

The Patient as a Dynamic Network, Not a Laboratory Report

Absurd Health Institute · Hypothesis and mechanistic perspective

Central hypothesis

Human health unfolds as interacting trajectories rather than independent snapshots. The proposed approach analyzes sleep, symptoms, activity, pulse and selected laboratory measures as a time-dependent network while recognizing that more data do not automatically provide causality.

The biological route

Within-person baselines may detect changes hidden by population reference ranges. Temporal ordering can reveal whether sleep disturbance usually precedes autonomic change or vice versa. Dynamic models might capture lagged relationships and recovery speeds, but wearable sensors measure proxies and are affected by adherence, movement, drugs and device algorithms.

An illustrative scenario

Daily wearable trends may show that poorer sleep usually precedes a higher resting heart rate. This does not prove sleep loss causes every heart-rate change: illness, alcohol, stress and medication can influence both variables. A useful algorithm would compare different causal possibilities and report its uncertainty rather than announce it has found the user's root cause.

Alternative explanations and limits

Correlation across daily variables is extremely vulnerable to common causes and reverse causation. Multiple simultaneous signals create false discoveries when analyses are not prespecified. Privacy risks and clinician workload may outweigh gains if dashboards produce many unactionable alerts.

What would change the conclusion?

Validation should show reproducible predictions, sensible uncertainty, low false-alarm rates and additional clinical utility over ordinary history-taking. A measured association should not be marketed as an identified personal root cause.

The distinctive prediction

Within-person data should reduce uncertainty without inventing causality. A model that cannot distinguish common causes from temporal ordering should say so rather than declaring that one variable caused another.

Clinical interpretation

The broader promise is a more attentive record of change—not automatic diagnosis or medical surveillance that displaces professional interpretation.

Selected scientific reading

Contextual background, not direct validation of the proposed hypothesis.

Pyrkov TV et al. Longitudinal analysis of blood markers reveals progressive loss of resilience and predicts human lifespan limit. Nat Commun. 2021.

<https://www.nature.com/articles/s41467-021-23014-1>

Seth AK, Critchley HD. Extending predictive processing to the body: emotion as interoceptive inference. Behav Brain Sci. 2013.

<https://www.cambridge.org/core/journals/behavioral-and-brain-sciences/article/abs/extending-predictive-processing-to-the-body-emotion-as-interoceptive-inference/A53E081B5EEBD7CF7658F3D484714AFE>

Editorial note: Original theoretical perspective, not an original clinical study, validated diagnosis, or treatment protocol.