

Experience Life

SEPTEMBER/OCTOBER 2026

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HORMONE REPLACEMENT THERAPY

YOUR QUESTIONS,
ANSWERED

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Take the Long View

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Experience Life DIGITAL



8 Sheet-Pan Dinners

In the ongoing quest for easy, speedy, and healthy weeknight dinners, the sheet-pan meal might just reign supreme. With a single pan and in less than an hour, you can enjoy nutritious meals that deliver big flavor.

We've put together eight of our favorite sheet-pan dinner recipes, including masala chicken, steak fajitas, and honey-garlic tofu. The trick is to give ingredients plenty of space to roast and caramelize.

Scan the QR code or go to ELmag.com/sheetpan-dinners to download our free guide.



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TALKS



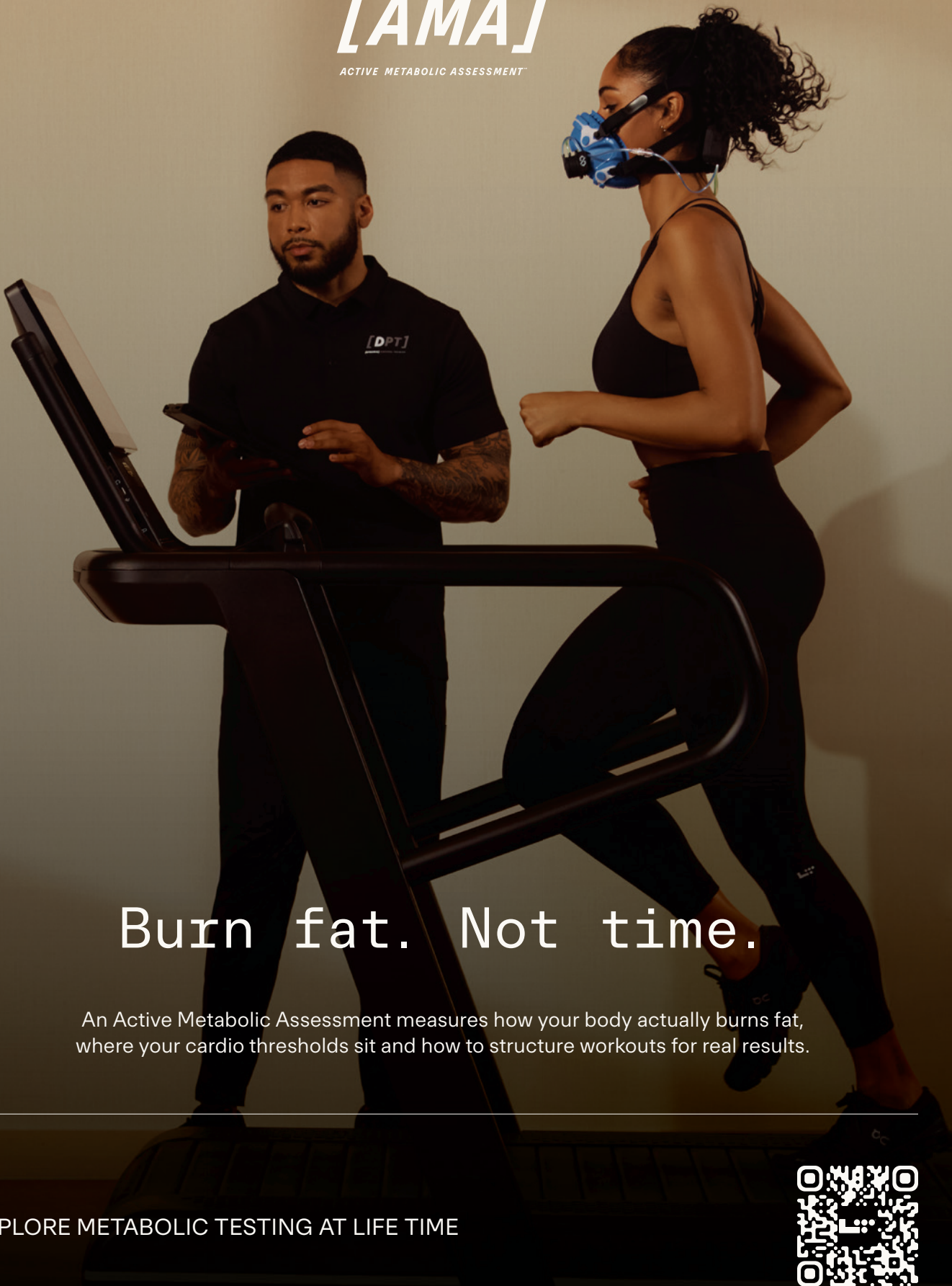
LIVING A PAIN-FREE LIFE

More than 50 million American adults experience chronic pain. In this episode of *Life Time Talks*, Sanjay Gupta, MD, talks about his latest book, *It Doesn't Have to Hurt: Your Smart Guide to a Pain-Free Life*. It features a wealth of science-backed strategies — movement, meditation, sleep, diet, and more — for relieving chronic pain. Scan the QR code or go to ELmag.com/painfreelifebroadcast to listen.



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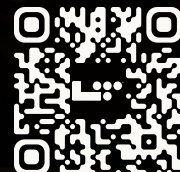
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LIFE TIME
HEALTHY WAY OF LIFE

The information contained in the magazine is intended to provide broad understanding and knowledge of healthcare topics. This information should not be considered complete and should not be used in place of a visit, call, consultation, or advice from your physician or other healthcare provider. We recommend you consult your physician or healthcare professional before beginning or altering your personal exercise, diet, or supplementation program.

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Experience Life shares health-and-wellness information and healthy-way-of-life stories that reflect a wide variety of human experiences. We respect individuals' pronouns and personal descriptors; for this reason, terms may vary from article to article.

BOTH/AND

FOR AS LONG as *Experience Life* has been in publication, functional medicine has been a touchstone in our health coverage. Focused on getting to the root cause of disease, rather than treating symptoms, functional medicine's intent is to help manage and restore patients' health and function. Practitioners do this by considering an individual's unique circumstances, including the genetic, environmental, and lifestyle factors that might be contributing to the dysfunction or imbalance in their bodies.

Whether we're reporting on allergies or autoimmune conditions, the team at *Experience Life* consistently incorporates expert insights and proven strategies gleaned from functional medicine. In fact, many of the health topics we cover are inspired by what we learn each year at the Institute for Functional Medicine's Annual International Conference, where hundreds of health practitioners come together to learn the latest from some of the best in the field.

I attended this year's event in late spring with two of my colleagues, and we took in dozens of sessions, learning about gut health, perimenopause, immunometabolism in children, behavior change, and much more. It was a lot to absorb, and I loved it.

The highlight for me, though, was interviewing several of the presenters, including Robert Bonakdar, MD, the director of pain management at the Scripps Center for Integrative Medicine. The title of his presentation — "Healthspan: What the World Has to Teach Us" — caught my eye on the agenda, and it inspired our conversation, which turned out to be one of the most memorable of the conference. These were a few my key takeaways:

- There are many definitions of healthspan, Bonakdar explained, and the majority do not include any mention of quality of life. He prefers to reframe healthspan as "wellspan," which considers essential lifestyle elements that go beyond symptoms and diagnoses and contribute to an improved quality of life.
- According to a 2024 report, the United States has the largest healthspan-to-lifespan gap — 12.4 years — among 183 member states of the World Health Organization. Per Bonakdar, this means we have, on average, more years of "functional limitations, chronic diseases, and disability" before end of life than these other countries. Yet we are investing more in the pursuit of longevity than most of these places.
- Bonakdar advocates for broadening the "core targets of healthy aging" — exercise, nutrition, sleep, stress management, and cellular health — to include subjective measures, such as maintaining strong social connections, spending time in nature, practicing kindness and compassion, participating in the arts, being of service, being resilient, and having a sense of purpose.

These factors fall into the category of social prescriptions, and they're important for wellspan, which Bonakdar defines as "the period of life in which one sustains purpose, connection, creative engagement, and service — encompassing not merely the absence of disease or disability, but the active presence of what makes life worth living."

As we envision what our years ahead might look like, it's not either/or when it comes to healthspan or wellspan; it's both/and. If we want our healthspan *and* wellspan to match as much of our lifespan as possible, getting there starts with today's actions, behaviors, and choices. Let's go.



If we want our healthspan *and* wellspan to match as much of our lifespan as possible, getting there starts with today's actions, behaviors, and choices.



YOUR THOUGHTS?

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TALK TO US

EXERCISE AND CANCER

✉ Thank you so much for the article on working out during cancer (“A Guide to Exercising During Cancer Treatment,” May/June 2026).

The writer stresses the real science behind what exercise can do, but there is so much going on in your head and life when you get that diagnosis that it is hard to even focus on exercise. Fortunately, my trainer and my husband made sure I kept up with my training, which has always been a part of my life. There were days when getting to my scheduled session was a challenge, but my trainer always worked around my issues, went with the ups and downs of chemo, and repeatedly said, “All that counts is that you are here.”

Elaine L.

MIND-BODY INSIGHTS

✉ The article “Everything You Need to Know About Energy Psychology” in the May/June 2026 issue is amazing! I’m a social worker trying to teach colleagues about mind-body principles for healing (the psyche), and this article is chock-full of great insights. You are informing your readers to be more aware of the mind-body connection and hopefully to expect more from a psychotherapist.

Ruth M., LMSW, RYT500

FOOD FOR THOUGHT

✉ “Can Drinking Diet Soda Increase the Risk of Developing Type 2 Diabetes?” in the May/June 2026 issue got my attention. I remember years ago sitting in the radiology department with my wife waiting for her to be called in for her MRIs. I knew the basic principle of how an MRI works: It doesn’t actually “see” the cancer but instead detects sugar being consumed by cancer cells.

So I assumed the artificially sweetened drinks my wife chose would prevent the MRI from seeing the cancer. Not so. Apparently, cancer cells will happily munch on the



artificial sweeteners just like they will on real sugar.

Frank L.

👤 I tried this recently (“Raspberry Crisp for Two,” May/June 2026). I like my desserts a little sweeter; however, with a dab of Sigg’s vanilla yogurt and honey, it was just right. I enjoyed that version so much, I’m making another batch.

Cynthia

👤 I wish I had known about this protocol sooner (“How Real Food Can Help You Heal After Surgery,” March 2026). When I had cervical fusion

surgery, they gave me only Jell-O and applesauce for two days.

Tina M.

A KETAMINE BREAKTHROUGH

👤 I have been doing ketamine infusions for a few years, and it has been a game-changer (“Can Ketamine Therapy Help Treat Depression and Other Mental Health Disorders?,” March/April 2026). My mother has always been “anti-drug,” so she never approved of my infusions. Your article opened her eyes, and now we can discuss this without the stigma.

Eric M.

A TAI CHI TESTIMONY

👤 I have done tai chi for almost 20 years, and it has improved my balance and helped me move easily (“How Play-Inspired Moves Can Boost Your Fitness,” July/August 2025). I am 90 and still doing tai chi.

Lora P.

WHEN SUSTAINABLE MEANS SAFE

👤 In California, we need to think of sustainable yards that are firesafe (“6 Tips for Creating a Sustainable Yard,” March/April 2024). We had to take out all the trees within 100 feet of our house. No wood fencing or gazebo. So we are redoing it all. We need to do our part.

Carla F.

GETTING COMFORTABLE WITH CHANGE

👤 This really resonated with me (“Understanding Change,” April 2021). The past year has brought some of the biggest changes of my life. While the transition hasn’t always been easy, I can finally say I feel aligned with brighter, bigger things ahead. I’m learning that change isn’t always something to fear; sometimes it’s the very thing guiding us toward the next version of ourselves.

Emily S.

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MUSCLE: YOUR SUPERPOWER FOR LONGEVITY

IT'S NO SURPRISE that strength training helps you retain mobility, coordination, and balance as you get older. But building and maintaining muscle supports longevity in ways you may not have considered, says functional-medicine physician Frank Lipman, MD.

Research increasingly points to muscle as a biological system that helps determine how well you age. "Muscle is a major metabolic organ," explains Lipman. "It's an endocrine organ. It helps maintain healthy mitochondrial activity. You've got to see muscle way beyond just preventing disability."

What follows are six reasons — beyond protecting yourself from frailty and falls — to focus on building strength.

1. Muscle keeps blood sugar in check. Think of muscle as a metabolic sponge, sopping up 75 to 80 percent of your body's insulin-stimulated glucose and storing it as glycogen until you need it. Without sufficient muscle, blood sugar rises and insulin resistance increases, elevating your risk of prediabetes and type 2 diabetes. "Generally, a higher muscle mass lowers the risk of type 2 diabetes and metabolic syndrome," Lipman says.

2. Muscle sends endocrine signals throughout your body. When it contracts, skeletal muscle releases signaling molecules called myokines to your liver, heart, blood vessels, immune system, and brain. These myokines help reduce chronic inflammation, improve fat metabolism, and regulate immune function.

3. Muscle protects and boosts brain health. Myokines reduce oxidative stress and neuroinflammation and support the growth and survival of neurons. "One of the myokines is brain-derived neurotrophic factor, or BDNF, which supports neuroplasticity, memory, and mood — and also probably reduces dementia risk," says Lipman. "Exercise also improves cerebral blood flow. Stronger muscle is correlated with slower brain aging."

4. Muscle keeps the heart and blood vessels strong. "Myokines act on cardiovascular tissues, decreasing inflammation and improving blood flow," he explains. Resistance training boosts cardiovascular resilience by lowering blood pressure, enhancing vascular elasticity, and improving the function of the endothelium, the inner lining of your vessels.

5. Muscle tames chronic inflammation. Low-grade inflammation is a hallmark of biological aging. Losing muscle is associated with elevated inflammation signaling in your body; building and maintaining muscle mass can improve immune-system regulation and reduce chronic inflammation. By protecting against age-related immune decline, muscle helps you be more resilient when faced with infections and chronic disease.

6. Muscle helps you recover from illness. When you're sick, injured, or recovering from physical trauma (including surgery), your body draws on muscle tissue to support healing. Muscle supplies amino acids (the building blocks of protein) for immune responses, wound healing, and tissue repair. "Especially when you're sick, you need those amino acids to recover," Lipman says.

He gives one more reason to lift: to lose visceral fat — deep abdominal fat that surrounds organs — which has the opposite effect on longevity. It drives chronic inflammation and immune dysfunction, worsens insulin resistance, and promotes arterial stiffness. Fortunately, strength training can help you lose it.

— JILL PATTON, NBC-HWC

THE CONNECTION BETWEEN SLEEP AND GUT HEALTH

Chronically poor sleep can leave you sluggish and grouchy. It has also been linked to a range of health concerns, including mood disorders and chronic illnesses, such as inflammatory bowel diseases, type 2 diabetes, and hypertension.

As if that's not bad enough, irregular or insufficient shuteye can also sabotage your gut health and lead to serious digestive issues.

A new study involving lab mice, published in *Cell Stem Cell*, unveils how this chain reaction may work: Disturbed sleep prompts the brain to send warning signals via the vagus nerve to the intestines. This lack of sleep ultimately causes oxidative stress to the stem cells charged with renewing the gut lining and keeping it healthy.

"When sleep signals go awry, the gut essentially pays the price," says study coauthor Maksim Plikus, PhD, professor of developmental and cell biology

"When sleep signals go awry, the gut essentially pays the price."



at the University of California, Irvine. "We were surprised to see how precisely the brain communicates sleep defects to intestinal stem cells. This helps explain why chronic sleep disruption can make the gut more fragile and prone to disease."

The results reinforce just how interconnected and interdependent organs, tissues, and cells are in the body, Plikus says. "Normally, the vagus nerve is a major conduit for physiological information between the brain and the gut when we are healthy and everything is functioning normally. It is quite reasonable that the same conduit will pass pathological information as well."

Consider your gut health one more reason to commit to good sleep hygiene. (For advice on getting a good night's sleep, see ELmag.com/qualitysleep.)

— MICHAEL DREGNI

THE QUICK AND EASY HEART TEST YOU MAY NOT HAVE HEARD OF

A simple but little-used clinical procedure has been shown to help doctors determine whether a patient's high cholesterol levels correlate with excess calcified plaque in their coronary arteries.

So why isn't it used more often?

A coronary artery calcium (CAC) scan allows cardiologists to create a more personalized treatment plan than they could with just cholesterol or blood-pressure numbers.

"For years, physicians have used risk calculators to determine risk and who should be on statins," explains integrative cardiologist Mimi Guarneri, MD.

"Unfortunately, the old risk calculators — which are still used today — do not include markers for inflammation or coronary artery calcification."

The scanning process is quick and noninvasive. But it involves mild radiation exposure and can prompt significant follow-up testing, so some

experts believe these drawbacks outweigh the potential benefits.

Yet, as Johns Hopkins University cardiologist Michael Blaha, MD, tells *The New York Times*, "It's still being underused compared to its value."

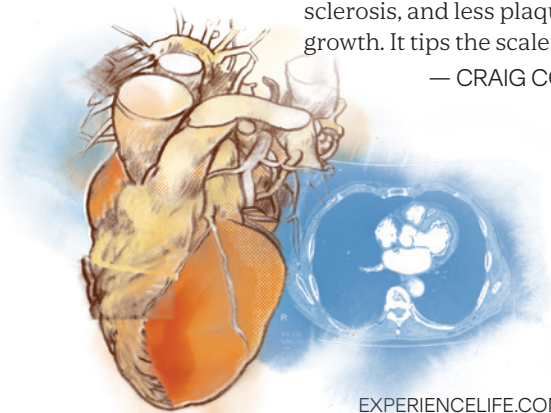
One obstacle might be price: The procedure can cost \$100 to \$300 and is not covered by Medicare or most private health-insurance plans.

Another reason may be related to concerns about statins, which are usually the recommended treatment after a high CAC score.

A 2019 survey found that 10 percent of respondents declined a statin prescription, and another 30 percent discontinued their statin use primarily due to a fear of side effects.

The scan does lead to more statin prescriptions, notes Northwestern University cardiologist Philip Greenland, MD, but it also produces "better adherence to statins, less progression of atherosclerosis, and less plaque growth. It tips the scale."

— CRAIG COX



ANTI-INFLAMMATORY DRUGS AFTER SURGERY MAY PROLONG PAIN

Taking anti-inflammatory drugs after surgery to treat pain is common practice. But blocking the healing effects of postsurgical inflammation may backfire — delaying recovery, prolonging pain, and even leading to chronic soreness.

That's the conclusion of a recent study on mice published in the *Journal of Pain Research*.

Inflammation plays a critical yet paradoxical role in injury recovery, rushing white blood cells to mend damaged tissue and battle any invading bacteria. Side effects, though, often include pain, swelling, and warmth. Doctors worry about inflammation becoming chronic and leading to other issues, so anti-inflammatory drugs — including prescription and over-the-counter varieties — have become common.

"Inflammation is not necessarily a bad thing," explains senior study author Geoffroy Laumet, PhD, an associate professor of physiology at Michigan State University. "Yes, it hurts, but it's also working on the inside to promote the resolution of that pain. The idea in the medical field that when you have an injury you should absolutely block the inflammation right away might not always be the best strategy."

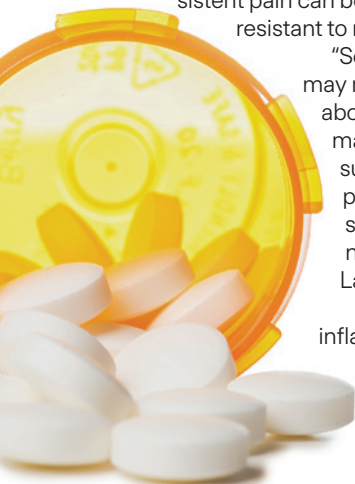
Laumet's team found that blocking inflammation after surgery actually increased pain in the long run. "It was an unexpected result," he says. Taking the anti-inflammatories "prevented the body from turning off the pain normally."

Each year, more than 40 million Americans undergo surgery. The pain eases normally for 90 percent of patients, but the other 10 percent develop chronic pain, says Laumet. And that persistent pain can be tough to treat, becoming resistant to medication, he warns.

"Scientists and clinicians may need to think carefully about how inflammation is managed after injury or surgery, because completely suppressing it might sometimes interfere with natural recovery processes," Laumet says.

(For more on anti-inflammatory drugs, see ELmag.com/NSAIDs.)

— MD



HOW MUSIC PROTECTS YOUR BRAIN

Music lovers, especially those who listen regularly, may be doing their brains a favor.

Researchers at Australia's Monash University, analyzing data from nearly 11,000 participants who took part in a major longitudinal study, found that frequent music listeners were less likely than infrequent listeners to develop dementia.

"They also had a decreased risk of experiencing more general cognitive decline," senior researcher Joanne Ryan, PhD, tells *The Washington Post*. "And we also found that in that time

who played an instrument reaped similar benefits: a 35 percent lower risk of developing dementia.

Because it was observational, the study — published in the

Those who played an instrument reaped similar benefits: a 35 percent lower risk of developing dementia.



period, they performed better, consistently better, on the tasks of memory and also on a global cognitive function test."

Participants were 70 or older and cognitively healthy when they volunteered for the ASPREE Longitudinal Study of Older Persons. Over the next 10 years, they responded to questionnaires about their engagement with music and underwent annual cognitive tests.

The Monash team found that those who listened to music frequently were 39 percent less likely to develop dementia. Those

International Journal of Geriatric Psychiatry — does not prove that listening to music reduces the risk of dementia. It does, however, add to mounting evidence that music activates parts of the brain that are key to cognitive function.

"One of the things that seems to be really important is just getting all those areas to talk to each other in meaningful ways," Elizabeth Margulis, PhD, director of Princeton University's Music Cognition Lab, tells the *Post*. "That's something music is exceptionally good at doing."

— CC



YOUR BODY ON SUGAR

MOST OF US eat too much sweet stuff. And while our collective sugar consumption has been declining, the average American still consumes around 100 pounds a year — the equivalent of more than 300 percent of the recommended daily amount of added sugar. Over time, all that sugar can increase the risk of obesity, hypertension, high cholesterol, and insulin resistance. Sugar can affect various parts of your body in different ways.



Mouth: Your body's first defense against sweets is your oral microbiome — the billions of microbes that begin breaking down sucrose into glucose and fructose. Sugar can erode tooth enamel and raise cavity risk, and it can also upset this microbial balance and lead to oral dysbiosis, which can harm your overall health.

Gut: The breakdown of glucose and fructose continues in your digestive system. Fructose is difficult to absorb, and this malabsorption can lead to gas, bloating, and irritable bowel syndrome. Sugars can feed yeast and fuel a candida overgrowth in the gut. Too much sugar can also disrupt your gut's microbiome and damage your intestinal lining, leading to leaky gut syndrome.

Pancreas: This organ produces insulin, which helps your body process glucose to fuel your cells. Too much sugar can hamper this operation and lead to insulin resistance. Your pancreas compensates for excess glucose by making more insulin, but eventually it can't effectively regulate blood-sugar levels. This imbalance can lead to prediabetes and type 2 diabetes.

Liver: If your liver is overwhelmed by sugar — particularly fructose — it starts to convert it into visceral fat. This can lead to fatty liver disease, also known as Metabolic Syndrome Associated Steatoic Liver Disease (MASLD), which affects about a third of American adults.



Brain: Glucose is essential for cognitive function, but too much can lead to dysregulated blood sugar, making you irritable, fatigued, and anxious. Excess sugars may also trigger inflammation that can disrupt mood-regulating neurotransmitters. And sugar trains your brain to crave it by lighting up the brain's reward center and triggering the release of dopamine, reinforcing those neuropathways. In the long run, higher blood-sugar levels can lead to brain shrinkage, specifically in areas connected to cognition and memory.



Joints: As your body metabolizes fructose, it creates uric acid. Too much uric acid can lead to the formation of crystals in the kidneys that may become kidney stones. Crystals may also accumulate in your joints, leading to the painful inflammatory arthritis known as gout. Finally, these crystals can also collect in the arteries and harm your heart.

Heart: Fats that the liver makes from sugars can be released into the blood, increasing levels of triglycerides and "bad" LDL cholesterol. This can clog your arteries, heighten blood pressure, and increase the risk of cardiovascular disease. These circulating fats may also lead to visceral fat accruing around abdominal organs, creating chronic inflammation that can lead to heart disease. 🧠

WHAT'S THE SWEET SPOT FOR SUGAR?

The U.S. Food and Drug Administration recommends that no more than 10 percent of your daily calories come from added sugars. If you consume 2,000 calories per day, this works out to a max of 50 grams of added sugars. Other sources recommend far less: The American Heart Association recommends 6 percent — about 30 grams of your 2,000 calories. And for optimum health, some experts believe it should be half that, or about 15 grams per day from all sources.

— MD



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A Fresh Take

A longtime clinical pharmacist and the chief science officer at Life Time explains the connection between peptides, healing, and aging.

BY CRAIG COX



JIM LAVALLE was a collegiate bodybuilder and budding pharmacist when he discovered the health-promoting power of dietary supplements. He had just successfully qualified for a major national bodybuilding contest, yet found himself dragging in the aftermath. “I just didn’t feel good,” he recalls.

On the referral of his cousins, he reached out to an integrative-medicine physician who ran some tests and prescribed some nutrients that supported LaValle’s adrenals while improving his gut health. He also offered some advice on larger dietary changes. The effects were profound.

“It just lit a fire in me,” LaValle says. “Like, wow, how come more people don’t know about this?”

For the past 40 years, LaValle, RPh, CCN, has been spreading the word about the importance of metabolic health, first as a pharmacist in Cincinnati, later as a clinical pharmacist, and today as the clinical cochair of the American Academy of Anti-Aging Medicine, chair of the International Peptide Society, and chief science officer for Life Time. His work and research have helped elevate longevity treatments, including nutritional approaches, bioidentical hormones, and the use of peptides, into the mainstream.

The results have not been without some controversy, so we asked LaValle to help us separate the hype from the healthful in this fast-evolving science.

Q&A

EXPERIENCE LIFE • Let’s talk about the biology of aging — specifically, how we struggle to keep our metabolism in balance as we grow older. At what point do we tend to begin losing that battle?

JIM LAVALLE • People used to say, “Oh, you’re in your 40s; you’re probably starting to feel poorly,” right? Now it’s more like, “Hey, you’re in your late 20s; you’re probably starting to feel poorly,” right? One of the most significant reasons for this is the metabolic impact of cortisol. People are experiencing more stress at younger ages; when you start to alter your normal cortisol pattern, your body creates more adrenaline, which accelerates aging.

More adrenaline means you become sympathetic-nervous-system dominant — you lose heart-rate variability, so your blood pressure may start to go up. You start to notice cognitive changes.

Managing cortisol is important because it impacts virtually all your other organs and tissues.

But probably the single biggest disturbance that causes accelerated aging is dysregulated glucose and insulin. This can lead to inefficient energy production and an increase in insulin production, which is often a sign of insulin resistance. That combination of factors is a major contributor to metabolic inflammation — or “metaflammation” — which can lead to “inflammaging.”

EL • We often talk about cortisol and sex hormones, as well as thyroid and growth hormones, as distinct, but you have described how they influence one another and the body’s entire “system of systems.” Why can looking at lab values individually be problematic?

JL • Your body works in networks and, honestly, all those networks are working together to keep your health on track as you age. Nothing works in isolation. For instance, if lab work shows your

thyroid-hormone levels are out of range, it could be because other hormones, such as cortisol, are off. That's why looking at a single lab can be deceptive.

Looking at your labs in patterns or systems can help you see where you might be trending toward a condition. So, looking at lab values from the lens of maintaining or improving health versus diagnosing sickness creates a big difference in the way you evaluate someone and what actions they take.

EL • Let's talk about peptides. What should we understand before we consider using them?

JL • Peptides are chains of amino acids shorter than a protein. Your body makes thousands of these signaling molecules to help regulate how the body functions. Peptides are also found in plants and in food, and many are being researched for how they can support health or improve healing. For instance, BPC-157 is being studied for how it can help with gut health and recovery from injury.

Peptides hold a lot of promise, and they already play an important role in healthcare. Insulin, the first peptide discovered, has saved millions of lives. And today, GLP-1s are playing a role in diabetes management and weight loss, addressing glucose regulation and the problems associated with glucose and insulin signaling.

That being said, if you are interested in using peptides for a medical reason, it's important to do so only under professional guidance. Today, a lot of people are buying research-use compounds that aren't made to the standard that would guarantee safety for human use. . . . Buying products online and injecting yourself without guidance and oversight can be dangerous.

As exciting as new peptides are, it has to be excitement with caution: *How do I use them? When do I use them? Are there lab values that I need to know before I consider taking them?* If you're going to consider using peptides, it's critical to work with a professional who's knowledgeable in them, who can guide you in them, and who can monitor how they affect you in case there are any side effects.

EL • What about mitochondrial peptides and longevity?

JL • All chronic degenerative illnesses have a mitochondrial component, which means there's evidence of

mitochondrial stress and a lack of mitochondrial efficiency. That happens for a lot of reasons. And as soon as your body gets into that chronic metabolic-inflammation signaling, the efficiency of how you make energy is affected, and the mitochondria start to get either damaged or destroyed.

For instance, if you have low thyroid function, you likely have impaired mitochondrial function in your cells. So, the powerhouses of your cells can't make the energy you need to create all the metabolic signals and communication in your body.

Mitochondrial function is involved in everything from cognition and power capacity of muscle to immune function.

Mitochondrial peptides help restore the integrity of the mitochondria. They improve the density and the number of mitochondria within the cell. That's going to help you have — for lack of a better term — younger, healthier cells.

EL • You mentioned GLP-1s for weight management. What's the biggest risk with them?

JL • A lot of people are using GLP-1s for weight loss, but if they are not following a comprehensive program that includes strength training and eating enough — including getting enough protein — up to 40 percent of weight loss can be in lean mass. Muscle is metabolically active, so if you lose that, you're losing metabolic efficiency and the capacity for resting-energy expenditure.

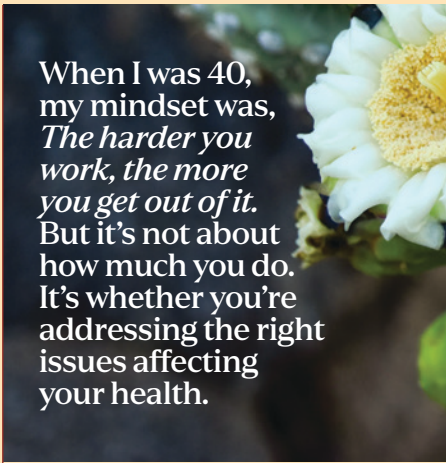
Lean mass is the currency of performance health and longevity. You're going to age better if you keep lean mass, so that's a big concern.

As with all peptides, it's important that people not buy GLP-1s online and self-medicate. Before starting a GLP-1, they should first understand their current health status, based on their unique bloodwork, as well as the risks.

EL • How about GLP-1s as a longevity peptide — can you make a case for that?

JL • I think it's legitimate, and here's why. Look at dementia, for example, which is also, colloquially, called type 3 diabetes; it's related to glucose and insulin disturbances. Elevated lipids are related to glucose and insulin dysregulation.

When you start to regulate glucose and insulin, as GLP-1s do, you see an improvement in your lipid profile. You're not craving foods as much.



When I was 40, my mindset was, *The harder you work, the more you get out of it.* But it's not about how much you do. It's whether you're addressing the right issues affecting your health.

GLP-1s seem to help correct one of the critical factors in why your accelerated aging is occurring. As I said earlier, glucose and insulin sit at the center of "inflammaging," and once people become insulin resistant, it can eventually lead to diabetes. Then they're at heightened risk for heart disease, kidney disease, dementia, even certain cancers. So it's not a surprise that you're seeing some literature now being published suggesting that GLP-1s may help address some conditions — well, of course, because you're improving glucose and insulin regulation.

EL • What do you know now about aging that you wish you'd understood at 40?

JL • When I was 40, my mindset was, *The harder you work, the more you get out of it.* But it's not about how much you do. It's whether you're addressing the right issues affecting your health or working on effective prevention and performance-improving strategies.

So, it's paying attention to *What are the symptoms that I'm having? What are my lab values?* And then approaching the aging process in a targeted way with specific goals in mind.

How do you exercise differently when you're 50 versus 60 versus 70? That's my journey. I've been an avid exerciser throughout my life, and I learned the importance of recovery by tracking the data on my wearable devices: *What's my heart-rate variability? Is my recovery good? What's my resting heart rate? How's my flexibility? How am I sleeping?* Those are all important factors for successful aging. 🧘

CRAIG COX is an *Experience Life* deputy editor.

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What Are You READING?

EL staffers share their latest literary pursuits.

I'm enjoying **BEAUTYLAND** by Marie-Helene Bertino. The story follows Adina, who believes she's an alien. As she grows up in Philadelphia, Adina faxes observations about modern life and humankind to her far-off home planet. Is it absurd? Definitely. But it also makes more sense than anything else at the moment.

— **Molly Tynjala King**,
senior editor/lead fact checker

DEAD AND ALIVE: ESSAYS by Zadie Smith. A brilliant collection of essays about the way we live now, packed with Smith's trenchant, funny, and deeply humane observations. I bought the hardcover but switched to the audiobook when I realized Smith herself is the narrator — she's so good!

— **Anjula Razdan**,
senior director—digital

THE NEW YORKER. I had let my subscription lapse about a year ago, but I missed the unmistakable writing and recently resubscribed. Even when I don't finish an issue, I'm amazed by how many of my particular interests are reflected in the table of contents.

— **Brett Fechheimer**,
fact checker/copy editor

Patrick O'Brian's Aubrey-Maturin series, starting with **MASTER AND COMMANDER** and continuing for 19 stellar volumes. I'm always reading and rereading these: When I finish the series, I start over again — usually with Jane Austen novels interspersed.

— **Michael Dregni**,
deputy editor

THE PARIS NOVEL by food writer Ruth Reichl. A shy copy editor goes to Paris and discovers her love of oysters, art, and life — all unlocked by a magic dress she discovers in a vintage shop. It's a fun read and a tribute to aliveness.

— **Courtney Helgoe**,
executive editor

I am currently reading a book called **FRIZZY**, by Claribel A. Ortega, with my daughter, alongside Michelle Obama's **THE LOOK**. You wouldn't think a graphic novel and a coffee-table book would have much in common, but both brought me to tears with their honest review of what self-love is for Black women: attainable and deeply necessary.

— **Tatyana McNamara**,
senior manager—multimedia



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Heart of an Athlete

As a pilot, fitness was a necessary part of my career. But it's long been more than a job requirement to me.



BY BILL WEINER

Clockwise from top left: Bill running the Twin Cities Marathon in October 2001; with his daughter in 2026; with his daughter and grandsons in 2026.

A FEW DAYS into 2026, I ended my workout in the Life Time sauna beside a few other morning regulars. While sweating in the dry heat, we compared our annual “report cards,” which reflect the number of times we visited the club during the previous year. My number, 345, was the highest in the group.

Until then, no one had asked me how old I was. But now they were curious. When I told them I had just turned 80, they were surprised. I was significantly older than anyone else in the sauna.

Despite my age, I've never had a hip or knee replacement or spent a night in the hospital. Not many of my friends can say that. And even though I have a family history of heart problems, I continue to live free of major cardiac issues. As far as I'm concerned, that good health comes down to my commitment to working out almost daily for most of my life — a habit I developed at a young age.

TAKEOFF

I've been passionate about fitness and flying for almost my entire life. I

grew up in Osseo, Minn., and played football, basketball, and baseball in high school. A helicopter ride I took when I was 10 sparked a dream of becoming a pilot. From then on, I asked my mom to pack carrots in my lunch to help my vision.

After graduating from the University of St. Thomas in 1967, I enlisted in the Marine Corps. A competitive athlete at heart, I relished the physical challenges of boot camp and was eventually sent to Pensacola,

Fla., to join the aviation program. I had the opportunity to land jets on World War II-era aircraft carriers — one of the most thrilling things I've ever done.

I was released from active duty in 1971 after being stationed in Japan, and I began flying corporate aircraft for 3M and eventually for commercial airlines. After flying fighter planes at more than twice the speed of sound, it was like going from driving a Corvette to steering a cement truck. But I still enjoyed my career.

DEEPER MOTIVATION

I've had plenty of incentive to

stay active. As a member of the Marine Corps Reserve, I took an annual physical-fitness test until I retired from the Reserve in 1992. Additionally, the FAA required pilots to pass a medical screening every six months — and when I started flying commercially, pilots who needed medication for hypertension or diabetes weren't allowed to fly.

My primary motivation for staying fit, however, was more personal: Shortly after I joined the Marines, my mom died from heart disease at the age of 59. The loss was a tough reminder that fitness is more than a pastime; it's a health investment.

After returning home from active duty in 1971, I directed my competitive energy toward a new goal: running marathons. I'd been told that cardio workouts were best for heart health, and I wasn't about to take any chances with mine. I ran my first race, the Marine Corps Marathon, in 1978, and I competed in many others in the years that followed, including the Boston Marathon in 1992.

During this time, I also frequented my local YMCA to lift weights. A physical therapist told me my legs and back were relatively weak

Fitness is more than a pastime; it's a health investment.

compared with my chest, which was hard for a runner like me to accept. But she was onto something, because once I began exercising to strengthen my back, legs, and hips, I suffered fewer injuries. Even so, running remained my priority. Logging 60 or so miles a week left little time for other workouts.

I ran my last marathon in 2004, just before I reached the airline's mandatory retirement age. With more free time, I decided to prioritize strength training. I alternated between upper-body weights one day and lower-body weights and cardio the next. I now also include balance work and stretching, but I most look forward to lifting.

SHARED PASSION

My fitness journey hasn't been a solo affair. While training for marathons in the '70s, I ran with my Siberian husky, Tanya, a few times a week. Whenever she heard me get her leash, she would run in circles and jump up and down. Her excitement inspired me: I don't think she wanted to run for anything other than the pure joy of moving.

When she died in 1984 at the age of 13, the vet said that all the running she'd done had helped her live such a long life. I hoped that one day I'd be able to say the same.

My sweetheart, Sue, has always been supportive. We've been married more than 58 years now, and fitness has long been part of our relationship. In fact,

it was Sue who clued me in to a new Life Time club in Eagan, Minn., in 1994. Construction hadn't even begun, but we joined as members at a trailer on the property. We have since changed clubs after moving, but having a place to work out has always been a priority for us.

We raised our two daughters to also be active: For close to 20 years, I ran the Key West half-marathon with my youngest daughter, Chrissy.

Running is still something I enjoy, so I often sign up for races with Chrissy or one of my four grandsons.

They all understand the thrill of the finish line — whether it's a 5K or half-marathon — as much as I do.

After so many years, movement isn't a choice for me — it's part of who I am.

CARRYING ON

My longtime commitment to fitness has done more than keep me in good physical condition. In 1996, after three of my five sisters suffered cardiac events within a six-week time frame, I visited a cardiologist for a checkup. A calcium scan showed some blockage in my arteries, so I started taking a statin. But I know it could have been much worse.

At my last cardiology checkup, just before my 80th birthday, my doctor said that I have the physical heart of a 65-year-old. He recommended I keep doing what I'm doing, which is an easy prescription for me to follow because I enjoy it so much. After so many years, movement isn't a choice for me — it's part of who I am. 🏃

Bill's Top Takeaways

1.

Commit. "Know that there is a difference between being interested in something and being committed to it," Bill advises. Commitment has more staying power.

2.

Track progress with a fitness journal. "You will discover that some of your best workouts will be on days that you really did not want to get up and go to the club."

3.

Trust the process. "Long-term results will follow if you just keep showing up," he says.



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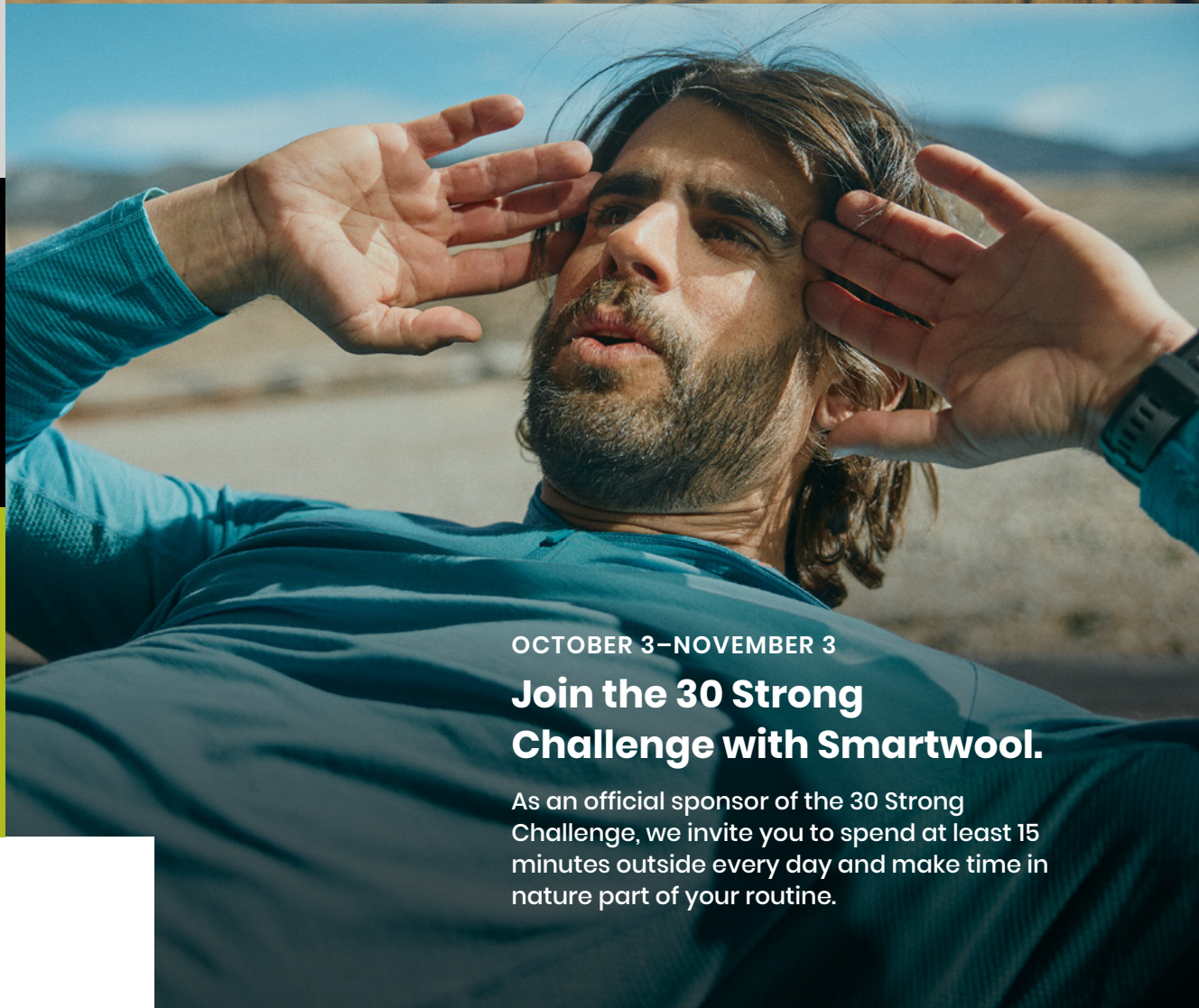
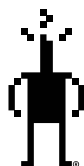


Bill (above and center left) enlisted in the Marine Corps in 1967, where he started his career as a pilot.



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REAL FITNESS

IT'S EASY to become overwhelmed by the myriad ways to assess your fitness and longevity. Cut through the confusion by focusing on three fitness markers that really count. Find them on **page 32**.

COZY CORE CIRCUIT

This low-barrier routine can help you build strength from the inside out.

BY **RACHEL
MACPHERSON,**
CPT, CSCS

MOVEMENT HABITS

are an important part of a healthy life. But some days the thought of changing into workout clothes, getting to the gym, and powering through an intense session can feel like too much. On those days, a “cozy” workout might be just what you need.

The idea behind cozy workouts is to strip away the barriers that keep you from moving. Can’t get a strength session in? That’s OK! Want to stay in your PJs or sweats? No problem! Not in the mood to stand up? Cozy workouts have you covered. Match your space, your outfit, your playlist, and your pace to a vibe that’s as mellow as you like. So long as you’re moving, you’re winning.

Core workouts, particularly, make for good cozy workouts. That’s because many core moves are low-impact, low-sweat, low-equipment, and floor-based. Plus, engaging the

core can warm up the body and create the sense of coziness you might be craving, says Life Time personal trainer and Pilates instructor Jennifer Menk, 500 RYT.

Not to mention, core work is a beneficial piece of any fitness routine. More than just abs, the core is a network of muscles that wrap around your midsection from your shoulders to your hips, including your deep stabilizers, obliques, lower back, and glutes. This network acts as a support system for nearly every move you make.

“Core work benefits everyone, from sedentary individuals to elite athletes,” Menk explains. “It is especially valuable for improving functional movement, reducing back pain, and boosting athletic performance.”

Menk (pictured) designed this cozy core circuit to emphasize deep abdominal engagement by matching movement to breath. The workout uses diaphragmatic breathing — breathing into the belly rather than the chest — to guide your movement, which further supports posture, stability, and movement efficiency.

“Deep belly breaths can help prepare the body for movement, bring more intention into core connection, and turn on the cozy more quickly and completely,” says Menk.



THE WORKOUT

Begin with 30 to 60 seconds of diaphragmatic breathing to engage your core and prepare your body: Start in a supine position with your spine neutral, knees bent, and feet flat on the floor. Rest your hands on the sides of your abdomen, with your thumbs on your lowest ribs and your pinkies on your hip bones.

Inhale through your nose, feeling your belly and back expand. Exhale through your mouth, feeling your belly and back returning to neutral. Come back to this deep-breathing pattern throughout the workout — and avoid holding your breath.

Then perform these exercises in order, resting as needed between moves. Complete three rounds for a workout that takes about 15 minutes.

Make any move easier by shortening the lever (bending knees or elbows instead of extending limbs), holding for shorter periods, or completing fewer reps. Make any move harder by lengthening the lever, adding more time or reps, or introducing light weights.

BIRD DOG x 30 SECONDS



Start on all fours with wrists under shoulders and knees under hips.



On an inhale, extend your left arm and right leg. On an exhale, return to the starting position.

Switch sides and repeat. Alternate sides for 30 seconds.

FOREARM PLANK x 30–60 SECONDS

Place your forearms on the floor with elbows directly under shoulders.

Step your feet back so your body forms a straight line from head to heels.

Breathing steadily, hold for 30 to 60 seconds.



DOLPHIN PUSHUP x 30 SECONDS



Begin in a forearm plank. On an exhale, pike your hips up so your body forms an inverted V.



Pause briefly, gazing toward your legs as you complete the exhale.

On an inhale, return to the plank position.

Repeat for 30 seconds.

MOUNTAIN CLIMBER x 30 SECONDS

Begin in a high plank. Maintaining the line from head to heels, draw one knee toward your chest, then switch legs.

Move at a brisk pace, breathing steadily as you alternate legs for 30 seconds.



DEAD BUG x 30 SECONDS

Lie on your back with your arms extended toward the ceiling, knees in tabletop position, and toes pointed.

On an inhale, simultaneously lower your left arm and right leg away from each other. Exhale to return to the starting position.

Switch sides and repeat. Alternate for 30 seconds.



HEEL TAP x 12-15 REPS/SIDE

Lie on your back with your knees in a tabletop position, hands by your sides, and feet flexed.

On an exhale, lower your left heel to tap the floor. Inhale to return to the starting position.

Switch sides and repeat. Alternate for 12 to 15 reps per side.



BICYCLE

x 12–15 REPS/SIDE

Lie on your back with your hands lightly cradling your head and knees in a tabletop position. Engage your core to lift your shoulders off the floor.



Rotate to bring your left elbow toward your right knee while extending your left leg.

Switch sides and repeat. Breathing steadily throughout, alternate for 12 to 15 reps per side.

GLUTE BRIDGE

x 12–15 REPS

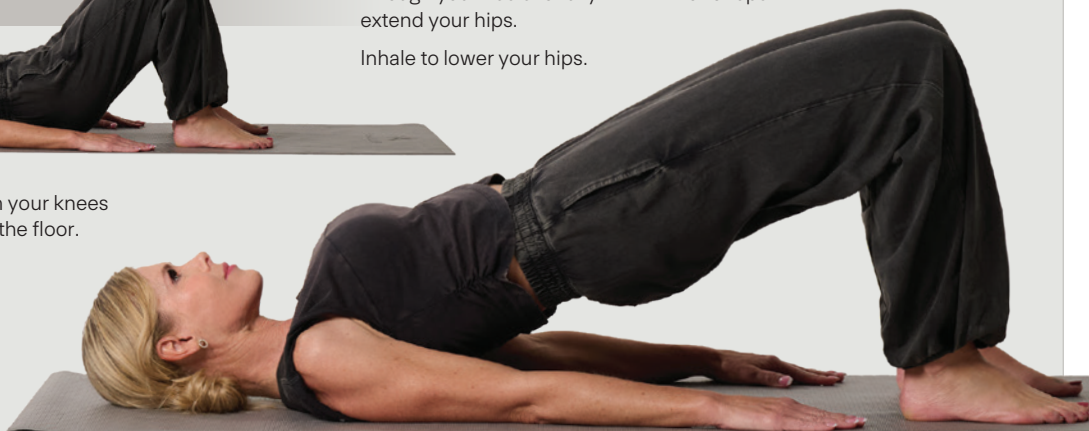
On an exhale, press through your heels to fully extend your hips.

Inhale to lower your hips.

Repeat for 12 to 15 reps.



Lie on your back with your knees bent and feet flat on the floor.

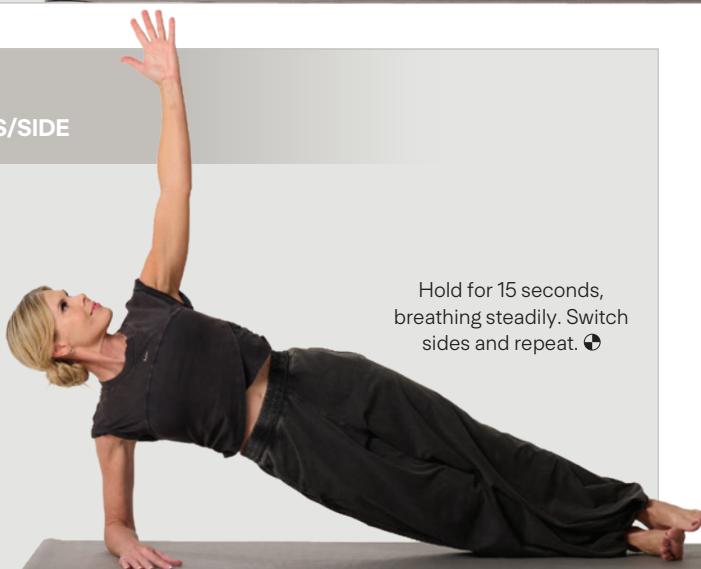


SIDE PLANK

x 15 SECONDS/SIDE

Lie on one side with your elbow directly under your shoulder and legs stacked.

Lift your hips off the floor so your body forms a straight line.



Hold for 15 seconds, breathing steadily. Switch sides and repeat. 🔄



DO THIS WORKOUT

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THE LATERAL RAISE

Three cues to fine-tune your form.

BY MAGGIE FAZELI FARD, RKC, MFT-1, ALPHA, CSMC

THE LATERAL RAISE

is a popular upper-body accessory lift that isolates the shoulders. It's commonly used to build rounded and defined deltoids. When performed mindfully, with control and attention to form, lateral raises can benefit overall shoulder health by improving strength, mobility, and left-right imbalances. These three tips can help you get the most out of your lateral raises.



RISE UP

For full lateral-raise instructions — plus eight variations to try — visit ELmag.com/lateralraise.

1. Check your ego. A common pitfall of the lateral raise is using weights that are too heavy. Drop the load to a weight you can control, allowing your shoulder blades to move freely and your hands to maintain a light grip.

2. Maintain an athletic posture. Assume a slight bent-over position with knees soft and hips hinged back about 10 degrees. Keep your spine neutral and core engaged. Avoid rocking, jumping, swinging, or otherwise using momentum to lift the weights up.

3. Don't lose sight of your weights. It's common to want to raise the dumbbells straight to the sides — it is a *lateral* raise, after all. But it can be easier on the shoulders and more effective overall to position your hands slightly forward. Aim to keep the weights just within your peripheral vision as you raise them to shoulder height.

MAGGIE FAZELI FARD, RKC, MFT-1, ALPHA, CSMC, is *Experience Life's* editorial director of fitness.

Fitness Markers TO TRACK

There are myriad ways to measure fitness and longevity. These three benchmarks can offer the most useful insights.

BY JESSICA MIGALA

THANKS TO THE advent of wearable technology and the growing accessibility of clinical testing, it's possible to collect tremendous amounts of data about your health and fitness. You can get daily reports on your heart rate, step count, blood-oxygen levels, recovery, and sleep stages just by wearing a watch or a ring. Delve even deeper with targeted performance tests to learn how your body uses different fuel sources, how much you sweat, or how much power you can generate.

"This can be incredibly empowering," acknowledges Rachelle Reed, PhD, an exercise physiologist and industry researcher. "When used well, data increases awareness, reinforces positive behaviors, and helps people see trends they might otherwise miss."

At the same time, being flooded with body metrics can be overwhelming and confusing. Moreover, health markers are just that — markers, says Anoop T. Balachandran, PhD, an associate professor in Family, Nutrition, and Exercise Sciences at Queens College, The City University of New York.

"They provide useful information, but the ultimate goal is not to improve the marker or make your device proud," Balachandran says. "It's to live longer and healthier, and to move better."

With that in mind, experts suggest narrowing your focus. These three fitness markers have the greatest potential to influence your athletic performance, longevity, and quality of life.



1. VO₂ MAX

What it is: The maximum amount of oxygen your body can use during exercise, says Nick Davis, a NASM-certified personal trainer and Life Time on-demand instructor.

Why it's important: The metric is an indicator of cardiorespiratory fitness. "It's one of the strongest predictors of cardiovascular health and longevity," says Reed.

An investigation published by the *Journal of the American College of Cardiology* found that cardiorespiratory fitness (using VO₂ max as a measurement) was associated with a lower risk of mortality from any cause, including heart disease and cancer. People with the highest levels of fitness had greater longevity.

How to measure it: Many fitness trackers provide an estimate of your VO₂ max during activity. For a more accurate measurement, VO₂-max testing is available at performance and specialty clinics and at some health clubs, including Life Time.

How to improve it: Various factors influence VO₂ max, some of which you have no control over, such as age, gender, and genetics. But there are a lot of things you can do to improve your fitness, no matter who you are. Davis recommends incorporating a mix of low-intensity, steady-state cardio training and higher-intensity interval work. "Both are important to improve your cardiovascular fitness," he says. Include at least one session of each in your weekly plan.



2. MUSCULAR STRENGTH

What it is: The maximum amount of force that can be generated by a muscle or muscle group.

Why it's important: "Strength is increasingly recognized as a key marker of healthspan," says Reed. "Higher muscular strength is associated with lower risk of injury, better metabolic health, and improved functional independence with aging." It also offers practical day-to-day advantages, like the ability to carry your groceries, walk up a flight of stairs, or even open a jar.

How to measure it: "We want to know how much muscle you have — but more importantly, we need to understand how well your muscle works," says Kelly McKenzie, MS, CSCS, a performance physiologist at Human Powered Health. She recommends two assessments: the DXA scan and the force-plate assessment. "The DXA scan is the best way to assess the amount of lean mass you have, and force plates are the best way to assess how functional your lean mass is when you use it," McKenzie says.

If you can't access these tests, Davis adds, assess yourself with body-weight moves like pushups, pull-ups, squats, and dead hangs, using assistance as needed. The goal is to maintain or increase your strength over time — no matter where you're starting from.

How to improve it: Aim for two to four weekly sessions of full-body resistance training, which you can do with body weight, free weights, weight machines, or resistance bands. To progress, gradually increase weight, repetitions, or training complexity.



3. HEART RATE VARIABILITY (HRV)

What it is: The variation in time between heartbeats.

Why it's important: It offers a snapshot of how well your autonomic nervous system (ANS) functions. The ANS regulates involuntary processes like heart rate, respiration, and digestion.

HRV is a marker of both cardiovascular and mental health. "Essentially, HRV can tell us how well the body is adapting to stress," says Reed. Variability is desirable; reduced HRV is associated with an increased risk of high blood pressure, heart failure, and heart disease.

How to measure it: Many fitness trackers and apps are equipped to measure and track your HRV.

How to improve it: Reed recommends focusing on four things to improve your body's resilience to stress: sleep quality, stress management, hydration, and aerobic conditioning. "HRV tends to improve with balanced training loads, adequate recovery, and reduced chronic stress," she says. "Overtraining, poor sleep, and illness can suppress it."

When it comes to exercise specifically, one meta-analysis, in *Frontiers in Cardiovascular Medicine*, found that aerobic and resistance training can improve HRV. Aerobic exercise can improve cardiorespiratory fitness, increase circulation, and bolster your parasympathetic, rest-and-digest nervous system function.

Resistance exercise, on the other hand, can increase muscle mass, improve metabolic health, and calm your sympathetic, fight-or-flight nervous system. The result? Better nervous-system balance and a more resilient body. 🧠

Find Your Grip

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Your Daily Step Goal

True or false: Walking 10,000 steps a day is necessary for optimal health.

BY HEIDI WACHTER



FALSE. If you're trying to walk 10,000 steps per day, you're chasing a target that began as a successful marketing gimmick. While the concept has crossed global borders and shaped wellness culture for decades, the benchmark isn't a science-based prescription. It grew out of a clever 1960s ad campaign around the time of the Tokyo Olympics for a Japanese pedometer, *manpo-kei*, or "10,000-step meter."

Ten thousand steps is not an evidence-based target. In fact, you might need only half that number of daily steps to reap the many benefits of walking.

A meta-analysis published in 2025 found that benefits, such as a 36 percent lower mortality risk, begin at 4,000 steps versus 2,000 steps. The research also found a 37 percent reduction in cancer mortality at 7,000 steps, compared with 2,000 steps.

Pushing past 7,000 steps isn't dangerous — especially if it's tied to an activity you genuinely enjoy and can engage in sustainably — but it doesn't offer a meaningful increase in health benefits.

Whether your target step count is 4,000, 7,000, 10,000, or beyond, rest assured that you're doing something good for your body. Studies consistently find that regular walking improves cardiovascular health, helps manage weight, and reduces depression. (Learn more about the benefits of walking at [ELmag.com/walkingbenefits](https://elmag.com/walkingbenefits).)

Everyone can gain from moving more, but the older you get, the more

important it is. "As you age, walking is critical for balance, maintaining muscle mass in the legs, stability, and confidence," says Micaela Garcia-Baab, a trainer based in Austin, Texas.

SPREAD OUT YOUR MOVEMENT

In practice, 7,000 steps averages to around 100 steps per minute for 70 minutes of walking at a brisk pace. But you don't have to get all your steps at once.

"Our bodies are meant to move and change positions regularly," says Danny King, master trainer and director of performance and recovery at Life Time. "All of that totally cliché advice — take the stairs, walk up and down every aisle at the grocery store, park farther away in the parking lot — works. You can also set an alarm on your phone or watch to remind you to get up and move."

Life Time fitness and performance specialist Jeff Rosga, NASM-CPT, CES, PES, agrees that focusing on daily-movement anchors is an effective strategy for creating or changing daily behaviors.

"I like to look at it as stacking steps with life by doing things like incorporating postmeal walks or taking a walking work meeting," he says.

If you prefer to incorporate your step goal into your workout routine, up the ante by adding a weighted vest, suggests Garcia-Baab.

Or consider mixing up your route by adding an incline, walking

backward, or throwing in some body-weight interval training. (For a 30-minute walking workout, visit [ELmag.com/walkstrong](https://elmag.com/walkstrong).)

TRACK PROGRESS OVER TIME

One way to avoid getting consumed by fitness-tracker data — or demoralized if you don't hit a daily step goal — is to look at long-term trends. Rosga advises treating your step count like a retirement fund: Daily changes are normal, but reviewing the trend over weeks or months might reveal steady progress.

"If I look at a period of weeks or the last three or six months, I might see that I am getting in more steps a month, and then I can divide it by the number of days to see daily averages," he says.

Looking at step-count trends can relieve the pressure on the days when you might be less active because of weather, an illness, or a busier day at work or school. Compare a day like that with one in which you did laundry or yard work, and you can see how daily movement adds up — and may even make day-to-day tasks more enjoyable.

Whether you're aiming for 4,000 steps to start or 7,000 to maximize gains, the key is to be consistent and spread your activity throughout the day to create an achievable, low-stress goal.

HEIDI WACHTER is an *Experience Life* contributing editor.



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Muscle Gains After 50

Tips for increasing muscle mass as an older adult.

BY NICOLE RADZISZEWSKI

SOME MUSCLE LOSS is a natural part of aging. Starting at 30, we lose 3 to 8 percent of our body's muscle mass each decade, according to the Cleveland Clinic. After 60, age-related muscle loss — known as sarcopenia — accelerates. But look around and you'll come across people in their 50s and 60s and older who seem to defy these statistics. That's because losing significant muscle is not inevitable, and in fact, we can continue to get bigger and stronger at any age.

"We have a ton of research showing that older adults respond really well to resistance training," says Michelle MacDonald, CSCS, a strength coach who specializes in working with older athletes. "While we associate declines in muscle mass with aging, a significant portion of what we attribute to sarcopenia is actually driven by insufficient stimulus and inactivity."

That's not to say that age doesn't matter.

"In our 20s, muscle building often feels easier because the body is generally more responsive to resistance training and protein, and recovery capacity is typically higher," explains Jeff Rosga, NASM-CPT, CES, PES, a Life Time fitness and performance specialist.

"As we age," he continues, "we experience gradual hormonal changes and a reduced muscle-building response to both protein intake and resistance training. Sleep, inflammation, and activity levels can also influence that process. But consistent strength training, adequate protein intake, and smart recovery can meaningfully blunt that effect."

What follows are expert strategies for building and maintaining muscle after age 50.

Lift weights. Resistance training is crucial for building muscle at any age. "Aim to train all major muscle groups at least two days per week," Rosga suggests. "For many people, two to three well-structured sessions per week is an effective starting point."

MacDonald adds: "For a lot of people, the focus should be on the back side of your body — your posterior chain — which includes your back, glutes, and hamstrings. Your leg muscles and hip muscles are also important, especially when we think of fall prevention and staying powerful and independent." (For a two-month program designed to build your backside, visit [ELmag.com/posterior](https://www.elmag.com/posterior).)

Make it hard. "Your muscles don't know sets or reps or the weight you put on a bar," Rosga says. "They just know effort."

He advises choosing a weight that enables you to experience near failure — no more than one to three reps in reserve — after performing eight to 15 reps. Perform two or three sets with this weight. (For expert tips on safely challenging your effort, visit [ELmag.com/getstrong](https://www.elmag.com/getstrong).)

Respect your limits. If you've accumulated injuries or imbalances over time, you may need to modify some movements. Rosga recommends doing exercises that allow you to safely control the load — for instance, a leg-press machine might be more suitable for some people than a barbell back squat, he says.

Exercise machines can be helpful if the prospect of using free weights is a barrier to entry. "Machines can

reduce the skill and coordination components of lifting, making them a great entry point," MacDonald says. "Many are designed to be comfortable and very stable, allowing people to focus on producing force safely."

Additionally, don't shy away from exercise variations to personalize your routine. (Learn how to adapt strength exercises to suit your body at [ELmag.com/modify](https://www.elmag.com/modify).)

Recover intentionally. "Recovery capacity can change as we age," says MacDonald. As a general guideline, she advises, wait at least 48 hours before training the same muscle group. Sleep, hydration, and nutrition — especially protein intake — are also critical.

MacDonald recommends taking in, approximately, up to a gram of protein per pound of target body weight daily for people focused on muscle retention or growth. That said, she adds that many would benefit from simply increasing their protein intake and building up consistency over time, rather than immediately targeting an aggressive number. (Find inspiration for protein-dense foods at [ELmag.com/protein](https://www.elmag.com/protein).)

MacDonald and Rosga also recommend supplementing with creatine. When combined with strength training, it has been shown to support improvements in strength, power, and athletic performance. (Learn more about the whole-body benefits of creatine at [ELmag.com/creatinebenefits](https://www.elmag.com/creatinebenefits).)

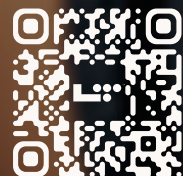
NICOLE RADZISZEWSKI is an *Experience Life* contributing editor and personal trainer.



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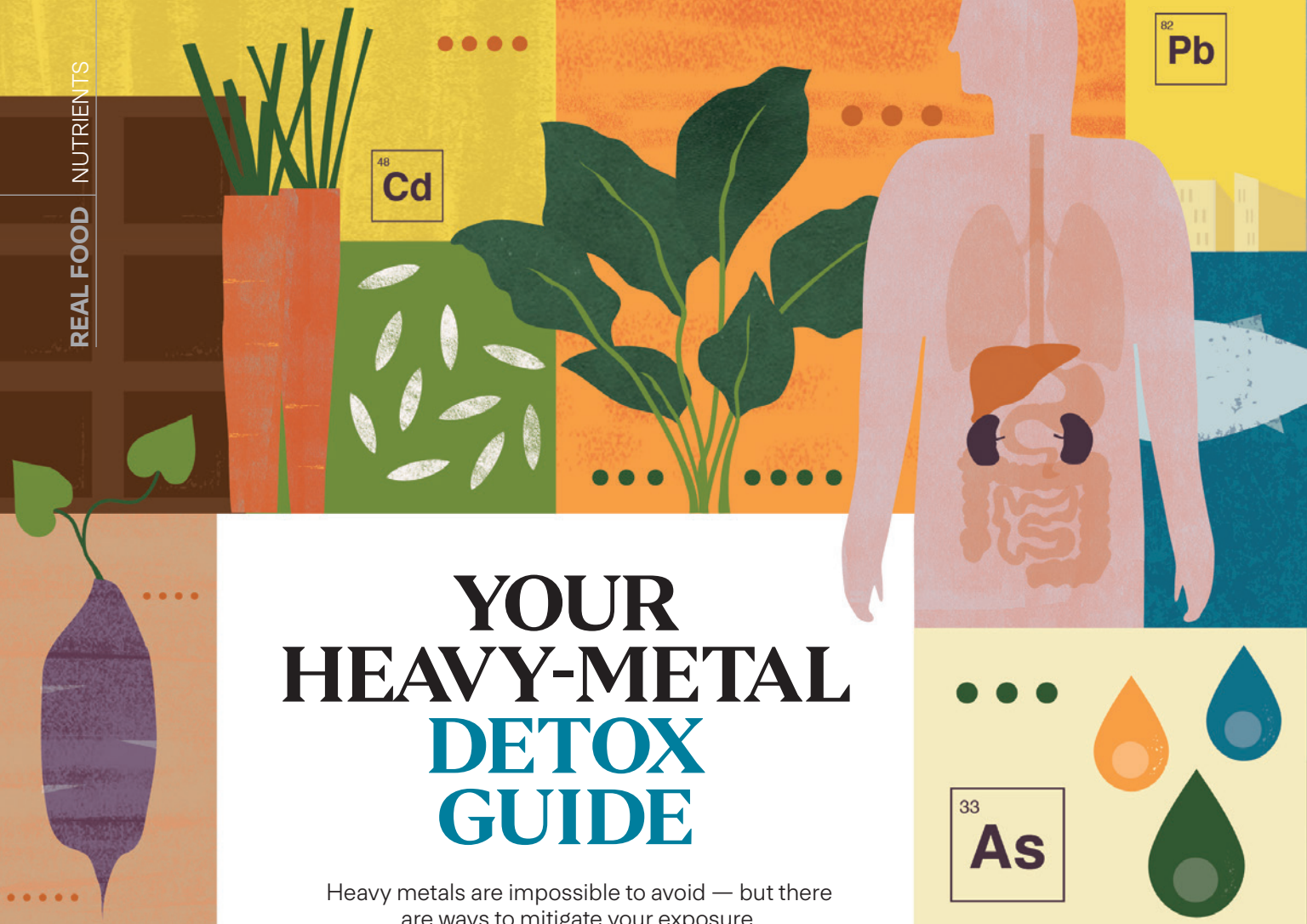
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REAL FOOD

FOOD IS MEDICINE, especially for a troubled gut. Starting on **page 48**, find recipes for dishes that help heal your gut lining and support your microbiome. (The one for this Bone Broth Mulligatawny Soup is at ELmag.com/guthealingrecipes.)



YOUR HEAVY-METAL DETOX GUIDE

Heavy metals are impossible to avoid — but there are ways to mitigate your exposure.

BY CATHERINE GUTHRIE

NOT LONG AGO, the words “heavy metal” might have evoked a memory of a piercing riff on an electric guitar. Today, those same words appear in headlines about contaminants in rice, baby foods, and dark chocolate. How did one simple phrase morph from big hair to big scare — and do you really need to wave a metal detector over your meal before you eat?

In fact, some heavy metals are crucial elements of a healthy diet, including copper, iron, and zinc. But others — such as arsenic, cadmium, lead, and mercury — can be harmful, and many of us are experiencing low-dose, long-term exposure to them through food and water.

“As long as we grow things in and on the earth, detectable levels of heavy metals will make their way into food and into people,” says toxicologist

Joseph Zagorski, PhD, of Michigan State University’s Center for Research on Ingredient Safety. “But it’s important to remember that ‘detectable’ doesn’t always mean ‘dangerous.’”

A metal is considered heavy if its density is at least five times that of water. While many heavy metals occur naturally in the earth’s crust, their increased presence in our food supply is mostly a legacy of industrialization.

Heavy-metal fallout from factories and farming ends up in the air, soil, and water. As time passes, those metals find their way into animals and plants and, eventually, onto our plates.

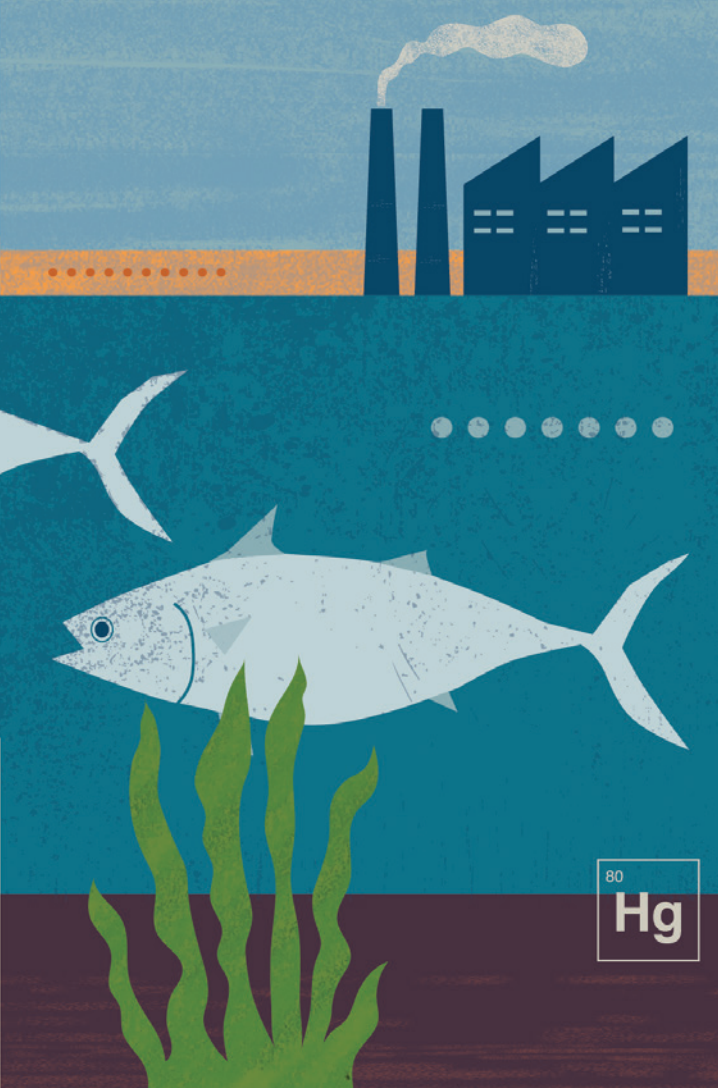
“As long as we grow things in and on the earth, detectable levels of heavy metals will make their way into food and into people.”

Luckily, the body has robust systems designed to protect itself from heavy metals. As we digest food, the gut, liver, and kidneys sort out the helpful from the harmful.

Toxins are shuttled into urine, stool, and, according to some experts, sweat.

But the body can’t vanquish every trace of toxic metals. What it can’t heave-ho it diverts into fat and bone for long-term storage.

For example, the body sequesters excess lead in bone, possibly because it mistakes it for calcium, which has a similar size and ionic charge.



THE HEAVY-METAL BIG FOUR

Arsenic ranks No. 1 on the list of environmental substances posing the greatest threat to human health because it's found in one of the world's most-consumed foods: rice. Compared with other crops, rice accumulates significantly more arsenic.

Processed rice pops up in lots of foods designed for children: rice cereal, puffed rice, rice cakes. A recent report from the non-profit Healthy Babies Bright Futures found arsenic in 100 percent of 145 rice samples purchased in U.S. stores.

Cadmium enters the soil through mining, metal plating, and agriculture. Because cadmium is chemically similar to zinc, crops that efficiently absorb zinc — such as sweet potatoes, spinach, and broccoli — can also inadvertently draw cadmium up through their roots.

Working as a chef gave Danyelle Forte a deep appreciation for feeding people, so she returned to school to study agriculture. Now a doctoral student at the University of California, Davis, she's working to breed spinach for low-cadmium accumulation. "I'm always reminded that even though I'm working with the plants, this food is going on people's tables," she says.

Forte first learned about cadmium hitchhiking into zinc-rich foods while working with Mars, Incorporated, one of the chocolatiers trying to protect dark chocolate from heavy metals in the soil of cacao-producing regions. The darker the chocolate, the higher the cacao content and the greater the risk. (Learn more about heavy metals in dark chocolate at ELmag.com/darkchocolate.)

Lead used to be found in scores of everyday products, like paint, gas, and plumbing pipes. Functional-medicine physician Robert Rountree, MD, remembers when paint companies bragged about how lead made their paint more durable. "It took a long time before we came to the consensus that no amount of lead is safe," he says.

Even so, lead exposure continues to bedevil us because, once on the ground, it sticks to soil particles and leeches into groundwater or gets into dust in your home.

Even low doses of lead can be hazardous to children. Those younger than 7 are at the highest risk because their bodies, brains, and nervous systems are growing quickly and are therefore more susceptible to lead poisoning. Even minimal exposure is associated with ADHD development and lower IQ scores.

Mercury is released into the air from coal-fired power plants, metal production, mining, and wildfires. Like other heavy metals, mercury accumulates in the atmosphere as air pollution. (Learn more about how to protect your lungs at ELmag.com/lungs.)

Unfortunately, it doesn't stop there. From the air, mercury settles into bodies of water, where bacteria convert it into methylmercury, a toxin that builds up in fish — particularly larger predatory species.

Mercury's only upside is that it is easier to avoid than other heavy metals, says Rountree. "Fish is the No. 1 dietary source of mercury, and it's much easier to get fish that has been tested or to eat smaller fish."

Low-level long-term exposure can lead to bioaccumulation, where metals build up faster than the body can eliminate them. Bioaccumulation is implicated in a host of health problems, including kidney damage, cardiovascular disease, and learning difficulties. In 2023, the American Heart Association drew a straight line from long-term lead, cadmium, and arsenic exposure to the onset and progression of heart disease and stroke.

Suddenly feeling like you want to skip lunch? Robert Rountree, MD, a functional-medicine physician based in Boulder, Colo., offers some realistic advice. "We are all going to be dealing with potential exposure to metals and other environmental toxins as long as we live, so we have to figure out a way to live with it."

Rountree recommends starting by becoming informed. Find out what metals or other toxins are most prevalent in your current environment, then take small daily steps toward lowering your exposure in a process he calls "gentle daily detox." (continued on page 42)

10 TIPS FOR A GENTLE HEAVY-METAL DETOX

1. DIVERSIFY YOUR DIET.

The biggest step you can take to protect yourself from heavy metals in your diet is to eat a variety of foods. Eating the same food day after day exposes the body to the same contaminants, says Zagorski. It also narrows the body's bandwidth for protecting itself.

"The goal is to have nutritive metals outperform nonnutritive ones," he explains. For instance, iron competes with lead for space on the same transport mechanisms in the gut; so when you eat plenty of iron, there will be fewer empty seats for lead to occupy.



2. BEFRIEND BRASSICAS.

Members of the brassica family — broccoli, kale, cabbage, Brussels sprouts, cauliflower, and more — contain compounds called glucosinolates. These phytochemicals stimulate the liver and other organs to activate Nrf2 protein, a master regulator of antioxidative responses. Turning on Nrf2 is valuable because it tells DNA to make protective enzymes that mitigate the toxic effects of heavy metals, says Rountree.

3. UNDERSTAND THE LIMITS OF ORGANIC.

Organically grown, non-GMO crops can and do contain heavy metals. Not all organic farmers test their soil for heavy metals, and some vegetables — including spinach and sweet potatoes — are prone to absorbing toxins from the soil.

"If those metals are in the soil, it doesn't matter if the crop is organic or not, non-GMO or not, they are going to be in the food," says Zagorski. "It's a matter of biology and chemistry at that point."

4. GET YOUR FIBER.

Americans are notoriously fiber challenged: On average, we eat just half of the recommended 25 to 30 grams a day. Yet fiber is one of the best weapons we can give our bodies to eliminate certain food-based heavy metals, says Zagorski. "Fiber physically binds up certain unwanted chemicals and allows them to pass through into your stool unabsorbed."

To get more fiber, try leaving the skin on fruits and vegetables, adding beans to soups and stews, or sprinkling ground flaxseed on yogurt and salads.

One of the best foods to add to your gentle detox is fruit, according to Aparna Natarajan, MS, CNS, a faculty member of the Clinical Nutrition and Functional Medicine program at the University of Western States in Portland, Ore. Citrus and apples are good sources of pectin, a soluble fiber that binds to heavy metals and moves them out of the body.



5. REPLENISH ANTIOXIDANTS.

Heavy metals can cause overproduction of a type of free radical known as reactive oxygen species (ROS). These molecules can harm DNA, disrupt enzyme function, damage cell membranes, and prevent protein folding — a structural process that enables proteins to perform their various vital tasks throughout the body.

Eating plenty of antioxidant-rich foods can help repair harm caused by ROS. Fruit is a great source of antioxidants and, compared with vegetables, less likely to contain heavy metals. Rountree's favorite antioxidant-rich picks include berries, pomegranate juice, organic coffee, and green tea.

6. SKIP ULTRAPROCESSED FOODS.

By definition, ultraprocessed foods (UPF) are more likely to contain metals. "If the crop itself was contaminated and you add in the possibility of contamination by machines and manufacturing processes, you're suddenly talking about the potential for multiple routes of heavy-metal exposures for one product," explains Laurie Beyranevand, JD, director of the Center for Agricultural and Food Systems at Vermont Law and Graduate School.

If you're trying to avoid UPFs, start by filling your plate with plenty of produce and protein to keep yourself full and satisfied. (Get more advice for cutting back at [ELmag.com/ultraprocessed](https://www.ELmag.com/ultraprocessed).)

7. FILTER WATER.

Lead in drinking water is an enduring problem for many communities, but a quality filter can significantly lower your exposure. Look for filters certified by an independent testing organization, such as the National Sanitation Foundation. Certification should show NSF Standard 53 for lead removal and NSF Standard 42 for particulate removal.

If you want localized information, your water authority might be willing to test your water or let you know if lead pipes provide water to your home.

8. BOIL — DON'T STEAM — YOUR RICE.

Rice is frequently high in arsenic, but cooking it like pasta can reduce that contaminant by 40 to 60 percent.

To use the pasta method, cook 1 cup of rinsed rice in 6 to 10 cups of water, and drain the excess water before eating. The downside to this approach is that it also slashes the grain's healthful nutrients, such as folate and iron, by 50 to 70 percent.

Another option is parboiling, a common Ayurvedic method and Natarajan's preference. She starts with hand-pounded sona masoori rice that has had its husks removed without metal equipment. Then she boils roughly 10 cups of water with 1 cup of rice. Once the grains start

to soften, she drains the water, then adds 2 cups of fresh water, covers the pot, and finishes the rice on low heat. This method allows the rice to retain most of its nutrients.

It's also valuable to consider the rice source. According to the non-profit Healthy Babies Bright Futures, the highest levels of heavy metals are found in white rice grown in the southeastern United States, brown rice from any location, and arborio rice from Italy. The lowest levels are found in white rice grown in California, jasmine rice from Thailand, and basmati rice from India.

Finally, consider branching out to other grains. Compared with rice, whole grains like quinoa, barley, and farro contain fewer heavy metals and more fiber.



9. BE CHOOSY ABOUT FISH.

Fish is an excellent source of protein, omega-3 fatty acids, and other key vitamins and minerals. But because heavy metals bioaccumulate in large fish, smaller seafood is a better bet.

Opt for anchovies, catfish, flounder, haddock, sardines, and tilapia. Eat less swordfish, shark, and orange roughy. And if you like canned tuna, buy light tuna, which tends to be a smaller species like skipjack, as opposed to albacore, which typically packs three times more mercury.

10. AIM FOR PROGRESS, NOT PERFECTION.

"Our living environments will never be perfectly pure," Rountree says. As you progress toward less exposure, he adds, don't let perfect be the enemy of "good enough, because doing so can drive you crazy."

At the end of the day, Zagorski says, focus on the foundations of good health — sleep, hydration, exercise, and a healthy diet. "Your body knows what to do and can take care of the rest." 🧘

BUFFER NUTRIENTS

We are all exposed to heavy metals daily, but not equally. People who live in suburbs have different exposures than those who live in an urban center. A nail technician has different risks than an office worker.

Even genes influence how the body processes heavy metals. Up to 40 percent of people carry a genetic variant known as MTHFR, which can indirectly affect the body's ability to eliminate toxins.

If you suspect your daily exposure is unavoidably high or that your body's detox systems need a boost, it's worth considering one of these supplements.

Vitamin B complexes — specifically those including B9 (folate), B12, and B6 — can mitigate the risk of heavy metals because they help the body metabolize homocysteine, an amino acid and waste product created when the body encounters certain toxins. When homocysteine levels stay high, a person's risk of dementia, heart disease, stroke, and osteoporosis can increase.

Chlorella is a microalga rich in B12, folate, iron, and other nutrients. "You take it as a powder or capsules; it's very safe and has decent data showing it binds to metals and other toxins, such as dioxin," says functional-medicine physician Robert Rountree, MD. "It's a simple, inexpensive strategy that anyone can benefit from."

Multivitamins/multiminerals are a basic safeguard. A lot of people assume multivitamins aren't especially useful, says Rountree, but "you can make a pretty good argument for a simple multivitamin or multimineral to ensure you're getting adequate amounts of nutrients, like calcium and zinc, that compete with toxic metals for absorption."

N-acetylcysteine (NAC) is a precursor to glutathione, the body's primary antioxidant. Glutathione makes heavy metals less toxic and allows them to be excreted, explains toxicologist Joseph Zagorski, PhD. Since glutathione itself doesn't translate well to supplement form, NAC's glutathione-enhancing abilities make it the next best thing. (Learn more about glutathione and how to boost your levels at Elmag.com/glutathione.)

Roasted Tomato Soup

Savor soup season with this healthy spin on a comforting classic.

BY KAEALYN RILEY

A GOOD SOUP is like a symphony of flavors: a savory bass line, a sweet melody, a harmony of bright lift and rich depth. Underseasoned, it will fall flat, and too much of any one element can throw the whole production out of tune.

Truth be told, I don't really know much about music, but I'm pretty well-versed in soup. It was one of my starter dishes, a meal I made on repeat when I first began cooking years ago, the way I learned to layer flavors and manage heat and salt to taste.

And it's the dish I circle back to most often, especially in life's least savory moments. If I'm feeling stressed or anxious, if the fridge is looking sparse, if I'm under the weather or working on a deadline, I always know I'm just one big pot and a handful of ingredients away from a bowl of something cozy.

This particular soup has a leg up on the cozy scale thanks to pure nostalgia. Tomato soup may be the ultimate childhood comfort food, the perfect warm blanket to wrap up in after a chilly fall day spent

learning fractions and building twig forts — and, yes, the ideal accompaniment to a gooey grilled cheese sandwich.

Of course, as a child of the '90s, I once got my quintessential tomato soup from a can, slightly too sweet and so smooth it was almost like eating paste. No longer in my grade-school arithmetic days, I've made a version of this beloved classic that I actually want to eat as an adult, the perfect dish to usher in my favorite time of year: soup season.

It starts with fresh Roma tomatoes — although you can use any kind you like, or a mix if that's your preference. Romas are a denser, fleshier tomato with low moisture content, and they give this soup a lot of body and texture even once it's blended. Cherry tomatoes are fussier to peel but add a pleasant sweetness, while heirlooms provide more depth of flavor: fruity or tangy or even smoky, depending on the variety.

Roasting the tomatoes alongside the garlic helps concentrate these flavors, and it gives this soup a robust base. I love using the whole head of

roasted garlic, which gets sweet and nutty and surprisingly mellow in the oven. Garlic also offers plentiful health benefits that are great for soup season. It supports immunity and heart health, and it's packed with antioxidants and anti-inflammatory compounds — all of which are easier for your body to digest when the garlic is cooked.

If the whole head of garlic seems like too much, simply add half to your soup and save the rest in the fridge. For the rest of the week, you'll have delicious roasted garlic to spread on toast or whisk into salad dressing or stir into sautéed greens. Lucky you!

Finally, I like to add bone broth and cannellini beans to this soup for the protein boost, but you could use any kind of broth you like, or even water — just be sure to add more salt. Don't like beans? Try adding a dollop of cottage cheese or even a can of coconut milk for more creaminess.

Do whatever you have to do to create your ideal bowl of cozy comfort, because it's finally soup season and we've all got to make our own kind of music.



Makes six servings
Prep time: 10 minutes
Cook time: 60 to 70 minutes



3 lb. Roma tomatoes,
halved



2 tbs. plus ½ tsp.
extra-virgin olive oil,
divided



1½ tsp. sea salt,
divided



1 tsp. freshly ground
black pepper, divided



1 head garlic



1 yellow onion,
chopped



2 tbs. tomato paste



4 cups bone broth
or stock



1 15-oz. can
cannellini beans



1 cup loosely packed
fresh basil leaves

Preheat the oven to 400 degrees F and line a sheet pan with parchment paper. Toss the halved tomatoes on the sheet pan with 1 tablespoon of the olive oil, 1 teaspoon of the sea salt, and ½ teaspoon of the black pepper. Arrange the tomato halves, cut side down, in a single layer.

Peel the papery outer layers from the head of garlic, keeping the bulb intact. Trim about ¼ inch off the top of the garlic head to expose the cloves.

Place the garlic head on a square of aluminum foil and drizzle with ½ teaspoon of the olive oil. Wrap the foil around the garlic to create a pouch, then place the pouch next to the tomatoes on the sheet pan and roast for 40 minutes, until the tomato skins are shriveled and the garlic has softened.

Set the sheet pan aside. When the tomatoes and garlic are cool enough to handle, squeeze the garlic cloves out of their skins, and use a paring knife to peel the skins from the tomatoes.

In a large Dutch oven over medium-low heat, warm the remaining tablespoon of olive oil until shimmering. Add the onion, and season with the remaining ½ teaspoon of sea salt and ½ teaspoon of black pepper. Cook until the onion is tender and starting to turn translucent, about five to seven minutes.

Add the tomato paste and stir to coat the onion. Cook, stirring frequently, until the tomato paste darkens in color and starts to stick to the pan, about three to five minutes.

Add the broth, beans, tomatoes, and garlic cloves, and stir to combine. Bring the mixture to a boil, then reduce the heat to low and simmer, uncovered, for 10 minutes. Turn off the heat, stir in the basil, then use an immersion blender to blend the soup until smooth. Add more salt or pepper to taste, and serve hot. 🍴

Fall Kitchen Reset

A seasonal check-in on expired items, worn tools, and cluttered drawers.

BY ADAM MEYER

WHEN YOU'RE TRYING to stay afloat in an ever-swelling sea of to-dos, sharpening your kitchen knives or oiling your cutting boards rarely feels like a top priority. But neglected kitchen maintenance has a way of catching up with you. These tasks may not feel urgent, but putting them off can lead to greater strain and frustration down the road — and staying on top of them can make most any kitchen feel more user-friendly.

Mess or disorder in the kitchen can affect how the space feels and functions. “Clutter is an immediate stressor,” explains feng shui specialist Suzanne Roynon, author of *Welcome Home: How Stuff Makes or Breaks Your Relationship*. “A clear worktop streamlines thought processes and makes it easier, and therefore more enjoyable, to prepare meals.”

While it may not deliver the instant gratification of a tasty meal or fun new gadget, making time for a seasonal kitchen reset can pay big dividends all year long. With decluttered drawers and functioning tools, you'll have the space you need to actually enjoy cooking.

FRIDGE AND PANTRY PURGE

If your kitchen pantry looks like a graveyard of half-used spices and sacks of mystery grains, you're not alone.

Since dried goods don't spoil quickly, it's easy to let them linger long past their prime. But stale ingredients can make your dishes taste flat or muted. Spices, in particular, lose potency over time. Ground spices and dried herbs often taste bland after less than a year; whole spices are best used within two years of purchase.

It's not just about flavor: Fresher spices also contain more health-promoting antioxidants. “Clearing kitchen drawers and pantries helps remove stagnant energy so nourishment, health, and prosperity can flow

freely,” says Cathy Orr, cofounder of a home-organization service called The Uncluttered Life.

Start by emptying shelves one section at a time. Check expiration dates, but also trust your senses. If a spice smells faint instead of aromatic, it's time to replace it. Discard rancid oils, expired baking powder, and anything you can't identify. Consider donating any unopened, unexpired items you don't want to use yourself.

A refrigerator purge follows the same principle. Toss leftovers older than a few days, wipe down shelves, and group similar items together so you can easily see what you have. This simple reset can help reduce food waste and prevent overbuying.



TOOL TUNE-UP

Dull knives, splintering cutting boards, and worn-out tools can make meal prep frustrating and tedious.

"Sharp knives and less clutter are the best gifts you can give yourself in a home kitchen," says Daniel Holzman, coauthor of *Food IQ: 100 Questions, Answers, and Recipes to Raise Your Cooking Smarts*. "That, and more counter space."

Creating more counter space isn't easy, but knife care can be. Conversely, dull kitchen knives are harder to work with, making food prep less efficient and more dangerous.

Most home cooks will benefit from sharpening their knives once or twice a year. Many hardware and cookware stores do this for a small fee; alternatively, you can buy a handheld sharpener and a honing steel to maintain your knives at home. (Find more knife-care tips at ELmag.com/honeknife.)

Wooden cutting boards and utensils also require occasional care. These tools can become dry with use and may crack or split, creating crevices in the wood that are difficult to clean and can harbor bacteria.

When the surface starts to look dry or dull, apply a food-grade mineral oil — not a cooking oil, which could become rancid over time — and let it soak in overnight. Whenever water stops beading on the surface or the wood starts to look faded, that's a good sign it's time to give your wooden tools another spa day.

DRAWER DECLUTTERING

Wrestling with an overstuffed kitchen drawer is practically guaranteed to interrupt your cooking flow state.

If you have to stop midrecipe to dig for a spatula or search through a cluttered utensil drawer for your citrus juicer, it's easy to lose your momentum.

"The simplest way to deal with kitchen drawers and cupboards is to empty them one at a time," says Roynon. "Be honest about when something was last used and whether it justifies the space it takes."

Start by pulling everything out. Group duplicates together, then ask yourself when you last used each item. Consider donating anything you haven't used within the last year.

If you feel uneasy about getting rid of things, Holzman recommends a trial run. "If you're stuck on your stuff, grab a box and put a bunch of duplicates in storage. Ease into it. I promise you only need one of each thing."

Drawer dividers and labels can keep you organized over time. The goal isn't minimalism for its own sake but a kitchen that functions efficiently and makes you feel more capable.

APPLIANCE AUDIT

Kitchen appliances are often neglected. After purchasing and setting them up, perhaps you assume they'll work flawlessly for years to come. Unfortunately, that's not always the case.

For example, your dishwasher cleans your dishes — but it also needs cleaning. Food debris can clog filters and make the machine run less efficiently. Each month, run a cleaning cycle with a dishwasher cleaner or vinegar (if manufacturer-approved) and check the filter.

Refrigerators can also benefit from a deep cleaning once or twice a year. The coils, which are usually located behind or

beneath the unit, often collect dust. Over time, that dust can act as insulation, so your fridge has to use more electricity to stay cool. Vacuum the coils to improve your refrigerator's efficiency and reduce strain on the compressor. This is also a great time to wipe down door seals to prevent mold growth and help ensure an airtight seal.

Changing the water filters in refrigerators and faucet systems as recommended helps ensure safer drinking water. Additionally, cleaning the sink and garbage disposal (including deodorizing and flushing debris with water) can help prevent odor and grime buildup.

SAFETY SCAN

Maintaining your kitchen also requires routine safety checks. Plan to check your smoke and carbon monoxide detectors regularly, and replace batteries as needed. Confirm that your fire extinguisher is accessible and within its expiration date.

Inspect electrical cords for fraying, and make sure all power outlets near sinks and appliances are properly protected on a ground fault circuit interrupter. GFCI protection prevents electric shock, and it's especially important to have in moisture-prone environments like kitchens.

Above all, know that making time for these basic maintenance tasks is like giving yourself a gift. "It's always better to handle things on your own time frame than to wait until something breaks," Holzman advises. Imagine how your future self, slicing vegetables with ease in a clutter-free kitchen, will thank you. 🍴



Gut-Healing Foods

Try these nutritious dishes to heal your gut lining and support your microbiome.

BY KATE MORGAN

FOOD IS MEDICINE, and if your gut is giving you trouble, part of the fix may lie in the meals you eat.

The lining of your intestines — which, if laid out flat, would cover more than 4,000 square feet — has one main job: to absorb nutrients and water into the bloodstream and keep unwanted things out. But in an unhealthy gut, the lining can be too permeable — or “leaky” — allowing toxins, bacteria, and food particles through.

Also known as intestinal permeability, leaky gut taxes the liver and stresses the immune system. It’s been tied to gastrointestinal disorders, like celiac and inflammatory bowel disease, as well as to chronic conditions like arthritis, fibromyalgia, and even asthma. (Learn more about healing leaky gut at ELmag.com/leakygut.)

While food allergies and ultraprocessed foods often contribute to leaky gut, your diet can also support your gut’s well-being. Prebiotics and probiotics, healthy fats, phytonutrient-rich vegetables, nuts, and gluten-free grains can all help rebuild tissue and repair the gut lining.

These recipes are designed to support that healing process. Better still, they’re simple enough to whip up on a weekday and so flavorful you’ll want to make them again and again.





Wild Salmon Cakes With Kimchi Tartar Sauce

Makes four servings

Prep time: 10 minutes

Cook time: 30 minutes

SALMON CAKES:

- 1 6–8 oz. wild-caught salmon fillet (or use canned)
- ¼ cup plus 1 tbs. extra-virgin olive oil, divided
- 1 small white onion, minced
- ½ bell pepper, minced
- 1 clove garlic, minced
- ½ tsp. paprika
- ½ tsp. sea salt
- ¼ tsp. dried thyme
- Freshly ground black pepper, to taste
- 1 cup panko-style breadcrumbs
- 1 large egg, lightly beaten
- 3 tbs. mayonnaise
- 2 tbs. minced fresh parsley

KIMCHI TARTAR SAUCE:

- ½ cup mayonnaise
- ½ cup plain, full-fat Greek yogurt
- 2 scallions, thinly sliced
- ¼ cup finely chopped kimchi
- 2 tbs. kimchi brine

Preheat oven to 425 degrees F. Coat the salmon with ½ tablespoon of the olive oil and place, skin-side down, on a sheet pan. Bake for eight to 10 minutes, until the fish is cooked through. Use a fork to flake the flesh, discarding skin and any bones. Set the salmon aside to cool.

Place a skillet over medium heat, then add ½ tablespoon of the olive oil and heat until shimmering. Add the onion and bell pepper and cook, stirring occasionally, until the vegetables have softened, about seven to 10 minutes.

Transfer the onion and bell pepper to a large bowl with the salmon and stir to combine. Add the remaining cake ingredients and mix well, then use your hands to shape the mixture into palm-size cakes.

Place the skillet back over medium heat and add the remaining ¼ cup of olive oil. Heat the oil until it shimmers, then cook the salmon cakes until crisp and brown, approximately three minutes on each side.

Whisk the tartar sauce ingredients in a small bowl. Serve the salmon cakes topped with a drizzle of sauce.



Shaved Asparagus and Brussels Sprouts Salad With Kefir Ranch Dressing

Makes four servings

Prep time: 15 minutes

SALAD:

- 1 lb. asparagus spears, ends trimmed
- 1 lb. Brussels sprouts, ends trimmed
- ¼ cup chopped roasted cashews

DRESSING:

- ½ cup plain kefir
- ¼ cup mayonnaise
- 1 clove garlic, chopped
- 1 tbs. chopped fresh parsley (or 1 tsp. dried)
- 1 tbs. chopped fresh dill (or 1 tsp. dried)
- 2 tsp. lemon juice
- ½ tsp. sea salt
- Freshly ground black pepper to taste

Using a vegetable peeler, shave the asparagus into thin ribbons. Use a knife or mandoline to thinly slice the Brussels sprouts.

In a food processor or blender, blend the kefir, mayonnaise, garlic, herbs, lemon juice, salt, and pepper until smooth.

Toss the vegetables with the dressing, top with the chopped cashews, and serve.



SAVOR MORE

Download a mobile-friendly version of these recipes — plus one for Bone Broth Mulligatawny Soup — at ELmag.com/guthealingrecipes.





Quinoa Bowls With Herby Yogurt Dressing

Makes three to four servings

Prep time: 10 minutes

Cook time: 40 minutes

QUINOA BOWLS:

- 1 cup dry quinoa, rinsed
- 1 tsp. sea salt, divided
- 1 head cauliflower, cut into florets
- 1 large sweet potato, chopped
- ¼ cup extra-virgin olive oil
- ½ tsp. freshly ground black pepper
- 1 cup broccoli sprouts

DRESSING:

- ½ cup chopped fresh parsley
- ¼ cup walnuts
- 1 clove garlic, chopped
- ¼ tsp. sea salt
- 1 tbs. lemon juice
- ½ cup full-fat Greek yogurt
- 2 tbs. extra-virgin olive oil

Bring 2 cups of water to a boil, then add the rinsed quinoa and ½ teaspoon of the salt and cover the pot. Reduce the heat to low and cook until the liquid is absorbed and the quinoa is tender, about 15 minutes. Remove from the heat and allow to rest for 10 minutes.

Preheat oven to 375 degrees F. Arrange the cauliflower florets and chopped sweet potato on a sheet pan and drizzle with the olive oil, the remaining ½ teaspoon of salt, and the black pepper, tossing to coat evenly. Roast for 30 minutes, or until the potatoes are fork-tender and the cauliflower has brown, crispy edges.

Meanwhile, make the dressing in a food processor or blender. Pulse the parsley, walnuts, garlic, and salt until combined. Add the lemon juice and Greek yogurt and process until smooth, then add the olive oil and process until emulsified.

Assemble bowls by adding a scoop of the cooked quinoa, roasted vegetables, and sprouts to each. Drizzle generously with the dressing and serve. 🥗





GOOD BONES

Whether you're 18 or 80, weight-bearing exercise is key for building and sustaining your skeletal structure for the long haul.

BY LAUREN BEDOSKY

THE SKELETAL SYSTEM

holds everything up — literally. Beneath the surface, your bones quietly do the work of keeping you upright, protecting your organs, and facilitating movement. When that foundation weakens, the consequences can be far-reaching.

“If we don’t have a strong base with our bones, the other systems in our bodies are not going to function as well,” says Joseph R. Hribick, DPT, a certified orthopedic manual therapist and clinical assistant professor of physical therapy at Lebanon Valley College in Annville, Pa.

Yet more than half of U.S. adults over 50 have either low bone mass or osteoporosis, and many don’t realize it until they have a fracture. “That’s the sneaky thing: Bone loss happens gradually, and then all of a sudden someone has an incident and it’s a dramatic change in their lifestyle,” Hribick says.

Research consistently shows that low bone density is associated with a higher mortality risk, even after accounting for other health factors.

And while declines in bone density are commonly linked to menopause, men are also vulnerable to bone loss and its associated risks. (By some estimates, about 20 percent of men over 50 will sustain an osteoporotic fracture at some point in their later years.)

“If we don’t have a strong base with our bones, the other systems in our bodies are not going to function as well.”

“As bone density declines, you start seeing issues with balance and stability, which not only leads to a higher chance of falling but . . . affects someone’s confidence, so they’re less likely to move in certain ways or go out and participate in certain activities,” Hribick says.

Over time, inactivity erodes muscle mass and accelerates bone loss, creating a vicious cycle that can be difficult to break.

But the good news is that the cycle can be broken, and exercise is one of the most effective ways to do it. Weight-bearing and resistance exercises stress the skeleton, signaling the body to build and maintain strong bones. It’s best to start early, but it’s never too late to make a difference.

A FRAMEWORK IN FLUX

The human skeleton is made up of more than 200 bones — specialized connective tissues composed of protein, collagen, and minerals like calcium and phosphorus. Each bone has a hard outer shell that provides structure and strength and a spongy center that produces blood cells and absorbs the impact of external forces.

But bones do more than hold us together.

“The skeleton helps us stand upright, walk, and do everything we need to do on a daily basis,

like getting down to tie our shoes or opening a door,” says Sandra Tadros Guirguis, a Life Time group fitness instructor and Menopause Society–certified practitioner based in Toronto. Movement happens when our muscles, which attach to bones, pull on the bones like levers.

Bones also act as a protective shell for vital organs: The skull protects the brain, the rib cage protects the heart and lungs, and the spine protects the spinal cord.

And though they may seem like a rigid, static framework, our bones are in a constant state of renewal. “Bone is living tissue,” Hribick says. “It’s not something that we’re born with that’s then stagnant over the course of our life. It’s constantly degrading and rebuilding.”

Bone remodeling, or the continual process of bone formation and breakdown, is a tug of war between two types of cells: osteoblasts, which build new bone, and osteoclasts, which break down old or damaged bone.

“When things are going well, bone remodeling is a continuous, balanced process where osteoclasts remove old bone and osteoblasts replace it with new bone,” Guirguis says.

However, the bone-remodeling process doesn’t stay balanced forever. In our early years, our osteoblasts naturally outpace our osteoclasts, helping us build the skeletal framework we’ll carry into adulthood. By age 30, we’ve reached peak bone mass, and after that we have to work a bit harder to keep our bone-building cells ahead of the curve.

“You can still build bone density — it’s just harder as you age,” Hribick notes.

To complicate matters, certain risk factors favor bone breakdown over bone formation and increase the risk of osteoporosis.

Nonmodifiable risk factors include having a smaller skeleton, having a family history of osteoporosis, and being female, Hribick says.

Age is another nonmodifiable risk factor. Despite its associations with older women, osteoporosis is also common in older men. (Learn more at [ELmag.com/bonedensity](https://www.ELmag.com/bonedensity).)

Meanwhile, modifiable risk factors include physical inactivity, low calcium or vitamin D intake, smoking, alcohol consumption, and corticosteroid medications. (Learn more at [ELmag.com/bonehealth](https://www.ELmag.com/bonehealth).)

Of all the modifiable risk factors, says Hribick, physical inactivity may be the most damaging yet the easiest to address.

“Bone is living tissue. It’s not something that we’re born with that’s then stagnant over the course of our life. It’s constantly degrading and rebuilding.”

HOW EXERCISE BUILDS YOUR BONE BANK

Exercise is akin to investing in your bones’ retirement account. “Invest as much as you can early in life so that you reap the benefits of it later,” Hribick says, noting that the prime years for building bone are between ages 8 and about 20.

However, even if you’ve long since passed that window, it’s never too late to start. Consistent exercise can shore up weak bones and maintain healthy ones, keeping osteoporosis at bay.

Some types of exercise are more effective at improving bone density than others. These include high-impact weight-bearing activities that trigger bone formation by exposing your bones to repeated mechanical stress.

“Ground reaction forces come up through your legs and into your spine, and then the weight of your body comes down with gravity,” Hribick explains. “So you have mechanical stress from below and mechanical stress from above, and that helps to stimulate these cells to lay down more bone.”

And the more impact an exercise delivers, the stronger the stimulus. “High-impact weight-bearing exercise — things like jumping, running, skipping, basketball, and volleyball — generates stronger bone-building signals at the cellular level,” Guirguis says.

But if you’re prone to fractures or are battling joint issues, the benefits of high-impact exercise won’t necessarily outweigh the risks. “For older adults, especially those with arthritis, I would not recommend high-impact activity,” Hribick says.

Luckily, high-impact exercise isn’t the only way to stimulate bone growth. Resistance training is another powerful ally.

“When we contract the muscle, we actually pull on the bone, and that in itself promotes bone production,” Hribick says.

Research backs this up. A 2025 meta-analysis in the *Journal of Orthopaedic Surgery and Research* found that resistance training significantly improves bone-mineral density in the spine, neck, and hips of postmenopausal women.

In general, adults should aim to stay active most days, working toward about 150 minutes of moderate-intensity activity weekly, Guirguis says.

It’s not just about the total time: Variety matters, too. At least two days per week, focus on resistance training and balance exercises to help maintain bone strength and reduce the risk of falls and fractures.



YOUR BONES' CHANGING NEEDS

The optimal type and frequency of weight-bearing and resistance exercise for bone health vary depending on life stage.

ADOLESCENTS, TEENS, AND YOUNG ADULTS

To maximize peak bone mass before age 30, experts say, encourage kids and teens to be involved in sports or at least to be active. "Sports, running, and change of direction [have] a huge impact on bone growth and density in the spine and long bones (those that are longer than they are wide, such as bones in the arms, legs, hands, and feet)," says Mark Schneider, NASM-CPT, ACSM, a strength coach and owner of the Retreat Strength Gym in Minnesota.

ADULTS

Once you've passed peak bone mass, maintaining bone density requires more intentionality — especially since most adults no longer have the built-in activity of school recess and team sports. Strength train at least twice a week, focusing on using challenging and progressively heavier weights over time.

Additionally, make sure most of your weekly cardio is weight-bearing. While walking is beneficial in other ways, it does not provide enough weight-bearing load to stimulate bone cells for most people, says Kavita Patel, DPT, a physical therapist who specializes in bone health and osteoporosis.

She recommends adding brief intervals of skips or hops during your walk to produce a higher-impact bone stimulus. If you can handle higher-impact exercises like plyometrics and running, incorporate them at least one day per week.

OLDER ADULTS

High-impact activities may not be appropriate if you have arthritis or joint issues or if you are at a higher fracture risk. But if you haven't had a spinal fracture and your doctor clears you for moderate-impact exercise, hop to it, advises Patel. Recommendations for impact training include performing up to 50 impacts per day for a minimum of three days per week. These can include heel drops, drop jumps, foot stomps, jumping, hopping, and skipping.

"Three to five sets of 10 to 20 impacts with one to two minutes' rest in between is recommended," she says. "Short versus long bouts of impact help keep the bone cells from becoming desensitized to the movement."

Additionally, do some cardio that includes an appropriate level of impact, depending on your fitness level, most days of the week (Hribick likes hill walking for older adults). And incorporate resistance training twice weekly. Hribick suggests adding one or two days of balance and postural work to prevent falls and keep your spine from rounding, which shifts your center of gravity forward.

Consult a physical therapist before starting an exercise routine if you have orthopedic issues or arthritis. "They can help customize your workout routine so [you] don't overdo it or get injured," he explains.

6 EXERCISES FOR STRONG BONES

NO MATTER your age or fitness level, there are two important considerations when it comes to bone-building exercise, says Schneider. First, bone growth is localized. Bone breaks down and re-forms in response to external forces — but it doesn't do so holistically throughout the body. A stimulus to the legs won't automatically lead to bone growth in the spine or wrists; it doesn't even necessarily guarantee bone densification in the hips.

This means that a walking routine, even one that incorporates a weighted

vest and hills, isn't enough to make meaningful changes to bone density higher up the kinetic chain. It's a great start for many people, says Schneider, but ultimately won't be enough to sufficiently challenge the upper body. That's why a variety of full-body exercises is important.

Second, bone growth requires progressive stimulus. Bone, like muscle, doesn't know how much weight you're lifting, how high you're jumping, or how fast you're running, says Schneider. It responds

to the stimulus — and once it gets accustomed to that stimulus, it no longer responds in the same way. Again, this points to the need for exercise variation and progressive overload in a movement plan.

Gradually varying or increasing the challenge by doing different activities or exercises or by increasing weights, or by a combination of the two approaches, can keep your bones responsive and strong over time.

Schneider designed this full-body strength workout, with variety and

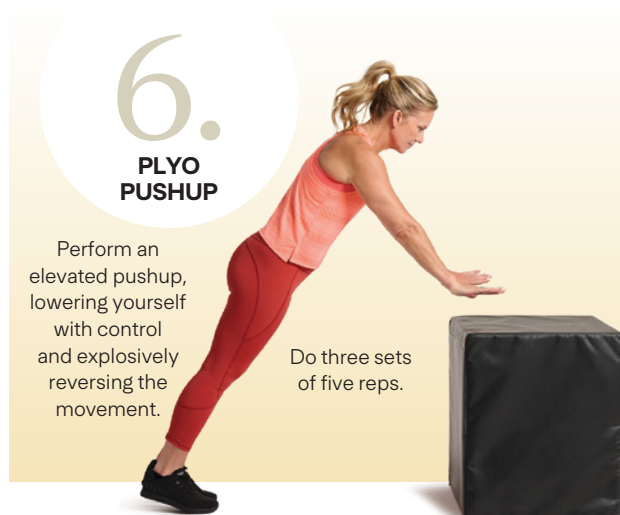


progressive overload in mind, to help you build and maintain bone density throughout your body.

Do this routine as a standalone workout once per week as part of an overall fitness plan that includes at least one other full-body strength workout and at least 150 minutes of moderate-intensity, higher-impact cardio per week. Perform all sets of each exercise before moving on to the next.

Alternatively, incorporate one, some, or all these moves into your existing training plan. ➔

LAUREN BEDOSKY is an *Experience Life* contributing editor.



TIPS FOR EXERCISING WITH OSTEOPOROSIS

Exercise is vital for building muscle and bone density, improving balance, and preventing falls and fractures. But if you've been diagnosed with osteoporosis, you need to take precautions, because the wrong movement can sideline you for months or longer. To stay safe, physical therapist Kavita Patel, DPT, offers some recommendations.

Protect your spine during exercise. Activities that place stress on the spine can increase your risk of fracture. If you have bone loss in the spine, limit (or avoid) spine movements that involve rapid, repetitive, sustained, weighted, or end-range twisting or bending. These include crunches, sit-ups, Russian twists, and toe touches. This is particularly important for those with a history of previous spine fractures or very low bone density.

Ensure proper form from start to finish. It's important to use proper movement technique not only during exercise but also before and after. "This is when a lot of people get themselves into trouble," Patel says. "They're so good at watching their form during the exercise, and once they're done, they forget — they quickly drop or release the weights by rounding their spine, or twist themselves as they get on and off the equipment."

Seek supervision. Ideally, you'd work under the supervision of an exercise specialist, physical therapist, or personal trainer familiar with osteoporosis. This person can assess your fracture risk, overall fitness, and other health issues (including fracture history, arthritis, pelvic-floor conditions, and balance impairments) to guide you through the appropriate type and dosage of exercise.



DO THE MOVES

For full exercise instructions, visit ELmag.com/goodbones.

A BALANCED APPROACH TO

HRT



THE RISKS AND BENEFITS OF SUPPLEMENTAL HORMONES

FOR MENOPAUSE AND OTHER AGE-RELATED CONDITIONS

BY MO PERRY

IN 2020, George Keller was 52 years old and deep in perimenopause. The Minneapolis-based actor recalls a night of lying sleepless on her couch, timing her hot flashes like they were labor contractions, then recording the times in her notes app: 10:47, 11:30, 12:02, 12:45, 1:00, 2:30 . . .

This can't be normal, she thought.

These hot flashes were nothing like her body's usual response to heat or exercise.

"It feels like you're going to spontaneously combust," Keller recalls. "I remember standing outside in my bare feet when it was 14 below zero and feeling the ice melt beneath my feet."

She had heard about hormone replacement therapy in her online circles and wondered if it might help. Yet when she asked her doctor about HRT, her doctor suggested antidepressants.

Keller was not convinced that mood medications were the answer. If hormones were contributing to her struggles, she wanted to know if they could also be part of the solution.

Eventually, her doctor agreed to prescribe HRT: in her case, a low-dose estradiol patch paired with oral progesterone. Keller's hot flashes became less frequent, and as she slowly increased her estradiol dose, they disappeared. Her sleep improved, as did her mood and energy.

Though Keller welcomed the relief she got from HRT, she didn't make her decision lightly.

"Of course, I questioned whether there would be a connection between HRT and cancer," she says. Her half-sister died of breast cancer that spread to her brain, her mother had colon cancer, and two of her grandparents died of cancer later in life.

After researching further, Keller made a personal calculation. "I'd rather enjoy my life and feel like a complete human being," she says. She didn't want to

just endure her symptoms out of fear of risk to her future health. She also wonders whether the risk may have been overstated.

The decision about whether to use HRT is one that millions of perimenopausal and menopausal women now find themselves facing.

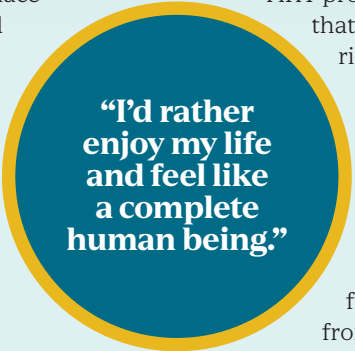
Over the past two decades, the pendulum of public opinion about HRT has swung dramatically. In the early 2000s, there was widespread alarm about findings in the Women's Health Initiative study, which showed a connection between HRT and increased breast cancer risk. And so in 2003, the U.S. Food and Drug Administration applied black-box warnings to

HRT products. Today, newer studies suggest that the benefits of HRT may outweigh the risks — at least for some women.

In November 2025, the FDA tempered the black-box warning for hormone therapies for menopause to reflect updated science. The agency stated that the original caution had been based largely on research involving older women taking hormone formulations that differed significantly from most of those prescribed today.

Confusion about the safety of HRT remains. Even with the FDA's about-face, the Menopause Society reported in 2024 that less than 4 percent of women between ages 50 and 60 use hormone therapy. Meanwhile, telehealth platforms, social media influencers, and hormone-focused clinics are promoting hormonal treatments for menopause more aggressively than ever — often presenting HRT as a long-overdue solution to a slew of aging-related conditions and complaints.

It can be hard to know what to believe, so we sought help from specialists to answer some common questions surrounding HRT — including how it works, what the real risks are, and how to decide whether it's right for you.



**"I'd rather
enjoy my life
and feel like
a complete
human being."**



What is HRT?

Hormone replacement therapy is a medical treatment that supplements the body's own hormones — most commonly estrogen and progesterone, and sometimes testosterone. The therapy delivers these hormones in various forms: pills, skin patches, gels, sprays, or vaginal creams and tablets.

During the years leading up to menopause (a phase called perimenopause), estrogen and progesterone levels fluctuate and decline. This volatility can trigger a wide range of physical and emotional symptoms, including hot flashes, night sweats, weight gain, vaginal dryness, irregular periods, irritability, and insomnia.

At menopause, estrogen levels drop to a permanently lower baseline, laying the groundwork for bone loss as well as cardiovascular and metabolic changes. This is why many healthcare professionals recommend HRT to replace estrogen as it declines.

Estrogen may be the most commonly prescribed hormone for menopause and perimenopause; it directly addresses most of their hallmark symptoms, particularly hot flashes and night sweats. For women who still have a uterus, progesterone is typically prescribed alongside estrogen to help protect the uterine

lining from excessive growth, which is associated with endometrial (uterine) cancer. Progesterone can also influence the brain's GABA receptors, helping promote relaxation and relief for menopause-related anxiety and insomnia.

Proponents of HRT note that the therapy can be useful for more than just menopausal symptoms.

"Estrogen has more than 400 purposes in the body," says Karen Kaufman, MD, a board-certified obstetrician and gynecologist, and the medical director of MIORA in Colorado. "It's involved in bone health, joint health, brain health, heart health, vaginal health — really almost every system."

Most experts agree that HRT works best and is least risky when clinicians prescribe the lowest effective doses, tailoring treatment to a person's symptoms, health history, and risk factors. In practice, that means hormone therapy is rarely a one-size-fits-all prescription.

"It's really a personalized approach," Kaufman says. "Not everybody needs the same hormone in the same dose at the same time."

How does the body respond to the decline in reproductive hormones?

Hormones affect our health in many ways.

Libido: Reproductive hormones play a direct role in sexual desire, arousal, and pleasure. As estrogen drops, vaginal tissues can become thinner and drier. Changes in testosterone levels can also influence sexual interest.

Supplemental hormones can be used to treat all these symptoms. "Some women respond better to estrogen for libido, and others respond better to testosterone," Kaufman says, stressing the need for individualized treatment.

Libido isn't purely hormonal, though. Sexual interest is also affected by stress, sleep, relationship dynamics, and overall health. For some women, restoring hormone levels can improve comfort and desire; for others, addressing lifestyle or emotional factors may be just as important.

Bone health: Estrogen, progesterone, and testosterone all help stimulate and maintain bone tissue. When they decline, bone loss can accelerate. According to the Bone Health & Osteoporosis Foundation, half of women over 50 will break a bone because of osteoporosis.

"The hormone drop-off is absolutely one of the reasons for bone-health issues like osteopenia and osteoporosis postmenopause," Kaufman says. "Without estrogen, progesterone, and testosterone, we start to lose bone density."

She adds that supplementing with these three hormones can have profound effects on bone strength.

Brain health: Estrogen plays a role in glucose metabolism in the brain. Low levels can lead to brain fog, including concentration and memory problems. These issues are common enough to have their own nickname: menopause brain.

"Women in particular really need estrogen for their brain health," Kaufman says, noting that the hormone can help prevent cognitive decline by protecting the brain from the plaque associated with Alzheimer's.

Studies have found that menopause may lead to reductions in the brain's gray-matter volume. Yet there's also evidence that this volume may partially recover after menopause — and there's no evidence that menopausal brain fog is associated with a subsequent risk of dementia.

Joint health: Some women experience joint pain for the first time during perimenopause and menopause. Because estrogen can act as a natural anti-inflammatory and lubricant for the body, declining levels can lead to systemic inflammation, thinning cartilage, and reduced collagen production in the joints.

Activity level, prior injuries, muscle loss, and inflammatory conditions each play their own role in joint health. Yet when joint symptoms appear or worsen alongside other menopausal changes, hormone therapy may help relieve discomfort, especially when combined with strength training and anti-inflammatory nutrition.

Mental and emotional well-being:

Estrogen and progesterone help regulate mood, stress, and sleep. When these hormones decline, many women experience more anxiety, irritability, and emotional volatility. Still others experience a loss of emotional range, says Kaufman. "People will say, 'I just feel flat. I can't explain it. I'm just not myself.'"

Antidepressants are often prescribed for these symptoms, but Kaufman says hormonal changes are frequently at play and that it can be more effective to address them first.

What are the safety concerns about supplemental estrogen?

Concerns about supplemental estrogen stem largely from the Women's Health Initiative (WHI) study results that were released in 2002. Prior to the study, hormone therapy was considered the gold standard for menopausal symptom relief, but the WHI showed an increase in the risk of breast cancer, cardiovascular disease, and stroke. The 1998 HERS study also contributed to a wave of concern that has caused many to shy away from HRT in the years since.

Now, researchers have pointed out serious flaws in both studies. Specifically, WHI and HERS focused on older women — a mean age of 63 to 67. In the HERS study, all participants already had cardiovascular disease. About 70 percent of subjects in the WHI trial were overweight or obese, half were current or former smokers, and the majority were a decade or more past menopause.

These study participants were given oral conjugated equine estrogen, derived from the urine of preg-

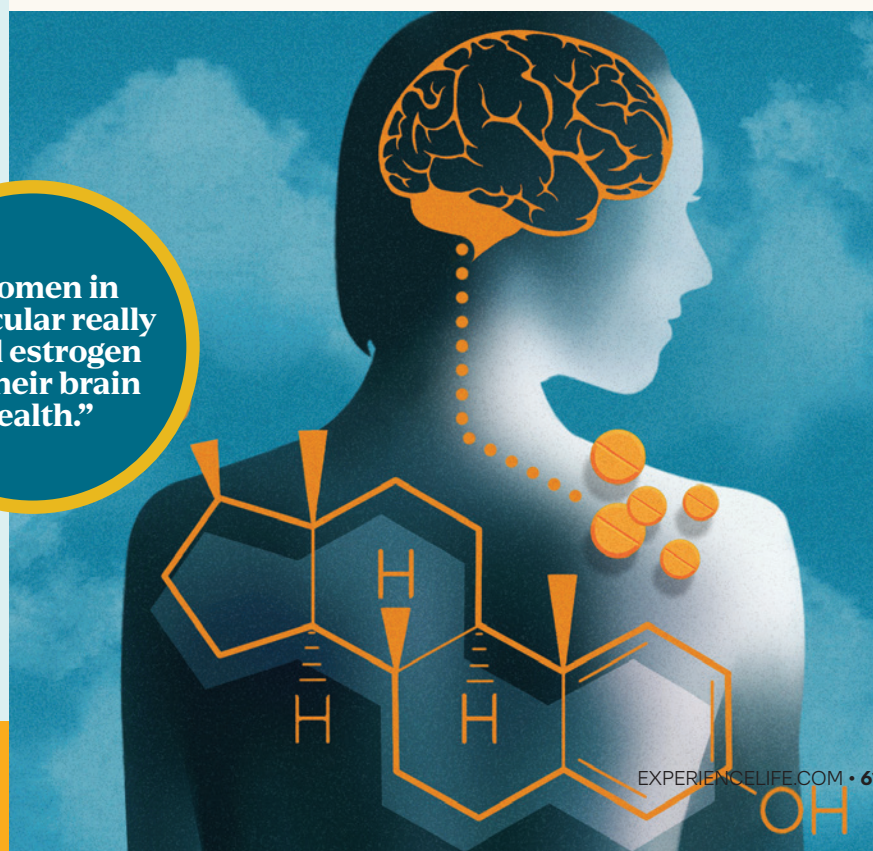
nant horses, along with a synthetic progestin that differs markedly from the bioidentical progesterone that's more widely used today.

"The real safety concern is around toxic, synthetic progesterone that we know increases risk for heart disease, cognitive decline, and breast cancer," Kaufman says. "I haven't prescribed that in 25 years, and hopefully nobody is anymore."

Timing matters, too. "Later reanalysis showed that starting hormones within 10 years of menopause produces very different outcomes than starting them decades later," says Sara Szal, MD, author of *Women, Food, and Hormones*. "The risks and benefits of hormone therapy depend heavily on timing, formulation, and the individual patient's health profile. The one-size-fits-all conclusion from 2002 doesn't hold up today."

In late 2025, when the FDA announced it would update the black-box warnings on menopause hormone therapies, it requested that companies remove references to increased risks of cardiovascular disease, breast cancer, and dementia.

"Women in particular really need estrogen for their brain health."



What is the relationship between estrogen and cancer?

Concern about breast cancer risk is one of the most common reasons women hesitate to use hormone therapy. Again, much of that fear traces back to reports from the WHI study in the early 2000s.

Subsequent analyses suggest that the increased breast cancer risk seen in the study may have been partly driven by synthetic progestin rather than estrogen. “Estrogen alone appears neutral or protective against breast cancer in some studies,” Szal says.

Observational research studying estrogen paired with bioidentical progesterone has not shown the same risk associated with older synthetic formulations. But researchers note that more large randomized trials directly comparing different types of progesterone are still needed to confirm their safety profiles.

Estrogen does stimulate tissue growth, including in the lining of the uterus, so women with a uterus are typically prescribed progesterone alongside estrogen therapy. The progesterone helps counterbalance estrogen’s growth-promoting effects and reduces the risk of certain cancers.

“When we think about something like uterus cancer, it’s incredibly important to balance your estrogen and progesterone,” Kaufman says.

Who is — and is not — a good candidate for HRT?

For many women, hormone therapy can be a safe and effective way to manage symptoms of perimenopause and menopause — particularly when started relatively early in the transition. But clinicians emphasize that it isn’t appropriate for everyone.

“Safe doesn’t mean risk-free,” Szal says. “Every therapy has a context, and women deserve counseling about their specific risks.”

In general, many healthy women under age 60 — or within about 10 years after their last menstrual period — may be good candidates for hormone therapy if they need help with symptoms like hot flashes, sleep disruption, mood changes, or vaginal dryness.

Yet it’s still important to consider your medical history and risk factors. “The conversation is always individualized,” Szal says. “Personal and family history, genetic risk, and metabolic health all matter.”

Some women may be advised to avoid systemic hormone therapy altogether (this includes any hormone treatments that enter the bloodstream). According to guidelines from major medical organizations, systemic hormone therapy is generally not recommended for women with certain conditions:

- a personal history of breast cancer or other estrogen-sensitive cancers
- unexplained vaginal bleeding
- active liver disease
- prior blood clots, stroke, or heart attack
- certain inherited clotting disorders

In these cases, nonhormonal therapies or lifestyle strategies may be safer options. Kaufman does note that those with a history of breast cancer may still be able to pursue some forms of HRT with careful guidance from an attentive provider.

Topical hormone therapies like vaginal suppositories are another option for symptom relief.

Rather than raising hormone levels throughout the body, they act on the tissues of the vagina and pelvic floor to help with vaginal dryness, pain with sex, urinary urgency, and recurrent UTIs. Because they’re more targeted, they can be an option even for women who are not good candidates for full-body HRT.

I choose not to use HRT: Does this also involve risk?

Given the swing of the pendulum toward HRT, it can seem as if using HRT is the only responsible choice — and that not using it puts you at greater risk for a range of age-related concerns. Experts say that isn’t the case.

“What matters most is your values regarding aging, personal and family medical history, and overall metabolic and immune health,” says Szal. “Hormone therapy should never be one-size-fits-all.”

In other words, HRT is a tool. It’s not a requirement. Some women experience relatively mild menopause symptoms and prefer to manage them by improving sleep, building muscle, adjusting diet, and addressing stress and metabolic health.

For women disinclined to HRT, Kaufman says good nutrition and supplements that support the bones, brain, heart, breast tissue, and libido can help enhance quality of life throughout menopause and beyond.

“There are options,” she says. “It’s a very personal decision. And while there are health risks associated with low estrogen levels, estrogen therapy is not a must-have if a patient has weighed the alternatives with a trained provider.” (For more on natural alternatives to HRT, see ELmag.com/menopause.)



“It’s incredibly important to balance your estrogen and progesterone.”

I'd like to try HRT. What's the safest way to get started?

Get professional support. Experts say the safest way to begin HRT is to work with a knowledgeable clinician who can evaluate your symptoms, health history, and risk factors before prescribing anything.

Szal says that the right time to consider hormone therapy is when your symptoms start affecting your daily life. It can be helpful to keep a diary of symptoms to note trends over time and whether hot flashes, night sweats, insomnia, and mood changes are becoming more frequent.

"The safest approach is personalized care guided by symptoms, medical history, and appropriate testing," Szal says. Some clinicians consider ordering lab testing to look at hormone levels, thyroid function, and metabolic health, though many providers rely primarily on symptoms to guide treatment.

Much also depends on which delivery method you choose — pills, patches, gels, sprays, or vaginal products. Each affects the body differently. For example, transdermal estrogen (absorbed through the skin) may carry a lower risk of blood clots than oral forms.

Once therapy begins, most clinicians recommend starting with the lowest effective doses and adjusting gradually.

"Hormone therapy is a personalized plan that requires ongoing monitoring and adjustment," says Szal. She recommends checking hormone levels six to 12 weeks after starting HRT, then every six to 12 months. Tracking symptoms alongside lab results can give the clearest picture of what you need.

Whether you're taking HRT or not, Szal emphasizes the importance of tending to diet, exercise, lifestyle, and stress. A holistic approach can help you mitigate menopause symptoms and support your overall health, during the transition and beyond. 🌱

MO PERRY is an *Experience Life* contributing editor.

A holistic approach can help you mitigate menopause symptoms.



WHAT ABOUT TRT FOR MEN?

The term "andropause" is sometimes used as a male analog to menopause, but the comparison is far from exact. Hormone levels fall relatively abruptly and predictably at menopause. In males, hormone production generally declines more gradually — on average about 1 percent per year in midlife and beyond. Some don't experience much of a decline at all, with testosterone levels staying in the normal range well into older age.

That means testosterone replacement therapy (TRT) is generally used for a narrower set of problems — most often clinically significant low testosterone, or hypogonadism — rather than as a broad response to one universal life stage.

The American Urological Association considers low blood testosterone to be less than 300 nanograms per deciliter for adult men. An estimated 39 percent of men age 45 and older have low testosterone.

In addition to age, other causes of hypogonadism include obesity, chronic stress, injuries to the brain or testes, sleep apnea, genetic disorders, and medication side effects. Symptoms may include low libido, erectile dysfunction, fatigue, reduced muscle mass, depressed mood, and low bone density. All of these can have other causes, making careful diagnosis crucial.

For men with symptomatic hypogonadism, TRT can help. Clinical trials generally show improvements in sexual desire, mood, and body composition, especially when paired with resistance training.

One of the biggest tradeoffs with TRT is fertility.

When men take exogenous testosterone, the brain reduces production of luteinizing hormone and follicle-stimulating hormone, the signals that tell the testes to make testosterone and sperm. That can sharply reduce sperm count and shrink the testes.

For younger men who want to preserve fertility, clinicians may use strategies to stimulate the body's own production of testosterone, along with recommending weight loss, resistance training, stress reduction, and better sleep.

Other downsides of TRT can include sleep apnea, acne, breast enlargement, and excessive red-blood-cell production; the latter increases the chance of blood clots.

Then there's the prostate question. For decades, men have been warned that testosterone is fuel for prostate cancer. While it's true that testosterone can influence prostate growth, that doesn't automatically translate to cancer risk, says holistic urologist Geo Espinosa, ND, LAC, IFMCP.

According to current evidence, raising testosterone — whether through lifestyle measures or TRT — does not elevate prostate-cancer risk in otherwise appropriate candidates. Espinosa adds that while TRT can modestly increase prostate volume in some men, research suggests it doesn't typically worsen lower-urinary-tract symptoms.

Like any form of hormone replacement, TRT is best undertaken with the guidance of a knowledgeable clinician who can monitor symptoms and lab markers over time to adjust treatment as needed.



A SECOND LOOK AT MIDDLE AGE

IT'S POSSIBLE TO BECOME
MORE YOURSELF AT MIDLIFE.
EXPERTS EXPLAIN HOW.

BY KATIE DOHMAN

IF WE LIVE INTO MIDDLE AGE, we may eventually face an important choice: *Do I go to the rock show that wraps at 2 a.m., or do I go to bed?*

We know we're at a crossroads when these questions are followed by other, slightly more panicky ones: *What is going on here? Who am I? Have I lost my edge?*

Enter the cliché of the midlife crisis, during which we don't just go to the rock show (or our personal equivalent). We leave our spouse, buy a sports car, and drive it there. Or at least that's how it's rumored to go. But maybe it doesn't have to.

Move over midlife crisis; it's time for the midlife convergence.

"What we've been taught about middle age is a loss narrative: You'll lose your youth, energy, relevance," says psychotherapist and life coach Corey Yeager, PhD, LMFT. "But I believe it's a convergence stage.

"Everything begins to finally come together. You start to have high levels of a skill set, and your perspective is shifting. You get to converge all that together in what Carl Jung called the wholeness of who we are as human beings."

This approach to middle age is a lot more empowering than, say, trying to stay relevant in superficial ways, like trading in sedate sedans for sportier models or longtime lovers for younger ones. Or even by going to shows that end at 2 a.m. when you'd rather sleep.

That doesn't mean the convergence stage of life is easy. But it can be rich and rewarding if you're willing to lean into it.



The Ambiguous Middle

Middle age is more than a number, in part because there's no universal "middle" to our lives. This is especially true as humans tend to live longer, healthier lives than we once did.

"If we're being honest, you divide by two when you die, and that's middle age," notes Yeager. Despite his reservations about putting societal parameters around the human experience, he is willing to ballpark middle age as ranging from 40 to 60 years.

Sari Botton, founder of the Substack newsletter *Oldster Magazine*, prefers a more open-ended definition. "I think if you don't know how long you're living, it's really hard to say where the middle of your life is and what you're supposed to be doing then."

The ambiguity of middle age can be further amplified by our cultural milieu. "We were parentified and latchkey kids, like no generation prior," Botton says, referring to her Gen-X cohort. "There was this confusion about *Am I a grownup or a kid? I'm doing a lot of things my parents should be doing, but I also don't have a driver's license.*"

She says *Oldster* is for and about "all people who are having the experience of getting older. And who are the oldest they've ever been."

Botton experienced her first bout with age-related grief on her 10th birthday, when an uncle mentioned that she'd never be a single digit again. "It hadn't occurred to me at 10 that I was on this life timeline pass-

ing through milestones, and I can't go back the other way," she recalls. "What if I didn't pay attention to what it meant to be one digit? What if I forgot to look? ... I have had this lifelong anxiety I'm doing everything on the wrong schedule."

Ah, bingo: the idea we're doing it wrong, the sense that we're not following the script. We've missed a call time. And then the unsettling feeling that our life's plot has sort of petered out.

It makes sense. For infants and toddlers, developmental stages can be matched nearly to the month: object permanence, walking, talking. In our teen and early-adult years, the goal becomes to finish school, followed by the slightly more nebulous discovery of both personal and professional passions. (The early to mid-20s also often bring on the Gen-X-coined term "quarterlife crisis.") Maybe the script also includes building a family or buying a home.

All these straightforward markers of success can be found on a timeline. But when 35 or 40 rolls around, the flow chart branches out indefinitely — and it's hard to know what we're "supposed" to be doing. The conventional script disappears, forcing us to improvise.

And that brings uncertainty, which is a tough feeling to navigate. But when we embrace the absence of predictable milestones as a chance to chart our own course, this uncertainty can become a passageway to greater confidence and wisdom.

When we embrace the absence of predictable milestones as a chance to chart our own course, this uncertainty can become a passageway to greater confidence and wisdom.



How to Find the Freedom of Midlife

Middle age is a time to “reassess our truths,” Yeager says. This process might reveal that certain values no longer work for us as they did during our first 40 or 50 years. Or maybe they never did, and we now have the clarity and courage to admit it.

“Moving in the direction of your truth is the work we have to do in middle age,” he says. “I often ask people: ‘Who knows you best?’ Many answer a best friend, a spouse, a parent. But it’s *you*.”

The recognition of middle age as a time of truth telling is becoming more visible in our culture. Middle-aged Melani Sanders’s viral social media movement, the We Do Not Care Club, celebrates the freedoms of menopause and midlife more generally. With humor and unflinching honesty, Sanders embraces the pleasure of not worrying so much about what others think. She also celebrates her solidarity with women in middle age and encourages appreciation for the human each of us has become.

In other words, her work reveals the hidden potential of middle age: Knowledge and confidence are power. If this reframing appeals to you, follow these steps to cultivate more of the freedom that middle age can bring.

1. OWN YOUR TERMS

Despite the negative cultural messages that most of us have internalized, we do have choices about what middle age means to us. “The midlife transition is not really a crisis; it’s an upgrade,” explains Yeager. “We need to reframe this thinking.”

Any major life change eventually asks you to rewrite your identity, he adds. We do this every time we hit a milestone: going to college, graduating, finding a job or life partner, having kids. Redefining ourselves in middle age is no different; there are just fewer guideposts to help us along the way.

There’s freedom here, especially when you tune in to some less-explored parts of yourself to decide how you want to move forward. Yeager’s book, *How Am I Doing? 40 Conversations to Have With Yourself*, offers questions for investigating what makes you tick and how you want to change. Such questions can be a good starting point for designing your own midlife road map.

2. EXPAND YOUR HORIZONS

Clinging to old patterns and familiar identities can be tempting, but holding on to them prevents us from discovering what else we can be during this new stage.

“Get comfortable with ambiguity,” suggests Yeager, noting that this can be challenging. “We want a clear-cut ‘Tell me what’s next and what to expect.’ Midlife is not any of that. It’s a scary time in our lives, because we don’t know what our future will look like.”

By the time we reach our 40s and 50s, many of our relationships will have shifted. Our kids may have moved on. We might be rethinking our careers. And we get our first glimpse of ageism in an older context, which usually comes as a surprise.

Yet our options remain wide open in middle age; in many ways, our horizon is broader than ever. We may have more confidence, wisdom, and resources.

Tema Esberg, for instance, became a personal trainer after building a life as a lawyer. If someone had told her that she’d make that change in midlife, “it wouldn’t have tracked,” she says. Esberg didn’t do a pull-up until she was 50.

Still, after focusing on her career and her kids, she was ready for a second act. The same is true for most of her clients, who are mainly middle-aged women looking to increase their strength and mobility during perimenopause and menopause. And they, too, tend to surprise themselves with their abilities and be surprised by the downstream effects of their newfound strength: clarity, enthusiasm, ambition, community.



“Middle age is a great time to question your direction . . .”

3. CHOOSE OPTIMISM

There are solid scientific reasons to be optimistic about mid- and later life, says Becca Levy, PhD, professor of epidemiology and psychology at Yale University. Levy's research shows that the cultural attitudes about aging that we absorb can make a significant difference in how well we age — both physically and mentally. Our beliefs about aging are effectively a lifestyle factor, one over which we have some control.

“It's good to question the negative age beliefs and reinforce the positive age beliefs,” says Levy, author of *Breaking the Age Code: How Your Beliefs About Aging Determine How Long and Well You Live*. “Middle age is a great time to question your direction or where you want to go in the future. It's a particularly powerful time to think about strengthening positive beliefs about getting older and aging. Age beliefs are malleable and can change at any stage of our life.”

Botton has seen lots of real-life examples of how a positive attitude toward aging makes a difference, even personally. Even though she'd successfully navigated several big career changes that challenged her identity, she found herself staring down the big 6-0 with trepidation.

“I felt 60 was a number that could not possibly be associated with me,” she recalls. Having lived her life on a “slightly alternative path” — one without kids or even retirement on a distant horizon — made the prospect jarring.

So Botton turned to her community of *Oldster* readers for support. “So many of my readers would comment telling me their lives took off after 60,” she says. “They hit their stride, they felt like they knew who they were, they were at the top of the game professionally or changed careers and found the right one, left the marriage that wasn't working, even found the right partner after 70 or 75.”

Most helpfully, they told her not to freak out. Instead, she remembers hearing, “You don't know what's ahead. If you're doing your work and tending to your life, it's very possible it will all be good.”

They were right, Botton says. She now describes her life after 60 as “the best surprise.”



4. EMBRACE NEW CHALLENGES

Levy's research shows that strengthening positive beliefs about aging allows you to do more than stave off decline.

Clearing away negative assumptions makes it easier to improve and develop new skills in mid- to late life.

This approach can be especially empowering in the fitness arena. Stacey Miller, a midlifer who coaches endurance athletes in Philadelphia, says setting a goal for something that excites and challenges you is one of the best things you can do for yourself.

She recently got a call from an almost 80-year-old looking to train for a marathon “before he gets old.”

“It doesn't have to be a marathon,” she says. “There's a guy in Norway who is cross-country skiing from town to town pulling a sled. But pick something that's scary, because then you need to train and hold the goal close.”

If an activity exceeds your current strength and skill level, so much the better. Even if you were a Division I athlete in college, you probably won't run at your DI speed anymore. But you might well be able to run farther, having gained in endurance what you may have lost in speed. Or you might discover you can lift more or be a more supportive member of a team.

Once you've lived to middle age, you've probably overcome some hardships. This resilience is a great resource when learning new skills and facing new challenges.

5.

SLOW DOWN

Take your time exploring the ideas, feelings, and relationships that are central to your experience, Yeager advises. It won't help to fixate on

what went wrong in the past or what could go wrong in the future. Ground yourself in the present — there is no rush to arrive anywhere. Get to know what you really want and need now, as you are.

"Anytime we're ruminating about things that have happened in the past, we're closer to being depressed," he explains. "And when we are projecting onto the future, we're closer to anxiety."

Yet we always have the current moment, right here in the middle — between the past and the future. This is when we can chart our own new course, if we choose to do so.

"There is wisdom in the midst of midlife," he says. "Our mistakes are not our weaknesses, but they are our curriculum, so use them to move forward."

As for the feeling that your best days are behind you, Yeager offers this quote, often attributed to Nelson Mandela: "I never lose. I either win or learn." 🍀

KATIE DOHMAN is a writer and editor in St. Paul, Minn.



Overcoming Ageism

To help reduce the power of ageist messages and strengthen a more positive understanding of aging, Yale researcher Becca Levy, PhD, developed the ABC method, which she shares in her book, *Breaking the Age Code: How Your Beliefs About Aging Determine How Long and Well You Live*.

A: Raise AWARENESS. Most people don't realize they are being exposed to so many ageist messages. "It's so omnipresent in advertising and different sources, and people don't recognize they're being exposed," she says. "It's not always easy to notice them."

Start paying attention to how aging is presented in the shows you watch, the advertising you encounter, even in conversations with friends and family. Notice when aging is presented as something shameful or silly, and consider whether there's a more positive way to frame it.

B: Place BLAME where it's due. This step involves recognizing the negative impact of ageism. "When an older person encounters challenges, it's not always due to aging itself but due to societal ageism that is creating barriers," Levy says. "Recognizing the source of challenges is really important."

So, if you want to do something but feel like you're too old — or if you judge someone else as too old to be doing what they're doing — where is that feeling coming from? Who and what is telling you that?

C: CHALLENGE the popular narrative. Find ways to reframe negative age beliefs. We can do this for ourselves and for our communities. Consider whether your words are contributing to positive or negative messages about aging. Start telling people they look great instead of young. Question your friends when they say they're too old for something. Seek out stories that celebrate the wisdom of elders rather than the comedy of decline.

"One of the things I've advocated for is an age-liberation movement where we are working together to overcome society's ageism," Levy says. "Until that happens, it's good to think about the individual skills to help us identify and question negative age beliefs."

(For more advice on responding to ageism, turn to page 76.)

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A photograph of three people walking away from the camera on a sandy beach at sunset. The person on the left is wearing a blue jacket and jeans, the person in the middle is wearing a light-colored sweater and dark pants, and the person on the right is wearing a patterned sweater and jeans. They are all wearing scarves and have their arms around each other. The beach is wide and sandy, with some seaweed scattered about. The ocean is in the background with gentle waves, and the sky is a warm orange color from the setting sun.

REAL LIFE

GETTING OLDER can be rich and rewarding when you tend to what really matters. On **page 75**, learn three ways to nourish your cognitive health and emotional well-being.

Keeping Family History Alive

Thoughtful interview strategies for connecting with older relatives and capturing their life stories.

BY JON SPAYDE

BEFORE her mother passed away, Elizabeth Keating wanted to learn more about her family history. Through several interviews, she gathered information from her mom about their relatives and the family tree.

"But then, after she passed in 2014, I realized I'd asked her all the wrong questions," Keating recalls.

"She had a whole life before my siblings and I came along. What was her childhood like? What was it like growing up in her time? I wanted to know my mother as a person rather than as a mother."

Like Keating, we may be familiar with our grandparents, parents, aunts, and uncles in their familial roles. We create images of our relatives based on their presence at family events. We might be well-versed in their oft-repeated anecdotes.

Yet we may not really know who they are beyond their relationships to us.

In particular, we probably don't know much about their experiences as younger people — the stories that helped shape who they became.

Keating's experience highlights a fact of life: If we don't take the opportunity to learn about our elders, their memories and knowledge will be lost when they leave us.

On a lighter note, the time we spend getting to know our elders can be enjoyable for both parties.

Asking questions and listening offers them the gift of being truly seen and heard. And as older people experience loneliness and isolation at higher rates, our attention may be the most valuable gift we can offer.

"Older people can get lonely and feel their knowledge isn't important to anyone," Keating says. "If you really want to make an older person feel valued and more a part of things today, ask them about their experiences and the details of their past."

BREAKING DOWN BARRIERS

Even if we're motivated to learn our elders' stories, it can be difficult to get started. We may not know when or how to begin, what sorts of questions to ask, or how to handle the

challenges of emotion, memory, and understanding that arise.

Keating, a professor emeritus of anthropology at the University of Texas at Austin, adds that younger people may feel uncomfortable asking personal questions of their elders, especially if they've never interviewed someone before. Yet the longer we wait, the more we risk losing our opportunity.

While mourning the loss of her mother, Keating was inspired to help others learn their elders' stories before it's too late. She details the strategies she developed in her book *The Essential Questions: Interview Your Family to Uncover Stories and Bridge Generations*.

In the book, she also describes a project in which her undergraduate students used the techniques to interview their grandparents, and she reflects on how the interviews helped them foster a deeper connection with their older relatives.

The following tips can help you do the same.





8 Tips for Gathering Your Elders' Stories

1. BEGIN NOW. Unless your elder is currently navigating an acute health crisis or loss, there's no point in putting off the process, says Keating.

Even memory issues may not be much of a barrier. She notes that age-related memory loss is more likely to affect short-term memory than long-term memory. "People who are having these issues usually can still remember their past quite well."



2. CHOOSE THE FORMAT CAREFULLY.

Keating recommends conducting in-person interviews whenever possible. The technical aspects of a Zoom connection may be challenging for people who aren't digital natives. And, even with tech-savvy elders, screens can present a barrier to the

immediacy and intimacy of the conversation.

But if a virtual connection is your only option with far-flung elders, so be it. The challenges are worth the trouble.

Whether you meet in person or online, use some type of digital recording to capture the conversation so you don't have to take notes and break eye contact. "If you want a written record," Keating says, "there's so much great transcription software out there that it's much easier than it used to be to go from recording to text."

3. OPEN WITH EASY QUESTIONS.

"Start with 'Where and when were you born? Is there a family story about your birth, or about your name? And what were your favorite toys, hobbies, and books?' Simple ones like that," Keating advises.

4. MOVE TO CONCRETE DESCRIPTION. Encourage elders to describe physical environments from their early life. Keating says that this is one of the most powerful ways to move the conversation forward.

"Try to learn what their sensory environment was like: what the rooms in their houses looked and felt like, what they saw out of their window as a child when they woke up in the morning," she suggests.

Such description often unearths a treasure trove of recovered memories and stories. "These concrete questions almost always lead to them remembering things they thought they'd forgotten, and things they never would've told you because they seem too ordinary."

5. USE OBJECTS. Sharing photos, articles of clothing, awards, and other meaningful objects can prompt memories associated with them.



6. SHOW YOUR ATTENTION AND RESPECT.

Apply the principles of active listening, which include staying fully present, maintaining eye contact, and focusing on listening to understand.

Keating recommends occasionally repeating what you've just heard — "So you spent your summers at the lake," for example — to show that you are paying respectful attention. This strategy can also inspire additional memories or details. (Find more tips for improving your listening skills at ELmag.com/howtolisten.)

7. LET YOUR RELATIVE LEAD.

While Keating acknowledges that follow-up questions are a valuable tool, she cautions interviewers to avoid unintentionally steering the conversation. This is especially important when difficult or disturbing memories emerge, such as a death or divorce.

"In those moments of emotion, the best thing to do is to just sit quietly and let the person experience them, rather than rushing through them as if the feelings are embarrassing," she advises.

"Let the elder determine how much they want to say. And there's a lot you can do and say to show compassion as a listener: 'That must have been difficult for you.'"

8. DON'T BE AFRAID OF SILENCES. "I tell my students to tolerate a seven-second silence," Keating says. "It may take your elder a bit of time to remember, and being patient in this way shows the elder that they are in charge of the conversation."

Like the interviews themselves, the lapse between anecdotes may be uncomfortable at first. We don't often linger in stillness and waiting. But slowing down is the point. These interviews are about hearing our elders' stories as they want to share them.

And as we take a pause from regular life to hear about our loved ones' pasts, we can allow ourselves to cherish this moment in the present with them — after all, it may become a chapter in our own elder story someday. 🍂

JON SPAYDE is an *Experience Life* contributing editor.

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3 Habits for Healthy Aging

An integrative psychiatrist shares his holistic strategies for aging well.

BY HENRY EMMONS, MD

I'VE CROSSED the threshold of retirement, but I'm still working. And now I work because I choose to, not because I have to. I also find myself caring less about how many years I have left and more about the quality of the ones I'm now living. I pay attention to whether I'm feeling deeply, loving fully, and showing up for the people and moments that matter.

Those are some blessings of aging.

I've also experimented with a lot of strategies for supporting my brain and emotional well-being as I age. The three I keep coming back to are simple enough that anyone can do them. They don't guarantee a problem-free life — nothing does — but they've helped me age with a little more resilience and grace. They can help you, too.

1. FEED YOUR BRAIN

One concrete habit that supports lasting mental health is good nutrition. Every day, I take a high-quality fish-oil supplement that combines EPA and DHA; a methylated B-complex vitamin; and magnesium L-threonate. These nutrients can support cognitive function and help regulate mood, as well as help protect against age-related decline.

I don't rely solely on supplements. I get plenty of omega-3s from fatty fish, including salmon and sardines, as well as from walnuts, flaxseeds, and chia seeds. I like getting B vitamins from leafy greens, whole grains, quality eggs, and legumes. And I love getting magnesium from dark chocolate — as well as almonds, spinach, and black beans.

I'm not seeking perfection here, just making sure my brain has what it needs to maintain a strong, resilient foundation.

2. TEND TO YOUR INNER LIFE

My second habit is less concrete but more important: I make time for stillness each day. Not necessarily formal meditation, but some practice that lets me turn inward and listen.

I might spend this time doing absolutely nothing for a few minutes. Or I walk in the woods with no agenda. Or I sit with tea and notice what I'm feeling. The form matters less than the intention — to stop striving and just be.

I've had this practice for decades. It helps ensure that I don't miss my own life. Stillness creates space to process, grieve what needs grieving, and notice what brings joy. It helps me hear myself.

There's no right way to do this. Just create a little space in your day to turn inward with curiosity and compassion. Start with five minutes, and see where it goes from there.

3. SAVOR WHAT YOU LOVE

The third habit is transformative: Practice savoring. You might savor a good meal, a beautiful morning, the sight of a migrating bird. But I especially recommend savoring your time with everyone you care about.

When you're with someone, really look at them. Notice one thing — the warmth in their voice, how they laugh. Let yourself feel the goodness of their presence. You're not thinking about what's coming up or revisiting what happened yesterday. You're just here, now, taking it in. Your time together is limited, and you let yourself know it. That's it.

Research shows that savoring is among the most effective ways to increase well-being. But I don't do it because of research. Savoring allows me to receive the gift of this moment, or this person, exactly as they are.

IT'S NEVER TOO LATE

People ask if it's too late to start aging well. The answer is no. Your brain retains the capacity to change throughout life. You can start nourishing your brain, tending your inner life, and savoring positive experiences at any age.

Is it ever too early? Also no. I wish I'd started decades sooner. But I'm grateful I started when I did. Aging is going to happen whether we cultivate positive habits or not. Bodies decline. Losses accumulate. But how we meet those realities is at least partly up to us.

These three habits help me be present for life's inevitable losses without being taken down by them. They also help me love the people in my life more fully, meet my own limitations with a little more kindness, and keep doing work that matters. And they enable me to still feel joy, even in the midst of sorrow.

This is what I want from aging: Not to avoid all pain, but to have the inner resources to meet whatever comes my way. These simple practices make that more possible. At this stage of life, that's enough.

HENRY EMMONS, MD, is an integrative psychiatrist and the author of *The Chemistry of Joy*, *The Chemistry of Calm*, and *Staying Sharp*.

An Age-Old Problem

Guidance for challenging ageism with curiosity and courage.



BY JON SPAYDE

IF WE'RE LUCKY, we'll get older than we are now.

And yet, when we reach what is euphemistically called “a certain age” — somewhere north of 55 — cultural messages tell us that we're not so lucky after all. We forfeit our membership in advertisers' coveted demographic (18 to 34 or 49, depending on the product); we're less likely to be hired and more likely to be let go; we're considered to be on the downward slide of life.

People start calling us “young man” or “young lady” in a slightly surreal effort to buck us up, and we may start getting birthday cards that turn our supposed decline into a punchline.

This is ageism. It's so common and socially permitted that it doesn't seem

to be in the same league as other prejudices, yet its effects can be just as damaging.

Ageism can harm a person's mental health by engendering cynical, hopeless attitudes and self-talk. A study published in 2022 found that experiencing ageism is associated with an increased risk of depressive symptoms and even chronic health problems.

And it pervades our lives: In a 2019 poll, 93 percent of respondents between the ages of 50 and 80 said they have experienced ageism.

Ageism isn't a problem only for the over-55s, of course; it's also at play when we assume that someone is too young for a task or role without

inquiring about their skills and qualifications. It's any judgment on the basis of age. But it's particularly harmful to older people.

What should we do, then, when we're confronted by expressions of ageism? And how can we root it out from our own consciousness — however old we are?

Brooklyn-based writer and activist Ashton Applewhite, author of *This Chair Rocks: A Manifesto Against Ageism*, suggests we start by taking the issue seriously. “Some people say that ageism is the last socially acceptable prejudice,” she says. “I'm not one of them, because no prejudice is acceptable.”

STRESS SOURCES

You don't recognize ageism as harmful. Ageism is so normalized that it often flies under the radar. "It goes unexamined," says Applewhite.

You ignore ageism because you don't want to think about aging. "There are aspects of aging that are not welcome," Applewhite acknowledges. "There are tons of things about it that are not under our control. But painting it over with clichés, or saying, 'I just don't want to think about it,' does us no favors. When we avoid or skirt around something and tuck it back in the closet or under the bed where the monsters lie, it retains its hold over us."

Internalized ageism gets in the way. Because age does bring physical, mental, and emotional changes, ageist attitudes may seem rooted in truth. This promotes internalized bias, which can follow us as we age.

"If you believe ageist stereotypes, then you are less likely to respect yourself," Applewhite says. "You are less likely to take good care of yourself and to speak up if you think you have been treated in a way that is unacceptable. All those things become self-reinforcing — a vicious cycle."

It's difficult to object to ageism when it comes across as a joke or seems well-meaning. Ageist remarks are often presented in a lighthearted fashion — in phrases like "over the hill" and "old goat," and in jokes about "wacky" memory-loss scenarios. Euphemisms like "golden-ager" seem respectful, yet they actually isolate older people in age-based silos. You may worry that calling it out can make you seem like a killjoy or a nag.

You don't know how to respond to ageism in family or business contexts. These circumstances can make pointing out ageism more complicated. Within families, ageist banter may be a habit that some relatives see as a way of bonding. Meanwhile, standing up to a boss or a colleague may feel threatening to work relationships.

SUCCESS STRATEGIES

Examine the ways you think and talk about aging. This is the first and most essential step in resisting ageism, Applewhite says.

She recommends that we ask ourselves what aging means to us. Answers may include diminished power and physical decline, or better judgment and a release from social pressures. "And then, think about how you use the words 'old' and 'young.' For example, do you say, 'I don't feel old'? What does that really mean? It probably means you don't feel ugly, you don't feel useless, you don't feel incompetent. You can feel any of those things at any age."

Challenge ageism with curiosity rather than resentment. Once we accept that age alone doesn't determine who we are and what we can do, we can use that knowledge to respond to ageist remarks.

Applewhite suggests an all-purpose rejoinder to an ageist comment — "What do you mean by that?" or "Tell me more about that" — delivered in the spirit of curiosity and inquiry rather than shame and blame.

"What you want to provoke is a moment of self-reflection," she says. "If someone says, 'I feel so old,' you can ask, 'What does that mean to you?'"



Realize that age itself is not the issue. For Applewhite, this inquiry into what "old" means is critical to both understanding and challenging ageism.

"What's easy or hard, possible or impossible for someone is never actually about age," she explains. "There are always people older or younger than you who can or cannot do or feel a certain thing. You're not *too old* to climb Mount Kilimanjaro. You might not be in shape. You might not have the money to get to Tanzania. You might have done it yesterday and not feel like doing it today. We need to get to the real emotion, fact, barrier, or advantage hiding behind the word 'old.'

"Aging is a fact and it's fine to talk about it. Where it gets murky is when we assign a value to age."

Try a clever comeback. "When somebody tells me, 'You look good for your age,' I simply say, 'And you look good for yours!'" Applewhite says.

Recognize that resisting ageism is hard. "Nothing about this is easy," she acknowledges. We're barraged by negative aging messages from childhood on. These become part of our identities — unless we stop to challenge them. "A bias like ageism is deeply ingrained, and changing habits takes work."

Applewhite acknowledges that challenging ageism takes courage. "And if you do not feel safe making a challenge like this, especially to a superior, then — no judgment. We've all got to do this in our own way. But if we don't have these conversations, nothing changes." 🗯

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You Don't Need to Fight Time

Our time is limited whether we like it or not. But we can learn how to make this fact work for us.

BY OLIVER BURKEMAN



I'LL ADMIT THAT when I first encountered the Pomodoro Technique, I couldn't see what the fuss was about. Divide your work into 25-minute portions with five-minute breaks between them, measured with a timer. (Originally, a tomato-shaped kitchen timer, hence the name.)

I mean, sure. If you like. Or don't. What's the big deal?

It took writing a whole book about the power of embracing your finitude (*Four Thousand Weeks: Time Management for Mortals*) for me to appreciate that there's something deep and transformative in this approach.

The basic technique goes like this: Figure out the time you have available for work, or housework, or other necessary life tasks. Then divide it into 25-minute increments for deep focus, or "Pomodoros." After each one, take five minutes off. After four 25-minute Pomodoros, take a longer break.

At the start of each work session, you decide on what you plan to accomplish. There are rules for what to do if you get distracted, or if you underestimate or overestimate how long a task will take.

I'm not suggesting you adopt the technique. My point is that it can be a step on the path toward embracing your limitations. It shows you how to give up the fight against time.

WE ARE NOT SEPARATE FROM TIME

The core misconception in our relationship with time is exacerbated by most productivity advice. We've come to see time as something we need to master or conquer. We tend to think of time as a separate "thing," unlike,

say, medieval peasants, who had no such abstract notion.

We feel we've got to make the most of our time, or squeeze the most work from it, or use it to get on top of things, or do enough with it to feel a sense of self-worth. Our economic system makes things worse by causing many of us to feel as though we need to achieve this impossible mastery over our time simply to stay afloat.

Sadly, no human being has ever won a fight against time. We all get the limited time we get, along with limited control over it. And if we spend our lives fighting the truth of this situation, all that happens is that we feel more rushed and overwhelmed and impatient. And then one day, time decisively wins the fight — as it was always destined to do. (In other words, we die. It happens to everyone.)

To make the same point in a different way: No one is separate from time. We are all just the sum of the moments of our days. Trying to gain total control over these moments is like the legendary Baron Munchausen pulling himself out of a swamp by his own hair.

MAKE TIME AN ALLY

Enter the Pomodoro Technique. Its creator, Francesco Cirillo, describes it as a tool for turning time from a "predator" into an "ally." The idea is not to conquer time by imposing Pomodoros on it. It's about seeing that, in a certain sense, your day already consists of them.

You have a certain number of 25-minute chunks available for work, unfolding one after the other until it's time to pick up the kid from preschool or make dinner or go to bed.

The Pomodoro Technique is just a way of becoming more conscious of what's already true — that your time is fixed, finite, given, un-pause-able. It's also a tool for making slightly wiser decisions about how you spend your time, knowing that there'll still be, theoretically at least, a million things left undone at the end of the day.

All you really need to do (because it's genuinely all you *can* do) is use the next 25 minutes in the most worthwhile, feasible way. Then repeat.

This explains a crucial but lesser-known rule of the technique: If you assign a Pomodoro to a given task but finish early — perhaps your goal of, say, making notes on a book chapter took less time than you predicted — you are not to move on to the next task nor end the Pomodoro early.

That leads to a resumption of the fight against time, and the secret deluded hope of someday getting on top of it all. Instead, you can use any remaining minutes to review your work, and to get comfortable with the impatience you'll inevitably feel about not hurrying onward.

On the other side of the discomfort of accepting your limitations comes liberation. And, for that matter, a lot more productivity. Stepping into finitude is a relief. You get to drop the futile quest to do something no human could ever do — attain a position of mastery and dominance over time. You can work with it instead.

OLIVER BURKEMAN is the author of the best-selling book *Meditations for Mortals* as well as the newsletter *The Imperfectionist*, from which this column is adapted.

How to Protect Yourself From Wildfire Smoke

Wildfires are on the rise and, with them,
the risks of toxic smoke exposure.

BY JILL PATTON, NBC-HWC

HUNDREDS OF MILES from the wildfires that raged across northern Saskatchewan and Manitoba, Kelly Whitaker lay in her bed in suburban Minneapolis suffering a weeklong migraine attack. She'd experienced air quality-triggered symptoms before, but this was extraordinary.

Massive plumes of smoke, hitchhiking on high-altitude winds and the jet stream, spread across North America during the summer of 2025 — Canada's second-worst wildfire season on record. Tendrils

reached as far south as Florida and as far east as Europe. The smoke that settled over Minneapolis that summer earned the city an unenviable position at the top of lists ranking the most polluted air in the world.

"If I ever have migraines again like I did that week, I will absolutely go to the emergency room," says Whitaker. "They were completely debilitating."

Even when fires are hundreds or thousands of miles away, smoke can trigger headaches, dizziness, and nausea in some people.

AN INCREASING THREAT

The number and intensity of wildfires — and the

toxic emissions they produce — are increasing. A 2024 paper in *Nature Ecology and Evolution* reported that the most extreme fire events more than doubled in frequency over the previous 21 years.

Also in 2024, an article in the journal *Science* revealed that carbon-dioxide emissions from forest fires increased globally by 60 percent since 2001. Fire-fueled emissions nearly tripled in some northern boreal forests due in large part to a rise in conditions caused by climate change, including more arid soil and more flammable vegetation.

Carbon dioxide isn't the only noxious gas that wildfires emit: The smoke contains carbon monoxide, nitrogen oxides, sulfur oxides, and other toxic gases. Once these gases enter the atmosphere, they transform chemically and produce secondary pollutants, including ground-level ozone.

Wildfire smoke also carries particulate matter — a mixture of solid and liquid droplets suspended in the air — composed of whatever is burning. Incompletely combusted plants, trees, grasses, and other organic matter generate chemicals called polycyclic aromatic hydrocarbons, which are often carcinogenic.

In addition, pollen, mold spores, dust, and ash are pulled into the air by the intense heat and wind. In inhabited areas, fires produce particulate matter that may include heavy metals, rubber, plastic, and other hazardous substances.

Particulate matter in wildfire smoke ranges in size from microscopic to visible (think dust motes). Ultrafine particles, known as $PM_{0.1}$, measure less than 0.1 micrometers in diameter; fine particles, or $PM_{2.5}$, are as large as 2.5 micrometers in diameter. These particulates are easily inhaled deep into the lungs, where they can make their way into the bloodstream.

SMOKE AND YOUR HEALTH

Short-term smoky air causes coughing, wheezing, and shortness of breath, as well as burning, itchy eyes and throats. Even when fires are hundreds or thousands of miles away, smoke can trigger headaches, dizziness, and nausea in some people. And it can worsen symptoms for those with respiratory conditions such as asthma and chronic obstructive pulmonary disease.

Just a few days' exposure to wildfire smoke has been linked to higher rates of heart attack, stroke, and heart

failure, particularly among older adults and people with cardiovascular disease.

If you're pregnant, wildfire-smoke exposure can increase your risk of premature delivery and a low birthweight. Children are especially vulnerable because wildfire smoke can damage still-developing lungs, and because kids also tend to be more active outdoors and proportionally take in more air for their body size.

demonstrated that higher residential levels of fine-particulate matter — especially from agriculture and wildfires — are associated with higher rates of dementia.

Further, with the increase in large, high-intensity fires, wildfire smoke is no longer just a local or regional concern; its scope can now reach and affect the health of millions of people.

"The plumes in these big wildfires punch into the stratosphere where the winds are really high and the



We're just beginning to understand some of the long-term health effects of wildfire smoke, **as well as the mechanisms by which smoke causes damage to the body.**

Experts say we're just beginning to understand some of the long-term health effects of wildfire smoke, as well as the mechanisms by which smoke causes damage to the body. We do know that smoke exposure accumulates, increasing lifetime cancer risk and causing lasting damage to the heart, lungs, and other organs.

Our brains take a hit as well. Neurotoxic and inflammatory substances in $PM_{2.5}$ and $PM_{0.1}$ are small enough to cross the blood-brain barrier, and there is a strong link between air pollution and Alzheimer's disease. A 2023 study, published in *JAMA Internal Medicine*,

smoke can be taken thousands of miles," says Marshall Burke, PhD, a professor at the Doerr School of Sustainability at Stanford University. "It used to be very rare that places like Minneapolis or cities on the East Coast would get smoke days at all, but now you're getting weeks at very high double-digit levels of PM, which is a really high exposure."

In 2025, Burke and his colleagues published a paper that projected, based on statistical and machine-learning models, that climate change-related increases in wildfire smoke $PM_{2.5}$ could result in more than 71,000 excess deaths per year by 2050.

When There's Smoke

Even if you don't fit the profile of the sensitive groups mentioned in air-quality index (AQI) alerts, don't presume you are immune to the effects of wildfire smoke.

"The truth about pollution is that there are no thresholds," says researcher Marshall Burke, PhD, a professor at the Doerr School of Sustainability at Stanford. "There's no level below which you are safe and above which you are in trouble. Even really small increases in pollution lead to measurable increases in emergency-

room visits and measurable increases in mortality."

Many people dismiss the risks if they don't feel symptomatic, says Kelly McCann, MD, a functional-medicine practitioner in Southern California.

"Prevention is key," she explains. "Just because you can't see it doesn't mean it's not affecting you."

If wildfire smoke makes its way to your area — whether the fire is local or blowing in from far away — take these precautions to protect your health.

Stay indoors when you can. Keep your windows and doors closed, and seal any leaks. Run an air conditioner if you have one, and make sure the fresh-air intake is closed and set on recirculate. Don't run bathroom or kitchen fans that pull air in from outside.

Monitor indoor air. For those in areas where pollution and wildfire smoke are a frequent threat, McCann recommends investing in an indoor air-quality monitor, such as the AirKnight 9-In-1, which provides information on several measures of air pollution inside your home, including PM_{2.5}.

"Just because you can't see it doesn't mean it's not affecting you."

a weather app, you can get hyperlocal — often block-by-block — data from PurpleAir, a crowdsourced air-quality monitoring network composed of lower-cost devices that upload real-time air quality data to the cloud.

For those on the move, McCann recommends the Atmotube PRO, a compact device that senses and reports air quality via your phone wherever you are.

Mask up. If you must go outside when the air is bad, wear a well-fitting N95, KN95, or P100 mask. Dust, cloth, and surgical masks do not filter out the fine particulates in smoke.

body's antioxidant capacity with N-acetylcysteine, glutathione, and vitamin C. While you can't supplement your way out of wildfire smoke exposure, "every little bit helps," she says. 🌱

JILL PATTON, NBC-HWC, is an *Experience Life* contributing editor.

Purify indoor air. Air purifiers with HEPA (high-efficiency particulate air) filters can significantly reduce your exposure to fine-particulate matter. Making a DIY air cleaner with a box fan and a MERV 13 air filter (look for instructions at www.epa.gov) is a cost-effective way to remove fine particulates.

McCann says that running an air purifier in your bedroom around the clock during bad-air days is a "nonnegotiable" protective measure. "You need a sleep sanctuary," she adds. "Sleep is where everything gets restored."

Monitor outdoor air. In addition to referencing local air-quality alerts from

Avoid or limit outdoor activities. This applies to you, your kids, and your pets. Take your workouts indoors, and if you must be outdoors for your job, wear an approved mask and take breaks in clean-air spaces. (For exercise options when wildfire smoke is bad, check out ELmag.com/airqualityandexercise.)

Support your body's detoxification. When you encounter toxins in wildfire smoke, your body's immune and detox systems ramp up activity, producing reactive oxygen molecules as a byproduct, explains McCann. She recommends boosting your



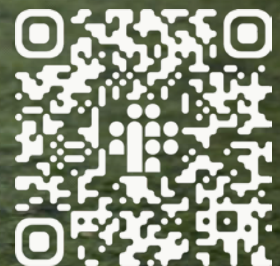
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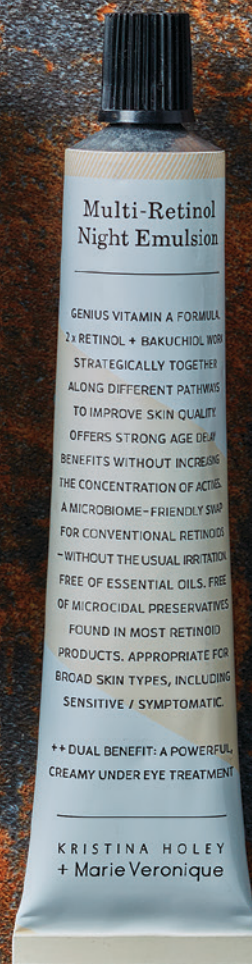




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Together, By Design

Introducing the Life Time Social Club.

BY **BAHRAM AKRADI**

WALK INTO any Life Time, and you're likely to see some variation of these scenes: a mom and daughter laughing as they battle it out on a pickleball court; a group of friends, recovered from a strength class that ended 20 minutes ago, still conversing in the LifeCafe; a member with their personal trainer, trying a new lift; kids running around the gym as they play a game of tag.

Spend even a little bit of time hanging around our clubs, and you'll realize pretty quickly that Life Time is a place where people enjoy going and where they enjoy staying and being together. It's a place where they feel like they belong.

Every day, our members experience countless moments of social connection. These encounters satisfy a basic biological need that we, as humans, have had throughout our existence: to be together.

Thousands of years ago, the survival of our hunter-gatherer ancestors depended on staying close to one another. A solitary human typically didn't last long on their own; their community meant the difference between living and dying. And something in us still remembers that.

Isolation doesn't just leave us sad and lonely; it wears the body down the same way inactivity or a poor diet does. We are built to connect.

That understanding is woven into Life Time's DNA.

Life Time was never meant to be a gym in the traditional sense: a transactional place with endless rows of cardio and strength machines and a confusing contract.

What our team set out to build was something else entirely — a place where people would *choose* to be and *choose* to keep coming back to. We

wanted it to be a third place, a home away from home and work, somewhere they could spend the whole day.

Of course, we offered fitness classes, programs, and workouts, but that was never the whole story. Fitness was the doorway to community.

This fall, that community takes on a new and exciting shape with the launch of the Life Time Social Club. This series of two-day events, occurring alongside other cultural moments and events (think New York Fashion Week or the Miami Marathon), will create opportunities to meaningfully connect with others. Imagine mornings of movement and recovery, afternoons of relaxation by the pool, and evenings of celebration and camaraderie.

The social club will bring the same energy many of our clubs already have, but on a larger stage and with a brighter spotlight.

You don't have to wait for one of the LT Social Club events to feel that energy, though. It's already there, in your own club. It's the collective spirit you feel playing mahjong on the pool deck with your pals, nailing the choreography with fellow participants at Ignite the Night, or throwing dice at a casino night that turns your club into a destination you never expected.

It may be different rooms, on a different scale, but it's the same idea: people gathering and having a genuinely good time with each other.

Humans *need* a third place. Somewhere they can relax, where real conversations can happen. A place where screens and schedules take a back seat, even for a little while. A place where meaningful relationships and friendships can



form around common interests and shared goals. These are the kinds of connections that contribute to a healthy way of life.

Which brings me back to where we started: Life Time's commitment to empowering a healthy way of life has never been about just the body. It's about helping people thrive, and none of us can thrive alone.

We aim to be a place where people want to go, and a place where showing up is the good part of their day. Where fun and connection aren't footnotes to health but rather the secret to the whole thing. As strangers become familiar, and eventually become friends, we realize we're not just getting healthier. We're getting happier, together.

Consider this your invitation to discover where you belong, whether it's in a group fitness class, at an ARORA coffee club, or on the pickleball court. And if a couple of days connecting with like-minded, health-motivated people is up your alley, sign up for the Life Time Social Club in the Life Time app, so you always know when local, regional, and national events are happening.

We can't wait to connect with you.

The first Life Time Social Club event is Sept. 12–13 at Life Time Sky in New York City. Mark your calendar!



BAHRAM AKRADI is the founder, chairman, and CEO of Life Time — Healthy Way of Life.



Aging is just another word for **living**.
— CINDY JOSEPH

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