

12-month bowel summary

Jun 2025 – May 2026 · prepared for discussion with a clinician

SPECIMEN · ILLUSTRATIVE SYNTHETIC DATA

2 May 2026 · visible blood reported once — book a visit. This is the reason this summary was prepared.

rule: any visible blood
no explaining medication on list

FLAGGED ENTRY

2 May 2026 · 09:14 · Bristol 5 · urgency no · leakage no · blood yes · pain 3/10 · 4 min · spontaneous

1 · SUMMARY MEASURES · whole period

5.6/wk FREQUENCY		4.9/wk SBM ¹		2.7/wk CSBM ¹		3–5 ² TYPICAL BRISTOL	
86% SPONTANEOUS	5 d LONGEST GAP	3.3 / 7 PAIN, MEAN/MAX ³	71% PAIN EASED BY BM ³	19% BLOATING, DAYS ³	11% STRAINING, ENTRIES ³	9% INCOMPL. EVAC. ⁴	4 FLAGS RAISED

2 · FIGURES · condensed by month

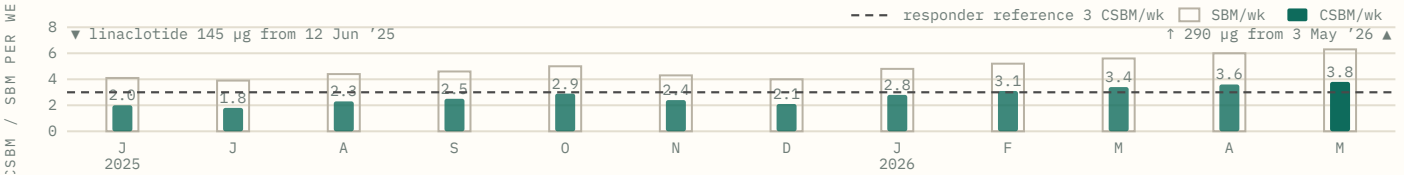


Fig. 1 · Complete spontaneous BMs/week by month (bars) vs the 3 CSBM/wk responder reference (dashed); outlines: SBM/week. CSBM first reaches the reference in Feb '26. Triangles: linaclotide start, dose increase.

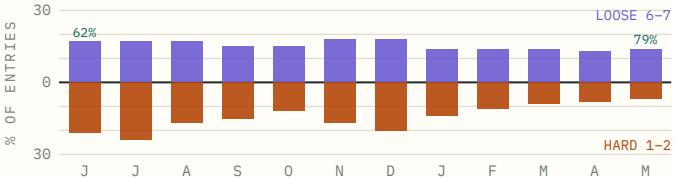


Fig. 2 · Bristol mix per month, diverging from centre – hard (1–2) down, loose (6–7) up; ideal (3–5) is the remainder (62% → 79%). Hard share falls 21% → 7%, loose flat: a constipation shift, not a diarrhoea one.

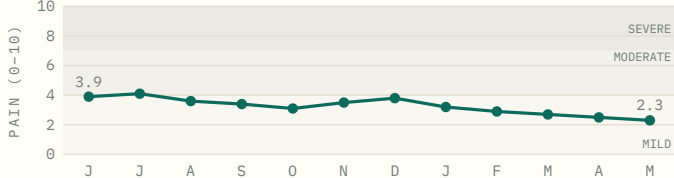


Fig. 3 · Abdominal pain, monthly mean (0–10), against mild / moderate / severe bands. Peaks at 4.1 (Jul '25), just inside moderate; otherwise mild, ending 2.3 (–1.6).

3 · MONTHLY MEASURES

MONTH	ENTRIES	FREQ/WK	SBM/WK ¹	CSBM/WK ¹	TYPICAL BRISTOL ²	PAIN, MEAN (0–10)	LONGEST GAP (D)	NOTES
Jun '25	21	4.9	4.1	2.0	2–4	3.9	3	
Jul '25	20	4.6	3.9	1.8	2–4	4.1	5	longest gap of period
Aug '25	23	5.2	4.4	2.3	3–4	3.6	3	blood x1, resolved
Sep '25	23	5.4	4.6	2.5	3–4	3.4	3	
Oct '25	26	5.8	5.0	2.9	3–5	3.1	3	
Nov '25	22	5.1	4.3	2.4	2–4	3.5	4	
Dec '25	21	4.8	4.0	2.1	2–4	3.8	4	
Jan '26	24	5.5	4.8	2.8	3–4	3.2	3	
Feb '26	24	5.9	5.2	3.1	3–5	2.9	3	
Mar '26	28	6.3	5.6	3.4	3–5	2.7	2	
Apr '26	28	6.6	6.0	3.6	3–5	2.5	2	black stool, resolved (iron)
May '26 ⁵	29	6.8	6.3	3.8	3–5	2.3	2	linaclotide ↑ 290 µg · blood x1
Period	289	5.6	4.9	2.7	3–5	3.3	5	

4 · EVENTS & FLAGS

- 2 May 2026 · visible blood x1 · open — book a visit
also shown above · rule: any visible blood · no explaining medication
- 10 May 2026 · Bristol 2, pain 5, 9 min · hardest entry of period
laxative-aided · straining logged · isolated, no recurrence after
- 21 Apr 2026 · black stool · resolved
attributed to iron supplementation, started 19 Apr 2026
- 22 Aug 2025 · visible blood x1 · resolved
fissure after Bristol 1–2 cluster · no recurrence since
- Alarm screen · no weight loss, no nocturnal BMs, no fever logged this period
family history not captured by the app

5 · MEDICATION CHANGES, SELF-REPORTED

- Linaclotide 145 µg OD
started 12 Jun 2025
- Linaclotide 290 µg OD
increased from 145 µg on 3 May 2026
- Iron 65 mg OD
started 19 Apr 2026 · for iron-deficiency anaemia
- Psyllium 5 g nocte
ongoing since before period

6 · Methods. ¹ SBM: BM without laxative use in preceding 24 h; CSBM: SBM with complete evacuation (per-entry field). ² Typical Bristol: central 50% of entries (IQR) — per month in table, whole period in summary; identical in every Cadence report. ³ Mean / max; straining: share of entries; bloating: share of days; "pain eased by BM": pain ≥ 3 rated lower within 1 h after. ⁴ Incomplete-evac. tile: bothersome checkbox — narrower than the completeness field in ¹ (gap SBM – CSBM ≈ 115). ⁵ May '26: trailing 30-day window to 14 May (matches the 30-day report); otherwise Freq/wk = entries ÷ days × 7. Period: mean of monthly means (5.6/wk); pooled 289 ÷ 365 × 7 = 5.5/wk. Self-reported data; not a diagnosis.

Cadence · 12-month summary
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