Aisha

4 August 2026 - 1 November 2026 (90 days)

209 of 269 check-ins completed (78%) this period

Methodology on page 12

PATTERNS DETECTED THIS PERIOD

Firm - enough data to stand on Partial - worth watching Early signal - limited coverage

Anxiety - sustained above baseline FIRM
(7 days · from 7 Sept · firm data coverage)

Your Dizziness tends to be worse first thing than by evening, holding true on 58 of 59 days. FIRM
(58 of 59 days with both a morning and an evening reading)

Anxiety decreased by 2.6 points in the 21 days after Increased sertraline to 150mg. FIRM
(12 days before · 21 days after)

24 additional lower-confidence patterns not shown here.

PATIENT WANTS TO DISCUSS

1. Could the anxiety and stomach flare in the weeks after the assessment letter be linked to it?
2. Is the morning dizziness worth raising before the cardiology referral comes through?

Self-report data · on-device processing · correlation is not causation

MIND DOMAIN SUMMARY

DOMAIN	BASELINE	CURRENT	TREND	ACTIVE PATTERN
Anxiety	4.0	**4.0**	→	sustained above baseline
Concentration	6.0	**5.2**	↓	Event effect
Energy	5.0	**5.0**	→	Domain connection
Mood	7.0	**7.0**	→	more stable
Sensory overwhelm	3.0	**3.7**	↑	Rare event

BODY DOMAIN SUMMARY

DOMAIN	BASELINE	CURRENT	TREND	ACTIVE PATTERN
Joint & muscle pain	4.0	**5.0**	↑	Evolving trend
Joint instability	3.0	**5.0**	↑	Event effect
Dizziness	5.0	**5.0**	→	Time-of-day pattern
Gut	2.0	**2.5**	↑	Evolving trend
Fatigue across the day	4.5	5.0	↑	*Within baseline range*
Widespread pain	4.0	4.0	→	*Within baseline range*
Breathing	2.0	2.0	→	*Within baseline range*
Brain fog	3.5	4.0	↑	*Within baseline range*
End of day exhaustion	5.0	5.0	→	*Within baseline range*

READING THESE TABLES

Each domain is compared against this patient's own rolling baseline, never a population norm. A domain sitting at its baseline is typical for them, which is not the same as being unremarkable in absolute terms.

EVENT AND INTERVENTION TIMELINE

C 30 Oct · Cycle day 1 · Day 1

1 15 Oct · Therapy · Started hypermobility physiotherapy

Joint instability decreased by 1.7 points in the 21 days after Started hypermobility physiotherapy. (21 days before · 17 days after)

C 2 Oct · Cycle day 1 · Day 1

5 earlier entries not shown.

RARE EVENTS & PATTERN EVOLUTION

Multiple domains - rare event — 2 occurrences

Sleep at or below 2/5 for 3+ consecutive days - occurred 2 times

Occurred: 24 Aug, 8 Sept

symptoms shifted in 2 of 2 instances afterward

Anxiety, Concentration, Energy, Mood, Sensory overwhelm - rare event — 1 occurrence

3+ tracked domains dropped 2+ points within 48 hours - occurred 1 time

Occurred: 26 Sept

Sensory overwhelm - rare event — 3 occurrences

sensory_sensitivity reached >=3 points from personal baseline - occurred 3 times

Occurred: 5 Aug, 12 Aug, 30 Sept

3 additional entries not shown.

WRITTEN AT THE TIME

9 Oct •	Wrist went reaching for a high shelf
26 Sept •	Better day. Walked to the shops and back without needing to sit down.
15 Sept •	Pushed through the flare week and paid for it the next two days
6 Sept •	Assessment letter came. Good news, apparently. Could not settle all afternoon.
12 Aug •	Knee gave way going down stairs
12 Sept	Couldn't focus at all, reread the same email four times
26 Aug	Stood up too fast after a shower, went grey and had to sit back down

The patient's own words, entered with the check-in and reproduced unedited. A bullet marks a day this report already flags elsewhere. Not analysed or scored.

DOMAIN SPARKLINES

4 Aug – 1 Nov

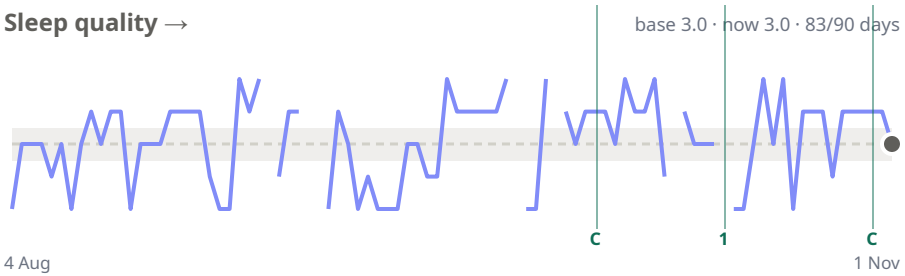


READING THESE CHARTS

Grey = within personal baseline, not "fine" in an absolute sense: a score typical for this individual can still look high or low on a standard scale.

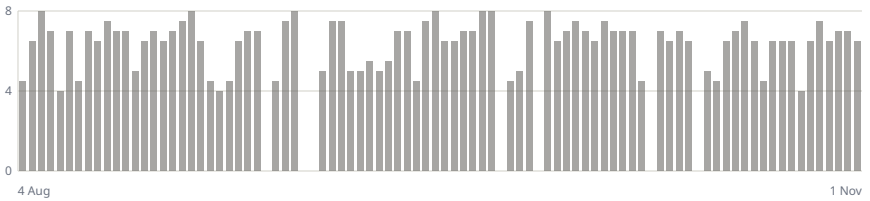
SLEEP QUALITY, RATED 1-5 EACH MORNING

4 Aug – 1 Nov



Median rating 3.0 / 5 against a personal baseline of 3.0.

HOURS SLEPT PER NIGHT



83 of 90 nights have a duration recorded · shortest 4.0 h, longest 8.0 h · gaps are nights not logged.

WHAT FOLLOWS A POOR NIGHT

DOMAIN	AFTER GOOD SLEEP	AFTER POOR SLEEP	DIFFERENCE	NIGHTS
Concentration	6.6	3.8	+2.8	17/5
Energy	6.1	4.0	+2.1	17/5
Mood	7.2	6.8	+0.4	17/5
Sensory overwhelm	3.6	3.4	+0.2	17/5
Anxiety	3.9	3.8	+0.1	17/5

Nights column is good/poor nights compared. A difference is a mean gap, not a test of cause.

READING THIS PAGE

Quality and duration are separate measurements: a rating out of 5 given each morning, and a count of hours. They are charted separately because they can move apart - a long night can still be rated poorly, and that gap is itself worth seeing.

NOTABLE BODY EVENTS

DATE	EVENT	CONTEXT
24 Oct	Palpitations	-
9 Oct	A joint went out	R Wrist · Wrist went reaching for a high shelf

6 earlier events not shown.

PAIN & INSTABILITY SITES

R Knee	5 Aug to 15 Oct	**29 days**
L Shoulder	4 Aug to 27 Sept	**17 days**
R Wrist	12 Aug to 9 Oct	**8 days**

EVENT AND INTERVENTION TIMELINE

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Joint instability decreased by 1.7 points in the 21 days after Started hypermobility physiotherapy. (21 days before · 17 days after)

C 2 Oct · Cycle day 1 · Day 1

4 earlier entries not shown.

RARE EVENTS & PATTERN EVOLUTION

Fatigue across the day - rare event — 5 occurrences

fatigue reached >=3 points from personal baseline - occurred 5 times

Occurred: 5 Sept, 8 Sept, 9 Sept, 11 Sept, 24 Sept

Joint & muscle pain - rare event — 2 occurrences

pain_mechanical reached >=3 points from personal baseline - occurred 2 times

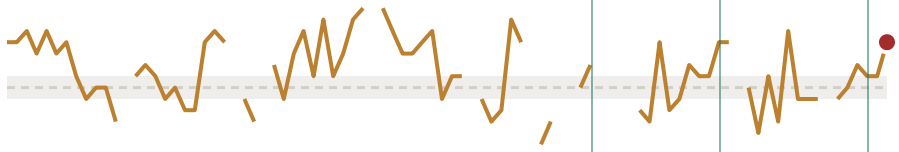
Occurred: 12 Aug, 9 Oct

4 additional entries not shown.

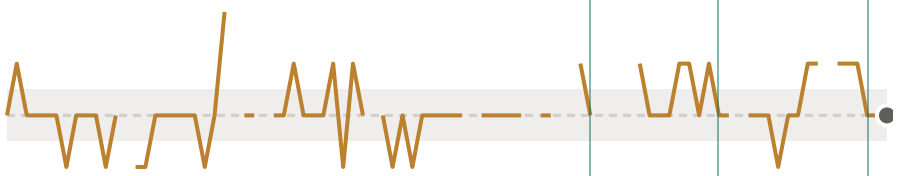
DOMAIN SPARKLINES

4 Aug – 1 Nov

Fatigue across the day ↑ base 4.5 · now 5.0 · 76/90 days



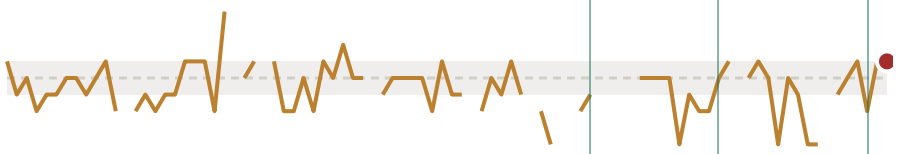
Breathing → base 2.0 · now 2.0 · 76/90 days



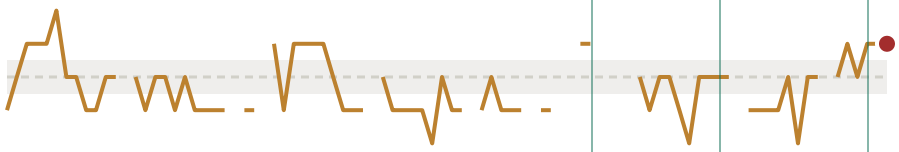
Joint & muscle pain ↑ base 4.0 · now 5.0 · 76/90 days



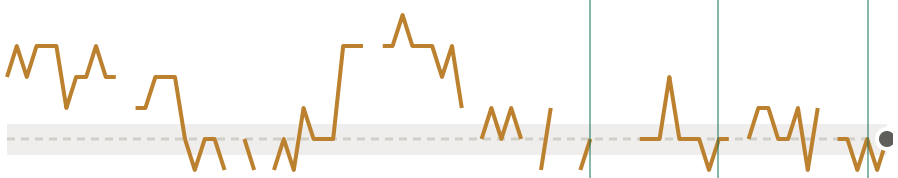
Dizziness → base 5.0 · now 5.0 · 76/90 days



Widespread pain → base 4.0 · now 4.0 · 76/90 days



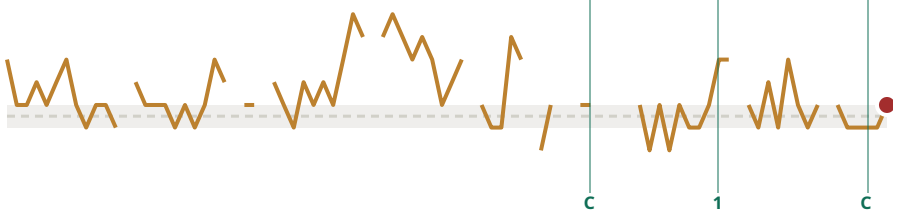
Gut ↑ base 2.0 · now 2.5 · 76/90 days



Joint instability ↑ base 3.0 · now 5.0 · 76/90 days



Brain fog ↑ base 3.5 · now 4.0 · 76/90 days

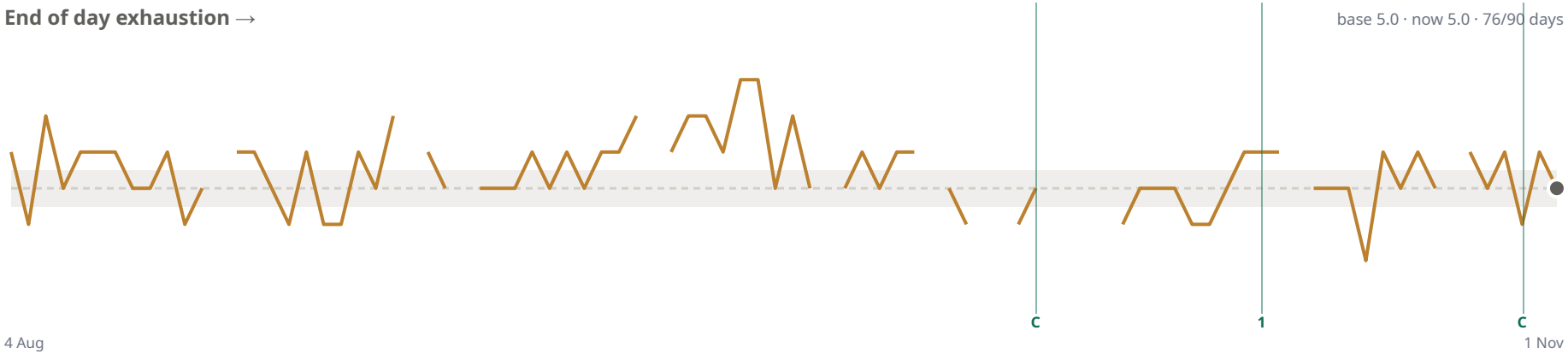


DOMAIN SPARKLINES (CONTINUED)

4 Aug – 1 Nov

End of day exhaustion →

base 5.0 · now 5.0 · 76/90 days



READING THESE CHARTS

Grey = within personal baseline, not "fine" in an absolute sense: a score typical for this individual can still look high or low on a standard scale.

HOW IT FELT, IN THE PATIENT'S OWN TERMS

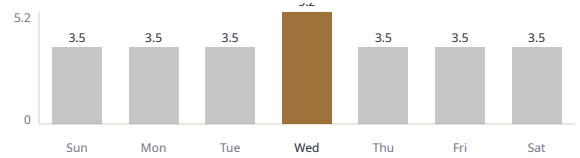
1 Nov	Pain 3 joint & muscle, 5 widespread	aching · stiff
31 Oct	Pain 3 joint & muscle, 5 widespread	aching
30 Oct	Pain 3 joint & muscle, 5 widespread	burning
28 Oct	Pain 3 joint & muscle, 5 widespread	aching
25 Oct	Pain 4 joint & muscle, 4 widespread	aching · electric or shooting
25 Oct	Breathing 3	can't get a full breath
24 Oct	Pain 4 joint & muscle, 4 widespread	burning
24 Oct	Breathing 3	breathless on effort
23 Oct	Pain 4 joint & muscle, 2 widespread	aching
19 Oct	Pain 4 joint & muscle, 3 widespread	aching

64 earlier descriptions not shown.

Chosen from a fixed list at the time of logging, alongside the scores charted above. Descriptive only - never scored, ranked or fed into pattern detection.

TIME-BASED PATTERNS

SENSORY OVERWHELM - DAY OF WEEK



Wednesdays avg 5.2 vs other days 3.5

ENERGY - TIME OF DAY



WHAT MOVES WITH WHAT

Eight things move together PARTIAL

Brain fog · Concentration · *End of day exhaustion* · Energy · Anxiety · *Gut* · *Fatigue across the day* · Mood

Each of these moved with at least one other. Not every pair was compared.

22–72 days compared · **links mind and body**

ON THEIR OWN

Your Joint instability and Joint & muscle pain tend to move together.	25 days · Firm
Your Gut and Mood tend to move in opposite directions.	22 days · Partial
Your Mood and Dizziness tend to move in opposite directions.	20 days · Partial

Body factors in italics. A block is a chain of measured pairs, not a claim that every factor in it was compared with every other · correlation is not causation

AROUND CYCLE DAY 1

FACTOR	WITHIN 3 DAYS	OTHER DAYS	DIFFERENCE	DAYS COMPARED
Widespread pain	4.5	3.4	+1.2	22/54
Fatigue across the day	5.8	4.9	+0.8	22/54

4 cycle starts recorded in this period · a mean comparison across the 3 days either side of each, against every other day with a reading · no phase is inferred, and this is not a test of cause

COMPARED, NOTHING FOUND

10 pairs had enough overlapping days to compare. 3 showed a relationship; the rest did not.

Anxiety and Energy	88 days · no relationship
Anxiety and Sensory overwhelm	88 days · no relationship
Concentration and Mood	88 days · no relationship
Concentration and Sensory overwhelm	88 days · no relationship

3 further pairs with no relationship not listed.

A null result is not proof of no connection - only that none was visible in this period, at this amount of data.

MIND CHECK-IN COMPLETION - 209 OF 269 (78%)

WEEK	SCHEDULED	COMPLETED	%	ONE-TAP	
3 Aug - 9 Aug	17	13	**76%**		
10 Aug - 16 Aug	21	17	**81%**		
17 Aug - 23 Aug	21	20	**95%**		
24 Aug - 30 Aug	21	17	**81%**		
31 Aug - 6 Sept	21	18	**86%**		
7 Sept - 13 Sept	21	17	**81%**		
14 Sept - 20 Sept	21	13	**62%**	3	
21 Sept - 27 Sept	21	16	**76%**		
28 Sept - 4 Oct	21	11	**52%**		*v low coverage*
5 Oct - 11 Oct	21	15	**71%**		
12 Oct - 18 Oct	21	17	**81%**		
19 Oct - 25 Oct	21	16	**76%**		
26 Oct - 1 Nov	21	19	**90%**		

Week of 28 Sept - 4 Oct had unusually low completion (52%). Findings spanning this week should be interpreted with lower confidence.

ONE-TAP ENTRIES

3 of 209 completed check-ins (1%) were logged with comfort mode's one-tap answer, which records every domain at that person's own baseline rather than a considered rating. They count toward coverage and cap the confidence of any pattern detected across them. A flat stretch containing many of these should be read as "not rated in detail", not as "nothing happening".

WHEN THE MISSED CHECK-INS FALL

TIME OF DAY	SCHEDULED	MISSED	MISS RATE
Morning	89	38	43%
Midday	90	7	8%
Evening	90	15	17%

38 of the missed check-ins fall in the morning (43% of that block's slots, against a lower rate across the rest of the day). Consistently missing one part of the day may be a finding in itself rather than a gap in the data.

METHODOLOGY

All data in this report is self-reported by the patient via brief, in-the-moment check-ins (ecological momentary assessment) rather than retrospective recall: several times a day for mind domains, once daily for body and sleep. All pattern detection and computation runs entirely on the patient's device: no data is processed on a server, and no machine learning or population-level model is used anywhere in this pipeline.

Every deviation, baseline and pattern here is a comparison against that patient's own recent history, a personal baseline computed as the rolling median of their last 30 days of data, never against a population norm. Patterns are only surfaced once they clear a minimum data-coverage threshold; an under-logged pattern is withheld entirely rather than shown with lower confidence, so an absence of findings should not be read as an absence of symptoms. Domain correlations are reported only as a qualitative direction and confidence tier; the underlying correlation coefficient and significance value are deliberately withheld, so a threshold-gated pattern in one person's self-reported history isn't read with more authority than it warrants.

This report is a structured symptom diary, not a diagnostic tool or a clinical measurement, and correlation shown here never implies causation. Findings are limited to the stated reporting window (2026-08-04 to 2026-11-01). For the full methodology, including exact statistical thresholds, data-quality gating rules and the evidence base behind these design decisions, visit symetric.app/for-clinicians.