that motivation.

And it may be that what has worked for you in your life up to this point and been a point of envy by others and wanted pride for you, may backfire on you.

And and if you're not getting the results you want, or you feel like you're on this more, I'm compelled to do it. I have to do it kind of thing. You know, if you can win yourself off by substituting and putting something else in there, do a harder yoga class, you know, but you have nothing to lose if it's not working.

Now to switch it up for a week, you can always go back to what's not working. Now, I'm afraid to ask what you think about hot yoga because I. I love it, so I used to do the 90 minute, now I just do 60 minutes.

So do I, do I have your stamp of approval? Well, and part of it is the joy factor. I do love it. Now, I have to admit, the first time I went to a bit Graham yoga, I had gel nail polish on and it melted off halfway through the glass and I just thought, this is so wrong.

This is just wrong. But, you know, I think number one, it's about you. It's about what you tolerate, you know, because again, we're so very different that one woman may tolerate that heat really well.

Another woman, it just may put you in a real sauce or a real sense of stress. So I think you've got to look at what are the effects on it, of it on you while you're in it, but also afterward, you know, how are you recovering?

How do you feel? How's your energy? And, you know, anything that leaves you, I think dizzy, not good. Probably not good, but. But I think, you know, there is no blanket statement in terms of is it good or isn't it good?

But I think if you've done a really hard workout the day before, what you might need today is a recovery workout. And maybe not hot yoga today. Maybe position that a couple days later when you're ready for another hot, hard workout.

So really looking at it globally, yeah, the thing I like about like Bikram is to me and it is really interval training. Right. Because you you do the pose and it's hard.

And then you go into Shavasana and it really teaches you to bring your heart rate down easily, to be able to go from pushing to resting. Yeah. It's it's great.

You know energy management in your body. Yeah. Yeah. So okay so let's see. So can you talk a little bit more about you know we talk about you've got to lift you've got to build muscle a little bit about why like what is that do.

Is it helping bone density. Like what's some of the physiological and the benefits like let's inspire the ladies. Like if you have never lifted weights and like, I want you to walk out of here.

Why muscle matters in midlife

Down. All right. I need to do that because tell us. Yeah. Well, and, you know, we start losing muscle at about 30. We peak at 25. We we can kind of coast for a little bit, but at 30 we're going to start withdrawing from that bank

unless we are doing something to counter it, meaning strength training and or eating a little higher protein diet.

We need those things in our life to counter that loss. That is just a natural part of aging. If we allow it to be. We know that we don't have to, but it's a choice now, now that we're aware of it.

So how we exercise during menopause really matters because not just do we have the accumulated effect of loss of muscle by about 3 to 8% every decade after 30.

So if you're 40, okay, 3 to 8%, and that range is probably those of us who are lifting and eating a little bit more protein might be at an advantage for losing less.

We're holding on to it a little bit better, but then we're 50. Okay, now that's two decades. That's pretty significant. Or three. You get the idea. And, you know, we sometimes get more sedentary.

We don't get more active depending on our jobs. But we're also in this middle, middle of life caring for older parents, caring sometimes for our kids or our kids kids, you know, and we're doing a lot of caregiving as well as our own work in our own, you know, thriving relationships.

Hopefully there's just so much going on at midlife that exercise is but a part of it. And yet sometimes we let that drop off our radar like art and music in a school system. Right?

So we kind of think, oh, this is just extracurricular. We don't really need that. Although we do have we exercise during menopause determines how we age.

And, you know, you talk about HRT and you know how much when when do you want to look at that? Muscle is an endocrine organ. We have control over that.

Whether you're on HRT or you're not on the HRT, you are capable of adding lean muscle, stimulating the muscle. You have it moving it in a way that helps to absorb blood sugar, reduce the blood sugar that you have spiking after meals or spiking because of stress.

And when you have more muscle, it's in better shape, more resilient. Every move you make all day long helps to control your blood sugar, and many women get to a point of pre-diabetes or insulin resistance is a real issue, and if you're depositing fat around your belly, that's really often what it's associated with.

The combination of cortisol plus insulin. Together, we call in the fitness industry belly fat bellies. They're just like relocating it right here for you.

And you didn't even know there was a subdivision going in. But yes, there there it is. You know, so learning that that number one is a huge source of control.

But it's also, you know, I don't know what was sexy to us when we were 38, having an hourglass shape, really feeling like we looked a certain way in a bikini or sleeveless.

But, you know, when we're 90, you know, maybe it will still be some of the same, but it's probably going to be carrying your own tray in the cafeteria is going to be sexy, right?

And carrying somebody else's. You know, our our difference is going to be independent, you know, and in so many ways. But living alone, continuing to drive.

Anybody have parents? That was a big one, wasn't it? Right. When the driving stopped, independents stopped. I mean, that really came to a halt. And so I think the longer we have reaction skills that's related to muscle your foot from the accelerator to the break, that's muscle.

That's muscle. And the neural connection that you keep instilling when you're lifting a weight. There's so much

more going on. Depression, anxiety are actually very positively influenced by strength training as well.

And sometimes I think it's an easier place to begin because you don't get breathless doing it, which almost mimics the feelings of anxieties anyway, so you're much more in control.

You're going to breathe a little harder for maybe 60s, but not a lot harder, and you're going to stop and take a breath, take a break in between those set.

So it's a much more comfortable place to start, and you will feel and see results faster. From strength training. And we are at yesterday's yesterday as far as I want results economy.

So when you're thinking, you know, how soon will I see and feel results, you may sleep better within three days. Before we wrap up I just want to get your.

This is such an important topic. You said the word protein and I just love for you to share with the listeners. What are your thoughts on how much protein needs to be, you know in intake and taking in.

Yes taking it and invest just to stay within my scope of practice. So to make everybody, you know, clear and we're on the same wavelength. I'm not a registered dietitian.

I'm not even a nutritionist. It's a quote unquote. But for two years in the fitness industry, we know we have an audience who's asking us. And so I'm sharing information based on what I'm reading and anecdotally over the years, what I've seen.

So that the shot, you know, the moon shot is about one gram of protein per pound of body weight shooting for that. But it's also, first of all, do you know what you take in in the course of a day?

Right now? And I think that's a better place to start. Don't go shooting for an arbitrary number that you just think is, how am I going to do that? Potentially.

But you're looking at how much am I getting now and how could I improve that? How could I at breakfast, just get a little bit more? What would that look like?

And you're googling a little bit more. And if you drive yourself crazy with the details for a week or two, you'll never forget it. We're creatures of habit.

We eat similar foods over and over, and once you know, you know you can't go back to holding hands, right? You. You won't go backward. You'll be aware of it.

And there are little ways that you can start just increasing by 3 to 5g at every meal. And that will make a difference. So the biggest I think factor is still total at the end of the day.

But I don't love that one. You know we use the two terms exercise is medicine. Food is medicine. And if that's true there is a dose response effect.

Protein, resources, and closing remarks

You wouldn't take a bottle of penicillin and just say well I'm going to I'm going to take all three at dinner because that's most convenient for me. We wouldn't do that.

You know. And so ideally you're going to get up. You're going to start with a high protein breakfast. You're going to distribute protein pretty evenly throughout the day.

But if you have a really high breakfast, maybe you just need a little bump again at lunch and then have a high protein meal before you go to bed. So you're entering into a fast with muscle protein synthesis, and that muscle

protein synthesis is bumped up by both resistance training and protein.

So if we can bookend workouts with high protein meals, now we're getting a double bump. So, so important is such good medicine. So our time is up because I could just talk with you all day.

But this has been so helpful. But I want the ladies to go learn more because we're, you know, we're scratching the surface here. So where can they find you?

What communities do you have? Because I know you offer a lot of workouts and trainings. And, you know, for me, when I'm listening, I'm like, I need to know, like, I need the group, I need I need the direction.

So where can work in the ladies? Learn more. Absolutely. So website is flipping 50.com all spelled out. No spaces. Social media is flipping five zero TV and if you want that, I want that five days.

Tell me exactly what to do and I will do it. I just don't know what to do. The five day flip is five short videos, so we're not doing anything extended where you're going to be tired and need a recovery afterward.

They're 15 minutes long, I promise. You've got this, but you'll understand. How do you lay out a week? What does it look like? And that's it. Flipping the Dicom forward slash, five day flip, five day flip, I love it.

Well, thank you for for helping women to age gracefully and healthy. This is such an you know it's we all have our piece. We contribute and you contribute such an important piece.

And just, you know, even as you mentioned at the end, mobility, independence like, yes, we want to look good, we want to feel good in our clothes, but we need to be thinking about independence and balancing and not falling and, you know, rocking our sacred second act and aging gracefully.

And these pieces go into it. Thank you for letting me still be able to hike and go to hot yoga. So that, you know, and I think, I hope what everyone takes is, you know, it's this holistic viewpoint of looking at your just like you look at your diet as medicine and how you're eating.

It's looking at your movement and putting in the pieces that are going to serve you and be well rounded. That's one of the most important messages I took from our chat today.

So thank you for being here. Everyone go follow her. And let's just, you know, let's just flip our 50s and our 60s and her 70s and her 80s and her 90s and evolve, as you always say, you got this girl right.

You still got it, girl. I tell you. All right. Well, thanks everyone, for being here. And we will be back with another great talk by.