We IBD is not a medical device and does not replace medical advice. This report is a factual summary of your entries and of the Health app data you allowed, intended to prepare for your appointment.

We IBD consultation report

Patient: Patient not specified

Report issued on 16/10/2026 23:27

Period: 20/04/2026 → 16/10/2026

Span: 180 days · 180 documented days (at least one entry)

Tracking profile: Crohn's disease

App version: 2.1.1

— Recorded facts —

— Period summary —

Stools logged: 430

Meals logged: 540

Meal times — Breakfast: 180 · Lunch: 180 · Dinner: 180

States/symptoms logged: 180

— Health indicator — last 180 days —

Overall level: Good (87%)

The overall level places the app's indicator; it is not a medical assessment of disease activity.

Intestinal: 95% · Fatigue: 72% · Stress: 67%

Clinical index: Harvey-Bradshaw (HBI) (raw value 2.61)

Marker adapted from the Harvey-Bradshaw index, from the patient's own entries: it is not the published instrument. Abdominal mass scored 0 (it requires a clinical examination); general well-being and abdominal pain both derived from logged pain; complications replaced by urgency, night-time stools, incontinence and blood; liquid stools = Bristol types 6 and 7. Method: we-ibd.com/methodology

Average of the 180 days in the period with at least one stool: this is not a daily clinical score.

Days with at least one stool, by daily index value x: $x < 5$: 143 · $5 \le x < 8$: 5 · $8 \le x < 17$: 32 · $x \ge 17$: 0

Highest week: week of 21/09/2026, average 11 (days with at least one stool: 7)

Calculated from your own entries only (without Health app data).

— Stools —

Total: 430 · Average: 2.39 per documented day (180) · Max in one day: 4

Bristol distribution — Type 4: 254 · Type 5: 33 · Type 6: 15 · Type 7: 128

Blood: 146 stool(s) — Traces: 30 · Moderate: 116

Urgency: 134 · Nocturnal: 28 · Incontinence: 0

Average pain: 2.38 / 10 (430 stools with pain recorded)

— Declared flares —

Flares over the period: 1

Days in flare: 28 · Days without a declared flare: 152

— One-off doses recorded in the 48 h before the start of a flare —

Ibuprofen

“As needed” or one-off doses recorded in the 48 h before the start of a declared flare; regular background treatments are excluded. A coincidence in time: this is not a cause.

— State & symptoms —

Average fatigue: 2.8 / 10 · Average stress: 3.27 / 10

Average sleep: 7.48 h

Current weight: 69.64 kg (change -0.46 kg over the period)

Days with medication taken: 180

Recorded hydration: average of 1.5 l per day · days with water recorded: 15

Extra-intestinal manifestations: Joints

— Pain location (colon) —

Descending colon: 1 mark(s), average intensity 5 / 10 (max 5)

Sigmoid colon: 6 mark(s), average intensity 5.5 / 10 (max 8)

— Pain evolution (recurring areas) —

Descending colon: 1 time(s) over the period, average intensity 5 / 10

Sigmoid colon: 6 time(s) over the period, average intensity 5.5 / 10

Breakdown by week:

Week of 31/08/2026: 2 mark(s)

Week of 07/09/2026: 1 mark(s)

Week of 14/09/2026: 1 mark(s)

Week of 21/09/2026: 1 mark(s)

Week of 05/10/2026: 1 mark(s)

Week of 12/10/2026: 1 mark(s)

— Treatments —

Azathioprine · 50 mg — Once a day

One-off doses recorded during the period: 52

— Lab results —
CRP (inflammation): 5 mg/L — 4 measurement(s), rising (+2 mg/L)
Fecal calprotectin: 110 µg/g — 4 measurement(s), rising (+50 µg/g)
Hemoglobin: 13.4 g/dL — 1 measurement(s)
Ferritin: 42 µg/L — 1 measurement(s)

— Comparison with the previous period (22/10/2025 → 20/04/2026) —
Documented days: 180 (previous period: 180)
Stools per documented day: 2.39 (previous period: 2.42)
Stools with blood: 146 (previous period: 157)
Types 3 and 4: 254 of 430 (previous period: 272 of 435)
Urgency: 134 (previous period: 145) · Nocturnal: 28 (previous period: 13)
Average pain: 2.38 / 10 (previous period: 2.27)
Average fatigue: 2.8 / 10 (previous period: 2.74)
Average stress: 3.27 / 10 (previous period: 3.28)

— Questions for the doctor —
• Should my calprotectin be repeated before the next consultation?
• Are my morning joint pains related?

— Appendix — dietary observation leads noted by the app (to discuss, not conclusive) —
These leads are statistical observations computed from your entries alone. They are neither diagnoses nor conclusions: discuss them with your doctor.

— Latency of food-related issues —
Cream: followed by an issue within 6 hours — 32 of 32 meals
Whole milk: followed by an issue within 6 hours — 32 of 32 meals
Pumpkin: followed by an issue within 6 hours — 17 of 76 meals
Toast: followed by an issue 6 to 24 hours later — 9 of 39 meals
Zucchini soup: followed by an issue 6 to 24 hours later — 9 of 39 meals
Chicken breast: followed by an issue 6 to 24 hours later — 9 of 39 meals
Cooked ham: followed by an issue 6 to 24 hours later — 9 of 38 meals
Mashed potato: followed by an issue 24 to 48 hours later — 9 of 39 meals
Melon: followed by an issue 6 to 24 hours later — 9 of 38 meals
Pasta: followed by an issue 24 to 48 hours later — 9 of 39 meals
Polenta: followed by an issue within 6 hours — 9 of 38 meals
Salmon: followed by an issue 24 to 48 hours later — 9 of 39 meals
White rice: followed by an issue 6 to 24 hours later — 9 of 39 meals
Zucchini: followed by an issue 24 to 48 hours later — 9 of 39 meals

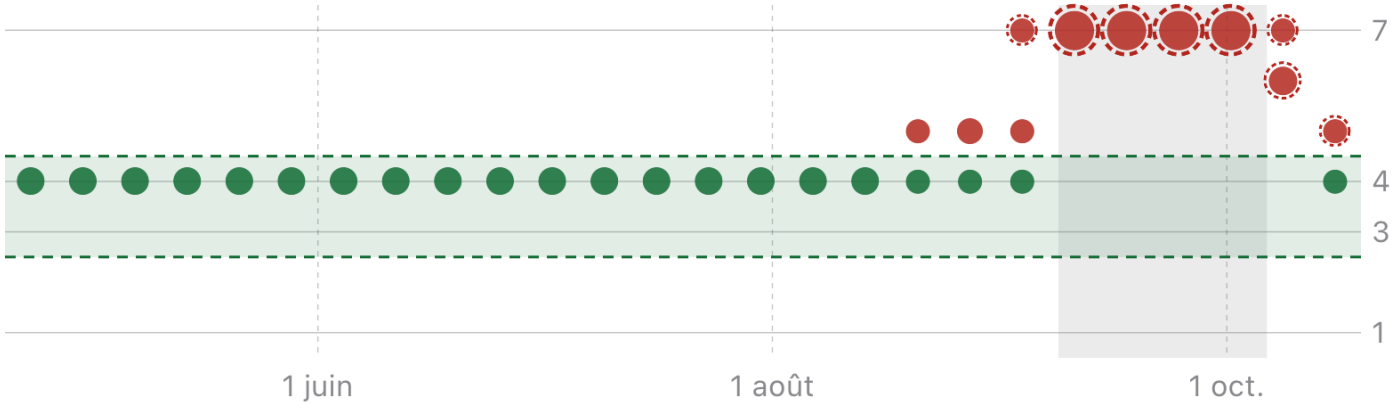
Cod: followed by an issue within 6 hours — 8 of 38 meals
Green beans: followed by an issue within 6 hours — 8 of 38 meals
Potato: followed by an issue within 6 hours — 8 of 38 meals
Rice: followed by an issue within 6 hours — 8 of 39 meals
Roast chicken: followed by an issue within 6 hours — 8 of 39 meals
Spinach: followed by an issue within 6 hours — 8 of 38 meals
Trout: followed by an issue within 6 hours — 8 of 38 meals
Banana: followed by an issue 6 to 24 hours later — 8 of 39 meals
Carrot: followed by an issue 6 to 24 hours later — 8 of 39 meals
Fruit puree: followed by an issue 6 to 24 hours later — 8 of 39 meals
Oat flakes: followed by an issue 6 to 24 hours later — 8 of 39 meals
Omelette: followed by an issue 6 to 24 hours later — 8 of 39 meals
Plain yogurt: followed by an issue 6 to 24 hours later — 8 of 39 meals
Semolina: followed by an issue 6 to 24 hours later — 8 of 38 meals
Turkey: followed by an issue 6 to 24 hours later — 8 of 38 meals
A coincidence is not a cause: these delays describe your records, not a mechanism.

— Trend charts —

Grey areas: reported flare periods.

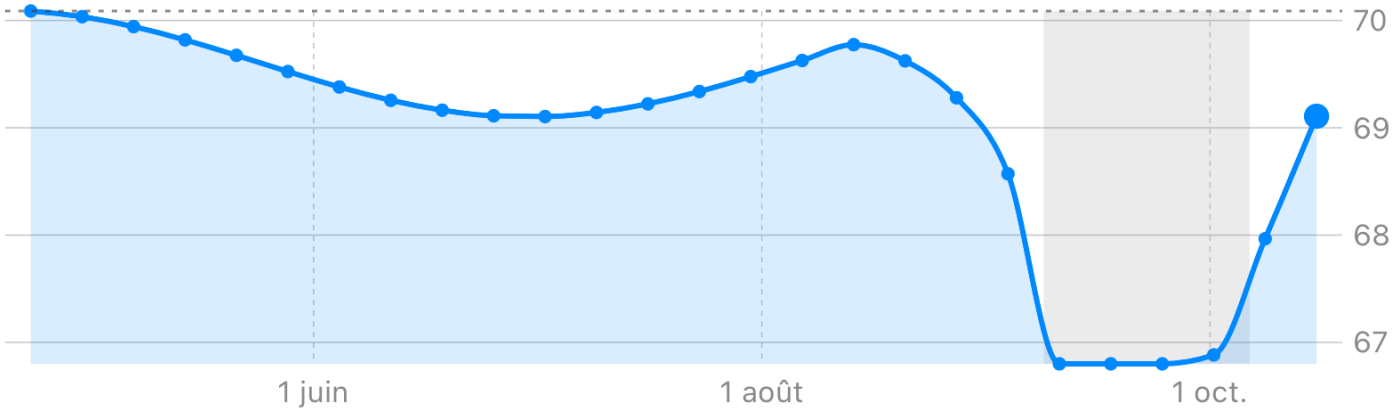
Stools and consistency (Bristol)

One bubble per period and per Bristol type: the bigger it is, the more stools. Types 3 and 4: normal consistency. Dotted ring: blood present.



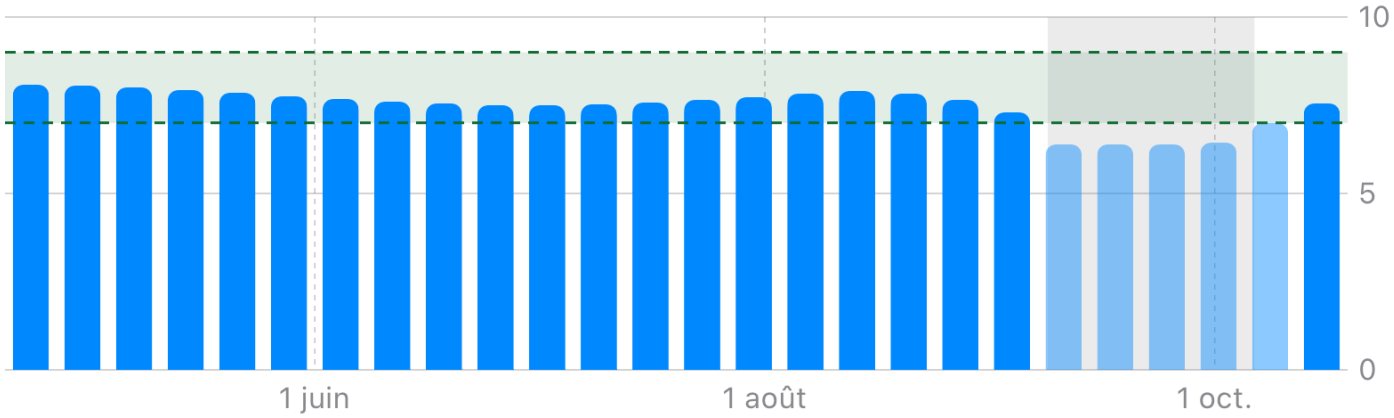
Weight (kg)

Weekly average.



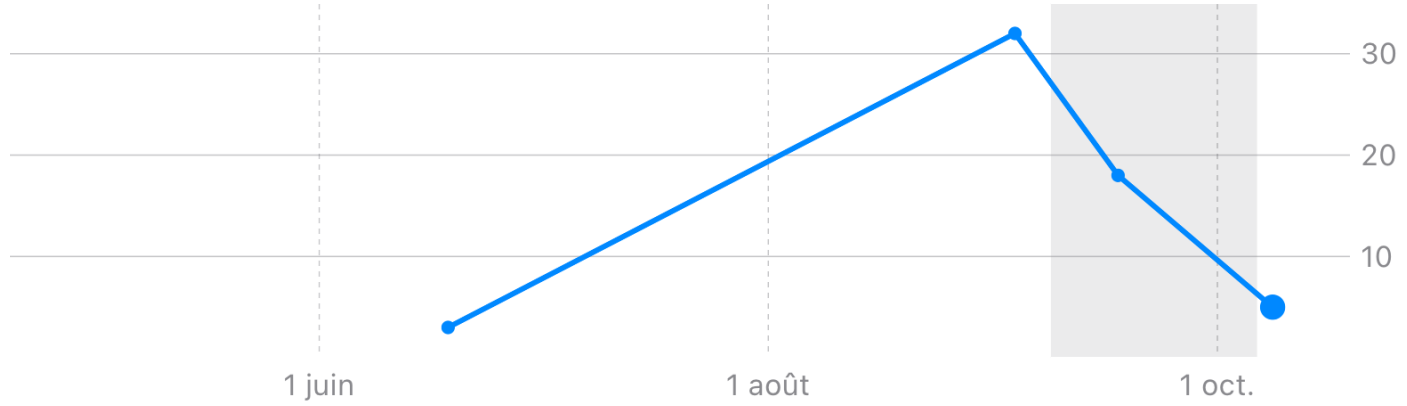
Sleep (hours)

Weekly average. Band: adult reference of 7 to 9 h.



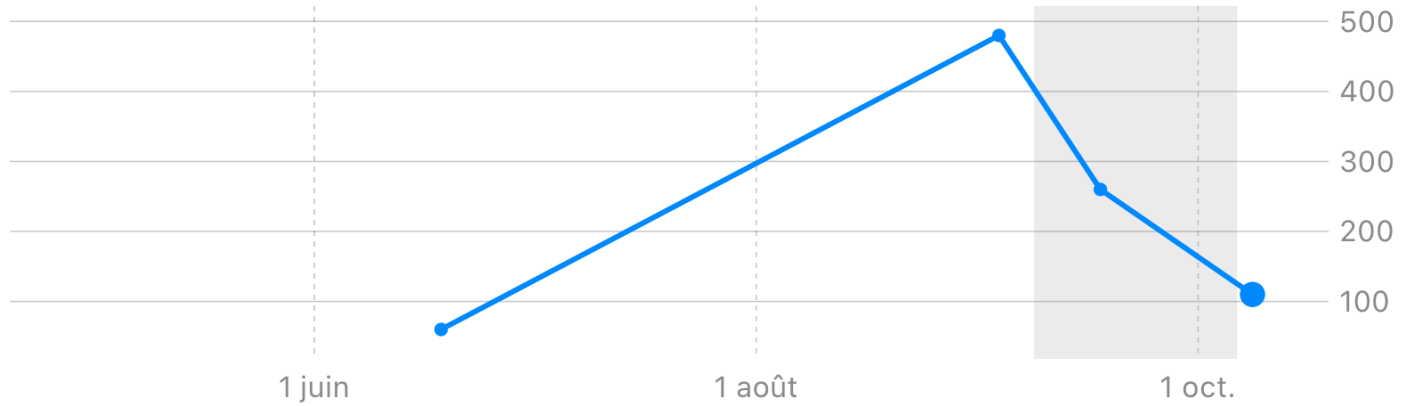
CRP (inflammation) (mg/L)

Each point is a measurement; the line joins them without indicating any value between two measurements.



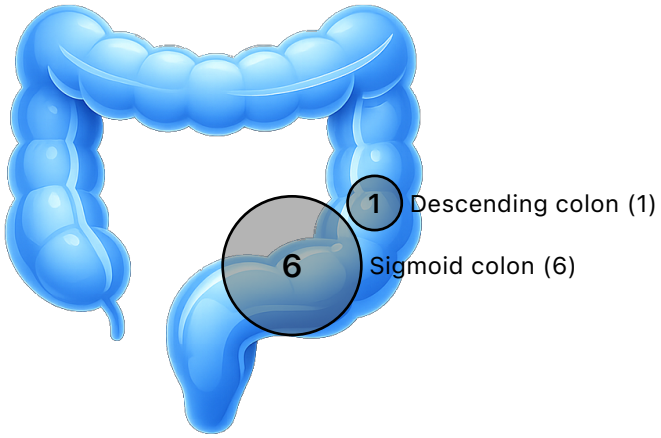
Fecal calprotectin (µg/g)

Each point is a measurement; the line joins them without indicating any value between two measurements.



Pain map — recurring areas

Dot size = number of times the area was noted.

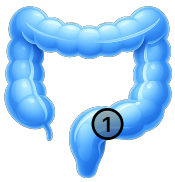


Week-by-week evolution

Wk 31/08/2026



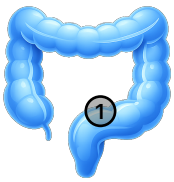
Wk 07/09/2026



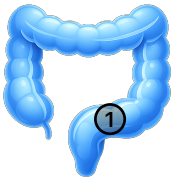
Wk 14/09/2026



Wk 21/09/2026



Wk 05/10/2026



Wk 12/10/2026

