WOMO HEALTH

WOMO HEALTH GUIDE

Autoimmune

Making sense of symptoms across *your body.*

**Understand the patterns.
Prepare for the conversation.**

What to notice · What to ask · What to track

Your body has a story. WOMO reads it.

01 / BEFORE YOU BEGIN

Bring your whole story

Joint pain one month. A rash the next. Exhaustion that does not lift. When symptoms move around your body, it is hard to show the full pattern in one short appointment.

WHAT THIS GUIDE HELPS YOU DO

Notice changes across your body, keep a simple record, and prepare questions for a provider who can examine you.

WHAT AUTOIMMUNE MEANS

In autoimmune disease, the immune system mistakenly targets healthy tissues. The symptoms depend on which parts of the body are affected.

START HERE

Write when each symptom began, how it comes and goes, what you can photograph, and any autoimmune conditions in your family.

This guide is for education and preparation. It cannot tell you whether your symptoms are autoimmune or replace care from a licensed provider.

02 / WHAT TO NOTICE

The clues may cross body systems

A symptom alone does not point to one diagnosis. Record what happens together and what changes over time.

- [ ] Fatigue that rest does not fix
- [ ] Numbness or tingling
- [ ] Joint pain, swelling, or morning stiffness
- [ ] Stomach or bowel changes
- [ ] Rashes or new skin changes
- [ ] Muscle pain or weakness
- [ ] Dry eyes or mouth
- [ ] Changes in thyroid symptoms
- [ ] Hair loss or mouth sores
- [ ] Swelling of legs or around eyes
- [ ] Low fevers that come and go
- [ ] Symptoms that flare and settle

EXAMPLES, NOT A DIAGNOSIS

Conditions include lupus, rheumatoid arthritis, Sjögren’s disease, autoimmune thyroid disease, multiple sclerosis, and celiac disease.

03 / WHAT TO ASK

How a provider connects the dots

Autoimmune symptoms can overlap with many other conditions. A provider may use your history, exam, targeted tests, and sometimes a specialist referral to understand what is happening.

BRING THE HISTORY

Include symptoms that are not present on the day of the visit, dates, photos of rashes or swelling, medicines, and family history.

ASK ABOUT TARGETED TESTS

Depending on the symptoms, your provider may consider blood counts, inflammation markers, organ tests, urine tests, or specific antibodies.

ASK ABOUT A SPECIALIST

A rheumatologist, dermatologist, endocrinologist, neurologist, or another specialist may be appropriate based on what is affected.

KNOW WHAT ONE RESULT CAN AND CANNOT SAY

A positive antibody result alone does not prove an autoimmune disease. A negative result may not answer every question. Ask how the result fits your symptoms and exam.

04 / PRINT THIS PAGE

Your whole-body tracker

Track for a few weeks. Mark what happened, how long it lasted, and whether a photo or date helps show it.

WEEK	FATIGUE	JOINTS / MUSCLES	SKIN / EYES	OTHER
01				
02				
03				
04				

Also note: photos, family history, and possible triggers

05 / CARE CONVERSATIONS

Care depends on the condition

There is no single autoimmune treatment plan. What helps depends on the diagnosis, the organs involved, and your health history. Ask what the plan is for follow-up if the answer is still unclear.

WHAT CARE MAY INCLUDE

Medicines for inflammation or immune activity, treatment for an affected gland or organ, and regular monitoring when needed.

WHAT SUPPORT MAY INCLUDE

A plan for fatigue, sleep, movement, and pain that fits your capacity. If pregnancy is possible or planned, ask whether medicines need review.

WHAT TO KEEP DOCUMENTING

Photos from the worst days, dates of flares, symptoms in different body systems, and changes after treatment.

A FEW USEFUL TERMS

Autoimmune: immune activity against the body’s own tissues. Flare: a period when symptoms become more active. Antibody: an immune protein; a test result needs context. Referral: a visit with a specialist for a specific question.

06 / WHAT TO SAY

Questions for your visit

COULD THESE SYMPTOMS CONNECT?

“I have had [symptoms] in different parts of my body over [time]. Could they be connected, and what else should we consider?”

WHICH TESTS FIT MY HISTORY?

“What would each test help answer? How would we interpret a positive or negative result?”

IS A REFERRAL APPROPRIATE?

“Would a specialist help with these symptoms? If not now, what would change that decision?”

WHAT IS THE FOLLOW-UP PLAN?

“If the tests are unclear, when should I return, and what should I track in the meantime?”

IF YOU FEEL DISMISSED

“This is affecting my daily life. Can we document my concerns and agree on a next step?”

07 / BRING THIS PAGE

Your provider summary

SYMPTOMS AND WHERE THEY HAPPEN

WHEN THEY STARTED AND HOW THEY COME AND GO

FAMILY HISTORY, PHOTOS, MEDICINES, AND TESTS

WHAT I AM ASKING FOR TODAY

GET URGENT HELP FOR

Chest pain or trouble breathing; sudden weakness, numbness, or vision loss; a high fever with confusion; coughing up blood; or severe swelling with very little urine. Call 911 for a medical emergency.

Educational only. Sources: NIAMS, Autoimmune Diseases and Lupus; MedlinePlus, Autoimmune Diseases and Autoantibody Testing.

KEEP GOING WITH WOMO

Your body is asking for a closer look.

Bring the whole story, not just today’s symptom. Log changes across your body with Mae and bring your notes to the conversation.

WOMO

Track your health with Mae

SCAN TO DOWNLOAD WOMO

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TECHMAE

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Your body has a story. WOMO reads it.

Educational only. This guide does not diagnose or replace medical care. Talk with your provider about your symptoms. Call 911 for a medical emergency.