

SENSORY SUPPORT THROUGH AUTISTIC MENOPAUSE

*A companion guide for when your system feels off
and nothing's working like it used to*

If you're autistic and going through menopause, you might be noticing changes that are hard to explain. These changes may be even harder to manage. Maybe your tolerance for heat has vanished, sounds feel sharper than usual, or your favorite clothes suddenly feel like sandpaper. Maybe you're exhausted all the time, even though you're not "doing" more. And maybe you're starting to wonder if it's all in your head.

It's not. These shifts are real.

Hormonal changes during perimenopause and menopause can amplify sensory sensitivities, disrupt emotional regulation, and destabilize the routines that once helped you stay grounded. If you already live with sensory differences, the added layer of hormonal shifts can make things feel more intense, more frequent, and less predictable.

This guide was written for you. It's not a fix-it list. It's a gentle reference point to walk with you through the messiness and offer a few strategies to make things easier on your body and your mind.



PART 1: TOOLS THAT CAN HELP WHEN YOU'RE SENSORY OVERLOADED

Hormonal changes can heighten both interoceptive and sensory experiences. Interoception refers to how your brain interprets internal signals — like body temperature, hunger, or the urge to rest. During menopause, your ability to track these signals may become less reliable or more intense. That's not a personal failing. It's a neurological response to hormone shifts that can throw off internal balance and make external stimuli feel harder to tolerate.

When everything feels like "too much," it's not about being overly sensitive. It's your nervous system doing its job. These suggestions draw from occupational therapy strategies that support regulation during sensory stress. They can also help you rebuild regulation habits, often called a sensory diet, which is a supportive menu of sensory inputs designed to help your system function well across the day.



COOLING STRATEGIES

Hot flashes, flushing, and fluctuating body temperature can be especially overwhelming for autistic people, whose thermal regulation is often already different. Cooling supports can offer both physical relief and sensory regulation.

Try cooling towels, gel packs, or a small portable fan during temperature spikes or episodes of facial flushing. Some people describe flushing as a sudden, hot rush to the face or chest — this can feel especially distressing if you're sensitive to heat or touch. Fabrics like bamboo or modal are soft, breathable, and less likely to irritate.



DRESS IN LAYERS

Choose lightweight, easy-to-remove layers so you can adjust as needed. Avoid clingy or synthetic materials that trap heat or feel scratchy.

ADJUST LIGHT & SOUND

Overhead lighting and background noise might feel harsher than usual. Soften your space with lamps, warm bulbs, tinted lenses, or blackout curtains. Noise-canceling headphones or earplugs can help buffer overwhelming environments.

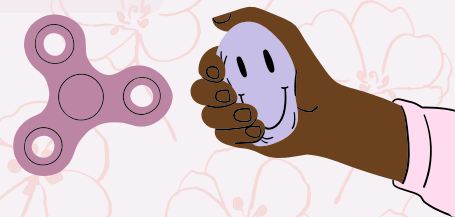
GIVE YOUR BODY SOME FEEDBACK

Compression garments, weighted lap pads, or stretchy fabric wraps can provide grounding pressure input. This kind of proprioceptive feedback may help when your system feels unmoored.



MAKE A LOW-STIMULATION SPACE

Create a predictable retreat where your nervous system can take a break. Choose a corner of your home and fill it with sensory-soothing items. This might be a soft blanket, dim lighting, stim tools, or simply a quiet place to sit.



Sensory overload can derail focus and make transitions harder. Repetitive, rhythmic movement — pacing, rocking, gentle stretching — can help reset your nervous system and restore a sense of internal rhythm.

TRY RHYTHMIC MOVEMENT



SUPPORT EXECUTIVE FUNCTION

Menopausal shifts can make planning, initiating, or following through on tasks more difficult. Try visual schedules, dry-erase boards, or task apps that externalize routines. Body-doubling (doing a task alongside someone else) can also help with momentum and motivation.



PART 2: WHAT OCCUPATIONAL THERAPY CAN OFFER RIGHT NOW

Menopause doesn't just change how you feel. It changes how you function. You may notice it's harder to follow routines, stay organized, or complete everyday tasks without feeling overwhelmed. This is where occupational therapy (OT) comes in. Not to "fix" you, but to support your ability to engage in daily life in a way that matches your current needs and capacity.

Occupational therapy is about more than sensory tools. It's about helping you adapt daily activities to feel more manageable. Whether it's getting dressed, managing work, planning meals, or recovering from shutdowns, OTs work with the stuff that shapes real life.

If things that used to be manageable now feel draining, frustrating, or impossible, you're not alone. Many autistic people experience this shift in menopause. And it doesn't mean you're doing something wrong.

HERE'S HOW AN OT CAN SUPPORT YOU:

- **Evaluate interoception and sensory reactivity**

Assess how your body reads internal cues (like hunger or temperature) and how sensory input may be contributing to burnout or distress.

- **Adapt meaningful activities**

Reconnect with formerly enjoyable things — like gardening, painting, or social time — through pacing, environmental changes, or supportive tools.



- **Use sensory-adapted mindfulness**

Examples include cold water foot baths, guided imagery with non-verbal cues, or tactile grounding using the 5-4-3-2-1 method.

- **Build a sensory diet**

Create personalized routines with sensory inputs — like chewing sour candy, resistance band stretches, or lap pads — that support nervous system balance.

- **Unpack what's changed**

Identify how hormonal shifts are affecting tasks like hygiene, cooking, sleep, or communication, and break them into more doable steps.

- **Create a sensory map**

Pinpoint your triggers and your soothers so you can stop guessing and start planning.

- **Build sustainable routines**

Develop low-effort, high-impact habits that prevent overwhelm before it builds.

- **Support better sleep**

Work with your body's sensory profile to improve your sleep environment. This might involve weighted blankets, cooling sheets, light blockers, or creating sensory-based wind-down routines.



HERE'S HOW AN OT CAN SUPPORT YOU:

- **Offer emotion regulation tools**

Not generic “just breathe” advice. These are real strategies that match how autistic nervous systems handle shutdowns, meltdowns, and overwhelm.

- **Suggest accommodations**

Modify clothing, workspace, or schedules so they work with you instead of against you.

- **Help with medical visits**

Prep notes, communication tools, or visuals to reduce stress and help you feel heard in appointments.



YOU DON'T HAVE TO PUSH THROUGH ALONE



Menopause is more than a hormone shift. It can reshape how you think, feel, and function. For autistic people, that can mean changes in temperature regulation, sensory processing, executive functioning, and emotional recovery.

Occupational therapy can be especially helpful for supporting these shifts. You don't have to wait for a crisis. Support can begin with whatever energy you've got.

This phase may feel disorienting. But it's not something you have to navigate alone or without tools. OT isn't about changing who you are. It's about building systems that fit who you are now and who you're becoming.

You deserve support that respects your sensory needs, your autonomy, and your pace. If you don't know where to start, start here.

And when you're ready, bring these tools with you. You can take them to your care team, to your therapist, or just into your next hard day. Your patterns are information you can use to ask for support, adjust your environment, and make care feel more workable.

Note: Menopausal experiences differ across race, gender identity, language access, and disability. If you're BIPOC, trans, nonspeaking, or multiply disabled, the barriers to accessing support may be even higher. That doesn't mean you deserve it any less.

What to Look For in an OT: Seek out providers with experience in sensory integration, neurodivergent care, or menopause-related care. Ask about **trauma-informed** or **gender-affirming practices**.

Red Flags to Watch Out For: If a provider dismisses your sensory needs, recommends masking strategies, or treats overload as emotional instability, that's not supportive care.

