



The roster already wrote the first chapter.

Six markers. One map. The eighth pillar the form leaves off.

You can feel a heavy month. These pages show where it landed — blood pressure, lipids, cortisol, DHEA-S, inflammation, uric acid — and which pillich pillars still belong to you between handovers.

Turn the page. Start with the vessel load most wards never connect to last night's sleep.

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BEFORE THE MARKERS

This is not a lecture on resilience.

If you already know the week was heavy, you do not need another poster. You need the names of the leaks.

Six biomarkers sit on three pillars you can still touch on a 12-hour pattern: Movement, Rest, Nutrition. A fourth pillar — Sexual Vitality — is what is left for the person you go home to. The form at work will not ask. The map does.

Nothing here is a diagnosis. Nothing here asks you to do more. Each page is one marker, the pillar it sits on, and why it shows up after a run of nights.

WHAT COMES NEXT

01 Blood pressure

02 Cholesterol / HDL

03 Cortisol

04 DHEA-S

05 hs-CRP

06 Uric acid

— Sexual Vitality

Page 3 is blood pressure. Read it as last night, not as a journal article.



BIOMARKER 01

Blood pressure

PILLARS

Movement + Rest

WHAT THE EVIDENCE SAYS

Lifestyle change moves blood pressure. A 2024 review of 19 randomised trials found digital-health-supported activity lowered systolic pressure by an average of 4.43 mmHg and doubled the odds of better control. A 2023 meta-analysis found moderate-to-vigorous strength work produced clinically meaningful drops in both systolic and diastolic readings.

WHY IT MATTERS ON SHIFT

On shift, the leak is sitting still between doors and sleeping in fragments. Movement and Rest are not lifestyle extras. They are how vascular load comes down when the roster will not.

Read it as last night, not as a journal article.

BIOMARKER 02



Cholesterol / HDL ratio

PILLARS Nutrition + Movement

WHAT THE EVIDENCE SAYS

Aerobic work improves the quantity and quality of HDL and its role in reverse cholesterol transport. Combined with a steadier dietary pattern, the lipid profile tends to follow.

WHY IT MATTERS ON SHIFT

The ward is long sitting and late food. Nutrition and Movement are the two levers that usually still belong to you between handovers.

BIOMARKER 03

Cortisol



PILLARS Movement + Rest

WHAT THE EVIDENCE SAYS

Physical activity is associated with lower cortisol and better sleep. Combined sleep and exercise interventions reduce allostatic load, including cortisol-related pathways, with effects on cardiometabolic and neurobiological health.

WHY IT MATTERS ON SHIFT

Irregular shifts keep the HPA axis switched on. Movement and Rest are how you turn the volume down without a motivational speech.

Quiet authority.

BIOMARKER 04

DHEA-S



PILLARS Movement + Rest

WHAT THE EVIDENCE SAYS

DHEA-S is sensitive to prolonged stress. Sleep quality and regular activity help hold a healthier adrenal balance.

WHY IT MATTERS ON SHIFT

When the week has no bottom, this is one of the quieter markers. Rest and Movement are the practical inputs — not another resilience workshop.

BIOMARKER 05

hs-CRP • inflammation



PILLARS Nutrition + Movement + Rest

WHAT THE EVIDENCE SAYS

Targeted nutrition and training, with better sleep, have been shown to lower hs-CRP, especially when baseline inflammation is already high.

WHY IT MATTERS ON SHIFT

Fog after a run of nights is not a character flaw. Poor sleep, stress, and sitting drive low-grade inflammation. Three pillars, not one hack.

Three pillars, not one hack.



BIOMARKER 06

Uric acid

PILLARS Nutrition + Movement

WHAT THE EVIDENCE SAYS

Plant-forward patterns, whole grains, and limits on added sugars and alcohol are consistently associated with lower serum uric acid.

WHY IT MATTERS ON SHIFT

This is metabolic load you can see. Food that is not eaten standing up, and a body that moves after the roster, are the two available moves.

Nutrition + Movement



THE EIGHTH PILLAR

Sexual Vitality

What is left for the person you go home to.

This pillar is not a luxury add-on and it is not a prescription.

Intimacy — when it is wanted, safe, and possible after the roster — is associated with oxytocin, dopamine and endorphin signalling, and with lower cortisol.

Reviews link positive sexual health with lower rates of depression

Reviews link positive sexual health with lower rates of depression and anxiety, stronger bonds, and higher life satisfaction. That is correlation, not a protocol.

Frequency is not a target in this briefing.

On a 12-hour pattern the first thing to go is often the life that is not the ward. Naming the pillar keeps it on the map.



HOW THE PILLAR TOUCHES THE MARKERS

Sexual Vitality sits across the map.

Healthy intimacy can down-regulate the HPA axis — supporting lower cortisol and helping protect DHEA-S, which is why it sits beside Rest and Movement rather than off to the side. Lower distress is also one of the paths that keeps hs-CRP and blood-pressure reactivity from running the week. Steadier mood makes Nutrition and Movement easier to keep, which is how lipids and uric acid get pulled in.

EVIDENCE NOTE

Sexual Vitality → DHEA-S or hs-CRP is a plausible pathway, not a direct RCT finding.

SEXUAL VITALITY

A named pillar. Connection, not a slogan. It is allowed to be quiet after a hard run of nights.

THOUGHTS

Less rumination after the case you cannot leave in the car park.

WILLPOWER

Not grit as a personality. Capacity that is left when cortisol is not running the whole shift.

CLOSE



The markers are not the map.

These are pathways, not a care plan. Small, repeatable moves in the pillars are how the week stops being a single unmarked drain. MarisGraph is the assessment inside MarisMetrics. Use it if you want to see which pillar took the last shift.

But it does not have to stay this way. Track the eight pillars. Notice the pattern while there is still something to protect.

START THE FREE ASSESSMENT

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SOURCES

Where each line is held.

CLAIM	HELD BY
Blood pressure	Boima 2024; Edwards 2023
Lipids / HDL	Wood 2023; Liang 2025
Cortisol	De Nys 2022; Moyers 2023
DHEA-S	De Nys 2023
hs-CRP	Zargarzadeh 2025; Pourreza 2024
Uric acid	He 2023
Sexual Vitality	Vasconcelos 2024; Gianotten 2024
Shift work	Gamboa Madeira 2021; Rosa 2019

Boima et al. (2024). eClinicalMedicine, 69, 102432.
De Nys et al. (2022). Psychoneuroendocrinology, 143, 105843.
De Nys et al. (2023). JAPA, 31(2), 330-351.
Edwards et al. (2023). Br J Sports Med, 57(20), 1317-1326.
He et al. (2023). Food and Function, 14, 7853-7868.
Liang et al. (2025). Medicine, 104(6), e41493.
Vasconcelos et al. (2024). Bull World Health Organ, 102(12), 873-887D.
Wood et al. (2023). Sports Medicine, 53(4), 871-886.

Sexual Vitality to DHEA-S or hs-CRP is a plausible pathway, not a direct RCT finding.

EVIDENCE

Pathways, not a protocol.



Peer-reviewed sources under the six markers
and the eighth pillar. Not a care plan.

BLOOD PRESSURE

Boima et al., 2024. Minus 4.43 mmHg, 19 RCTs. Edwards et al., 2023.
Resistance and combined training.

LIPIDS / HDL

Wood et al., 2023. Liang et al., 2025. Aerobic work and lipid ratios.

CORTISOL

De Nys et al., 2022. Moyers and Hagger, 2023. Activity, sleep, HPA load.

DHEA-S

De Nys et al., 2023. Stress-sensitive adrenal balance.

HS-CRP

Zargarzadeh et al., 2025. Pourreza et al., 2024. Training, diet, inflammation.

URIC ACID

He et al., 2023. Plant-forward pattern. Less sugar and alcohol.

SEXUAL VITALITY

Vasconcelos et al., 2024. Gianotten et al., 2024. Association, not a protocol.

*Sexual Vitality to DHEA-S or hs-CRP is a plausible pathway,
not a direct RCT finding.*