



OCTOBER 8-11 2023

I LAS VEGAS USA

GLOBAL VILLAGE SPONSOR



GLOBAL VILLAGE EXHIBITORS



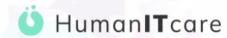




























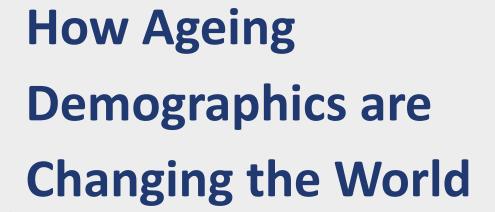








LAS VEGAS USA













The Global Health Connector

The Demographics of Aging Jon Warner



Demographic Drivers

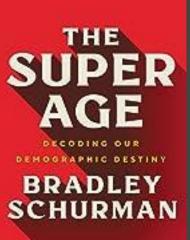
- In 1881 German Chancellor Bismarck introduced a pension after retirement age of 70 -the average life expectancy at the time in Germany was **50**
- In 1901 'western' world average life expectancy in Europe as was **52**
- In 1921 (affected hugely by WW1) 'western' world average life expectancy was **54**
- In 1945 (affected hugely by WW2) 'western' world average life expectancy was **64**
- In 1981 (The year the PC was created) 'western' world average life expectancy was **74** (this 20 year 'jump' in just 60 years mainly coming hugely from much better <u>sanitation</u>, much <u>lower infant mortality</u> and the widespread deployment of <u>antibiotics and immunization</u>).
- In 2023 world life expectancy is **73** (**79** in the 'western' world) but children born at 2,000 or later are expected to live to **100**.

In 2030, almost 1 in 6 people in the world will be 65 or older or 1.4 Billion People (Double from 2020 or in just 1 Decade!)

Whare are we in 2023

Lower birth rates Increased longevity









Growing parity amongst generations (U.S.)

BUT "STAGE" and NOT "AGE" PERHAPS A BETTER WAY TO THNK ABOUT THIS



Age 29 to 43. 1980-1979. 21.75%

Millennials





Age 59 to 77.

1946-1964.



Age 78 to 98.

1925-1945.



Age 99 to 122.

1901-1924.

.26%

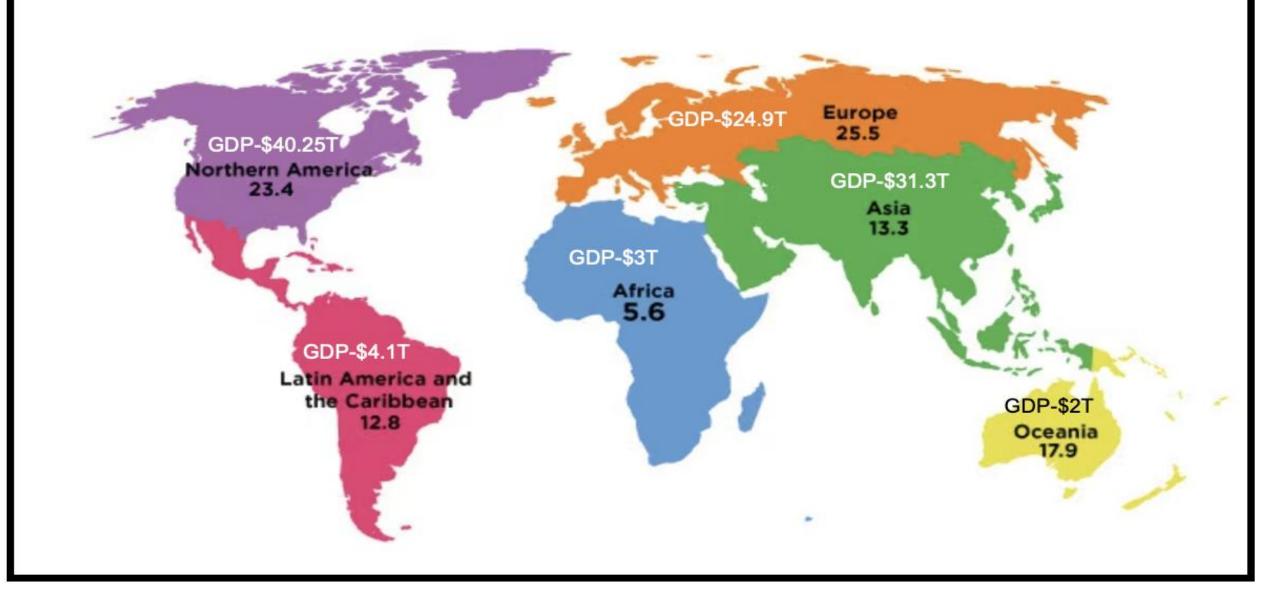
Generation X

Baby Boomers

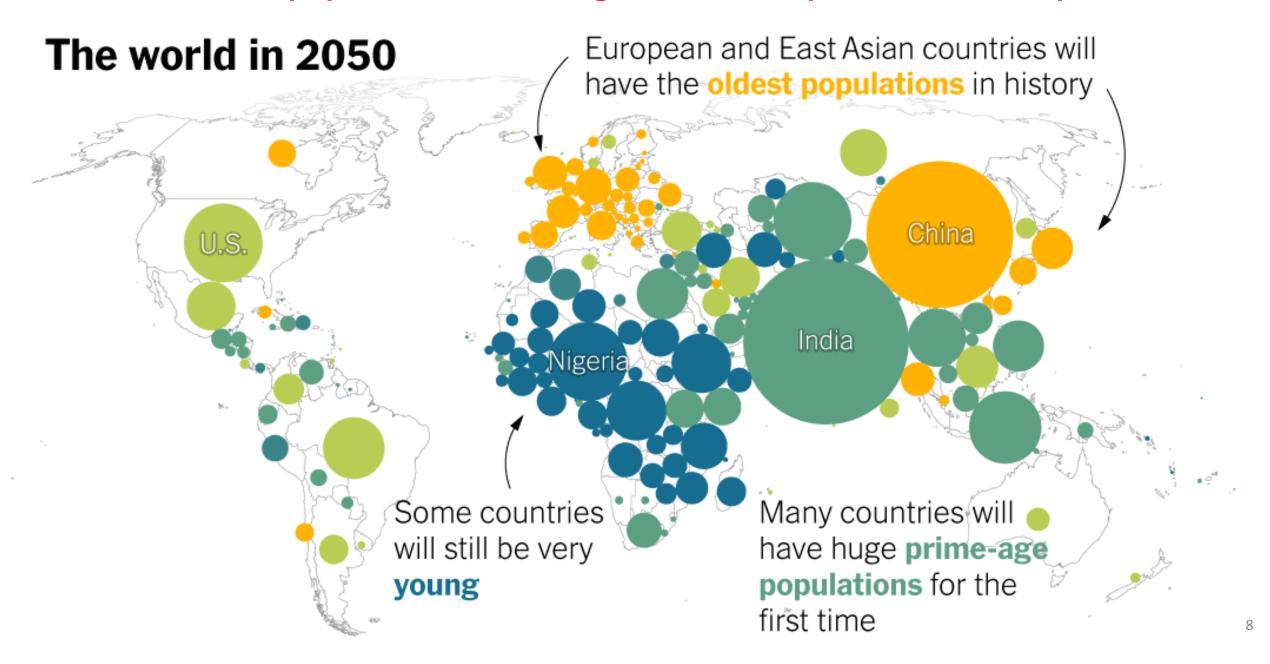
Silent Generation

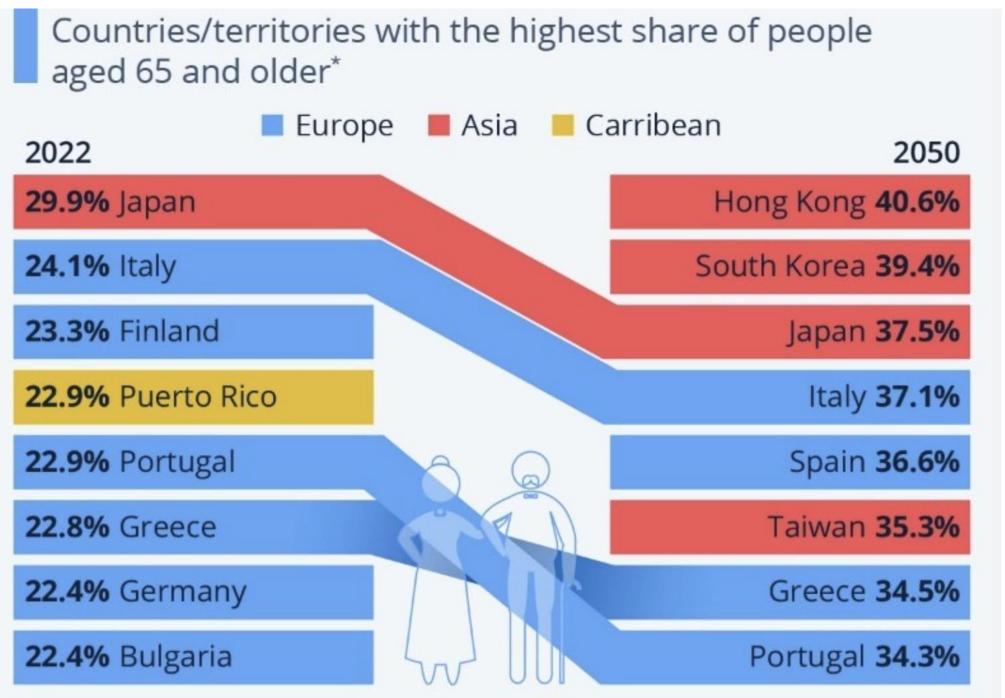
Greatest Generation

Percent of Population 60 and Older for World Regions: 2020 (+GDP numbers)



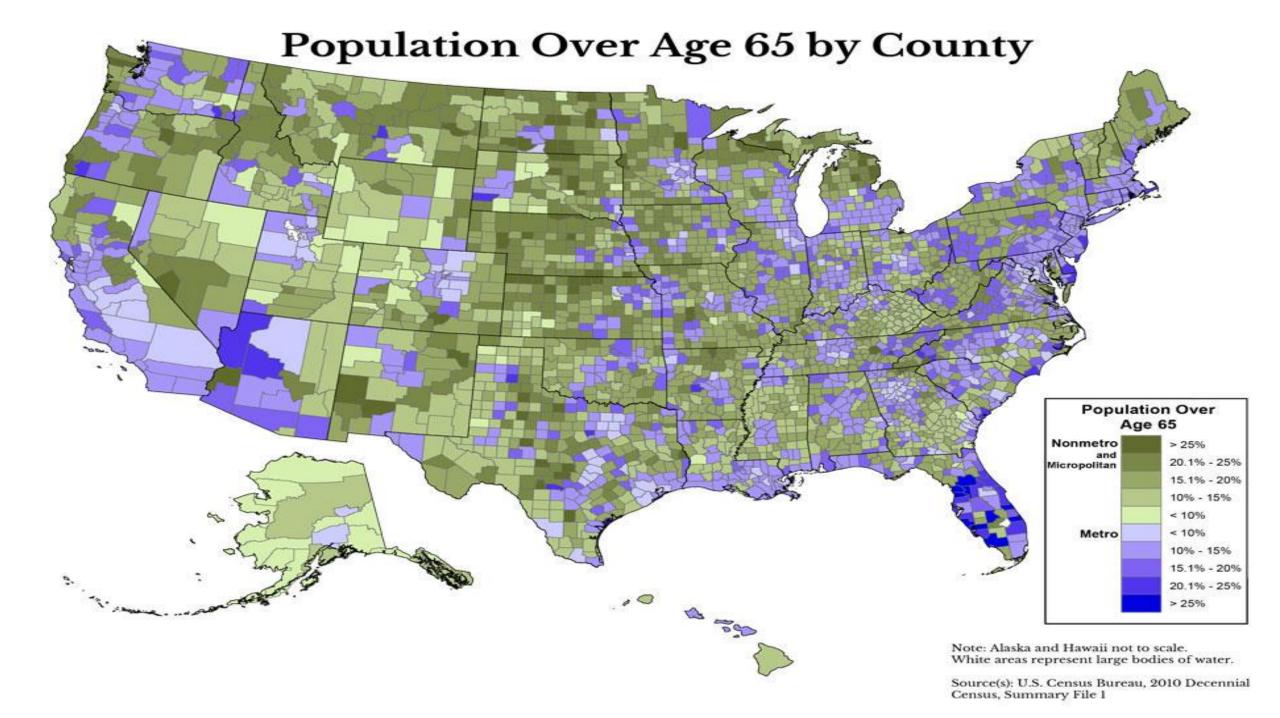
And the world's population will change dramatically on the next 25 years







As at 2022, the US has 16.3% of people at 65 or older. By 2050 it will be 22.3% (so look like Italy today)



What Do older adults want today/tomorrow (generally)? (and therefore what do we need to strategize, plan and innovate around?)

Personal security/safety

- House/Home safety and security
- Fall vulnerability
- Elder abuse/ageism
- Fraud/Extortion
- Cyberattack/ID theft
- Financial security/ saving
- Investment
- Insurance

Accessible assistance when needed

- Home maintenance
- Research/Insights
- Relocation
- Medications/Drugs
- Forms/Paperwork
- Tax/Social security
- Finance/Legal
- Pets (real and tech)

Ready Mobility and Transportation

- Walking
- Using personal Car
- Renting cars reading
- Ridesharing
- Bus/Train travel
- Over water/seas travel
- DME
- Assistive mobility devices

Appropriate Guidance on Innovation/technology

- Technology awareness
- Technology education
- Ratings of quality and effectiveness
- Discovering/using device functionality
- Teleconferencing
- Developing new solutions

Greater wellness

- Exercise/Fitness
- Sleep/Relaxation
- Diet and Nutrition
- Preventive medicine
- Food as medicine
- Genetics guidance
- Self-optimization
- Environmental health

Good mental health

- Mindfulness and Meditation
- Emotional stability
- Stress management
- Relaxation options
- Dealing with isolation and loneliness
- Brain health/dealing with dementia

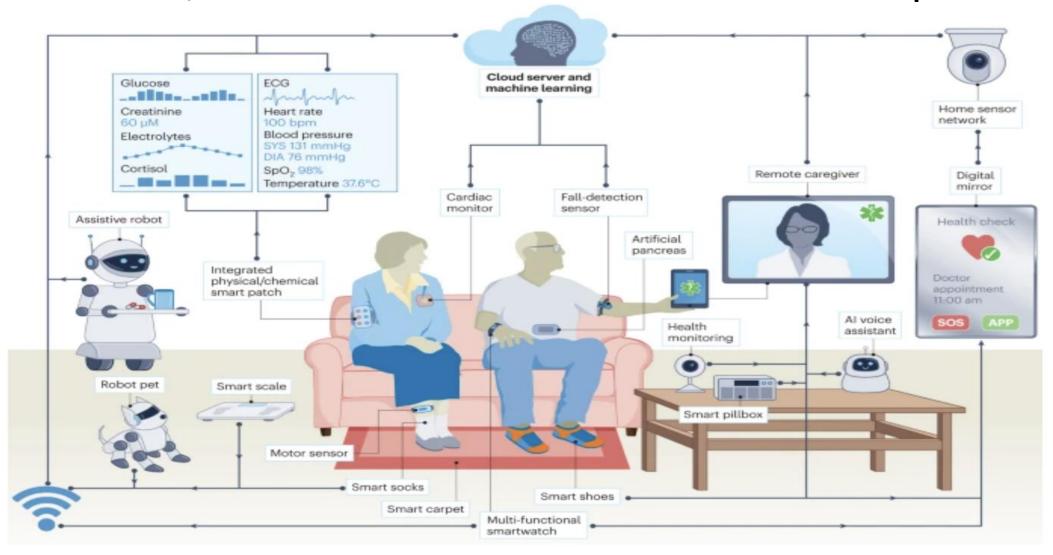
Effective and accessible healthcare

- Equity
- Ready access to HCPs
- Health insurance
- Care support
- Managing chronic conditions
- Dealing with disease/ infections

Self-actualization

- Pastimes/Hobbies/clubs
- New Relationships
- Friendship and Love
- Spirituality
- Entertainment
- Travel
- Work/Volunteering
- Learning

 Technology will assist us but we need to make it accessible, wanted and as frictionless to use as possible



• An aging population across most regions of the world, has many areas of impact, for older adults themselves, younger people and for communities and society, as the chart below lists:

Business and Entrepreneurship	Governance, Safety and Security	Population Health
Caregiving (and care-receiving))	Health, Healthcare and Drug Supply	Poverty and Hunger
Climate change	Housing/accommodation	Saving and Investment
Defense and War	Information systems and data	Scientific research
Discrimination, Equity and Access	Insurance (personal and public)	Social determinants of Health
Education/Training	Intergenerational relationships	Social security/pensions
End of life planning	Isolation and Ioneliness	Taxation/Tax planning
Energy/Sustainability	Land management	Technology and Innovation
Farming and Agriculture	Leisure and Entertainment	The Environment
Finance and Banking	Mental Health	Transportation
Food production	Migration	Travel/Tourism
General Government policy	Pay/Earnings	Work/Staffing (type and location)







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Expanding our impact:
How developments in digital
measures and novel data
sources influence how we
'get ahead' of disease















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Women in Health



















BUSINESS FINLAND

GLOBAL VILLAGE EXHIBITOR











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Why Finland is so strong in healthcare innovation

Charlie Schick, PhD

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Business Finland, Invest in Finland
charlie.schick@businessfinland.fi



Senior Advisor, Healthcare

Business Finland
titta.houni@businessfinland.fi

#1

HEALTH TECH IS
THE LARGEST AND ONE OF
THE FASTEST-GROWING EXPORT
SEGMENTS OF HIGH-TECH
FINNISH INDUSTRY

Healthtech Finland 2019

#1

DIGITIZATION AND ONE OF THE BEST EU COUNTRIES IN THIS DOMAIN

Digital Economy and Society Index 2018, Country Report Finland, European Commission #1

AVAILABILITY OF SCIENTISTS AND ENGINEERS

World Economic Forum Global Competitiveness Report 2017–18

100%

OF PATIENT RECORDS IN ELECTRONIC FORMAT

kanta.fi

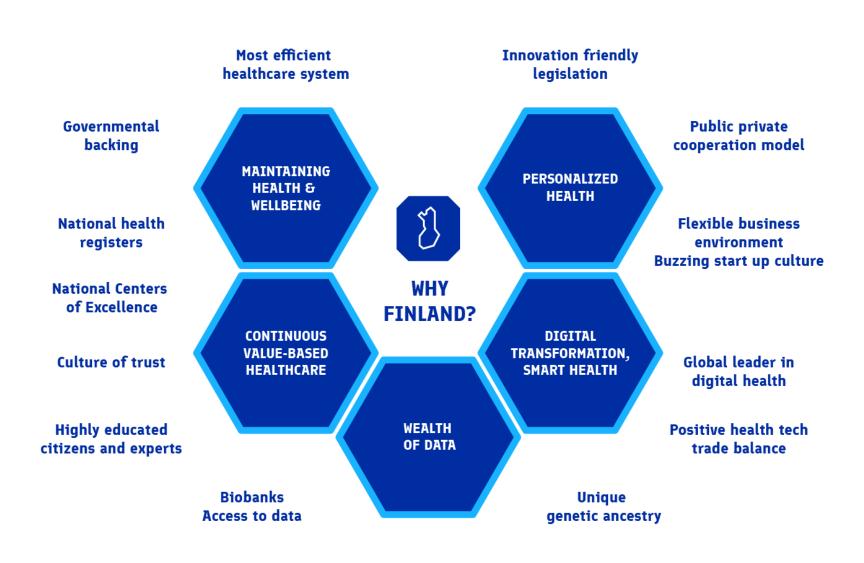
#1

AVAILABILITY OF LATEST TECHNOLOGIES

World Economic Forum Global Competitiveness Report 2017–18

INNOVATION-FRIENDLY LEGISLATION -ACT ON THE SECONDARY USE OF DATA

stm.fi

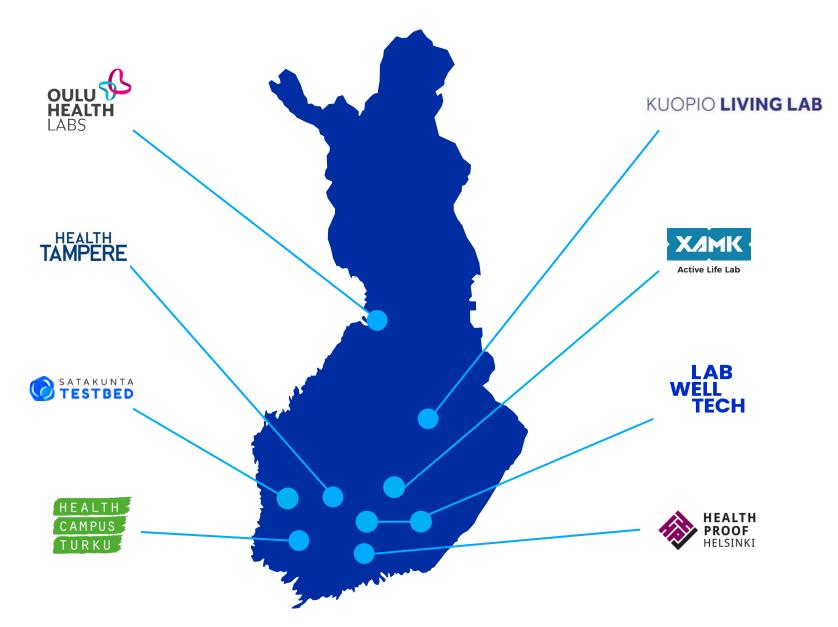




FINLAND



8 HEALTHCARE TESTBEDS IN FINLAND



Thank you



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Business Finland
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OCTOBER 8-11 2023



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BRINTER

GLOBAL VILLAGE EXHIBITOR











3D BIOMANUFACTURED HUMAN MODS

Enhanced Regenerative Performance



SUCCESS LEADER Tom Alapaattikoski (M.Sc, MBA)



HARDWARE
MASTERMIND
Tomi Kalpio
(M.Eng)



SUPER STAR
Dr. Eva Mueller
(Ph.D)



SCIENCE OPERATIONS
GRAND MASTER

Dr. Matthew Brovold (Ph.D)



INVENTED 3D BIOPRINTING

Dr. Atala (MD, Ph.D)

PROBLEM:

INDIVIDUAL

CARTILAGE

IS EXPENSIVE TO SOURCE, HARD TO MANUFACTURE & SLOW TO REGENERATE



SOLUTION:

WE

ENGINEER

REGENERATIVE, PERSONALIZED CARTILAGE*



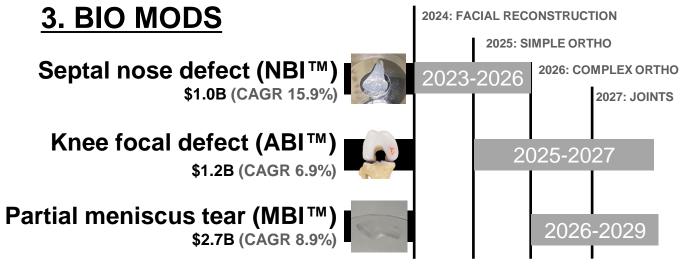
BRINTER

\$10B MARKET FOR OUR CARTILAGE BIO-MODS (US)

1. MULTI-MATERIAL 3D BIOPRINTER







+ Degenerative disc disease & socket tears

2. UNIVERSAL CARTILAGE BIOINK





- BIO-SYNTHETIC
- ANIMAL-DERIVED
- 100% BIODEGRADABLE
- ENABLES REGENERATION
- NATIVE MECHANICAL PROPERTIES
- REDUCES REJECTION & INFLAMMATION

4. NOSE-MOD (NBI™) FIRST STRATEGY



FAST & LOW COST REGULATORY PATH



PREDICATE SPEEDS OTHER PRODUCTS



REDUCES FUTURE R&D COSTS



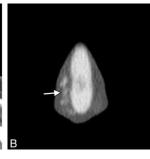




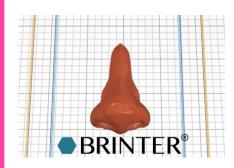
Synthetic => Infections and complications

MAKING OUR CARTILAGE MODS:

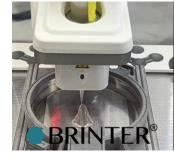




1. SCAN OF THE REGION OF INTEREST



2. BUILDING 3D MODEL



3. BIO-MANUFACTURING



4. TRANSFER



5. SURGICAL IMPLANTATION

SAME DAY DELIVERY (ACCELERATED WITH A.I.)



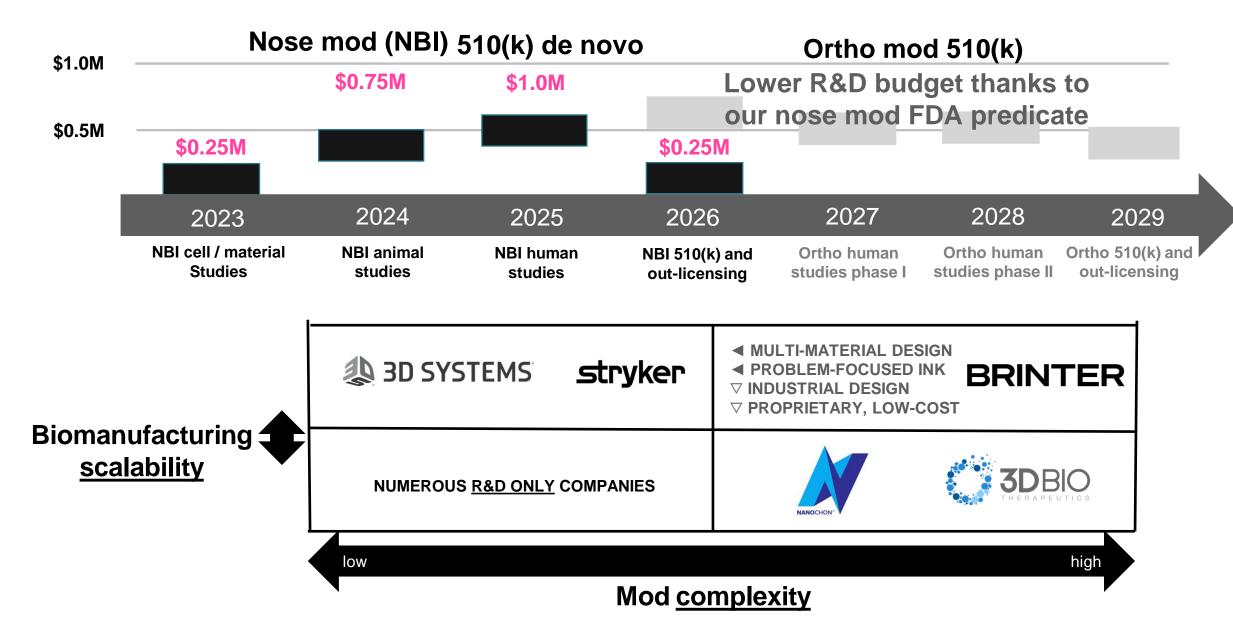
USPTO PATENTS FOR ABOVE PROTOCOL PENDING



Potential protective similarities with IPR fortress patents.



2.25M BUDGET AND COMPETITION



STORY AND VALUATION MILESTONES:

2018-2020

2021-SEP/2023

OCT/2023-2024

2025-2026

2027-2028

Accelerated from



\$2M seed

Regenerative Medicine

\$6.1M



Nose animal tria start.



\$15M

A-round.

Nose human trials start.



\$80M

Ortho human trials start.



\$500M **-**

Proof of tech by R&D sales.



Nose dev starts. 2+7 **USPTO** patents.



\$12.5M

Nose animal trials completed.



\$35M

Nose commercial.



\$200M €

Possible IPO or acquisition





<u>OPEN ROUND OF \$2.25M AS OF OCT 2, 2023</u>

USE OF FUNDS IN 2023-2025 FOR NOSE-MOD (510(k) de novo)

^\$0.25M Cell studies 2023

^\$0.75M Animal trials 2024

^\$1.00M Human trials 2025

^\$0.25M Commercial 2026





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Next session starts at 12:50 p.m



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How DCT and regulatory strategies can collaborate to adopt advanced technology early in development lifecycles















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International Healthcare Opportunities with ECHAlliance and The Digital Health Society















The Digital Health Society

October 2023

Bleddyn Rees

Chair at The Digital Health Society

www.echalliance.com

⊠ bleddyn@echalliance.com

@ECHAlliance

@BleddynRees



What is the Digital Health Society (DHS)?





- Created during the 2017 Estonian EU Presidency to promote digital health & the Estonian Xroad
- Multi-stakeholder involvement
- 200+ organisations participated
 - Patients, citizens, consumers representatives
 - O Policy-makers: member states national ministries, regions, cities
 - Healthcare providers and professionals
 - Universities and research centres
 - Insurers (public and private) and their EU platforms
 - Companies (large and SMEs/start-ups)
 - Standards organisations
 - O EU networks related to health, wellbeing and technology

The ECHAlliance Group



DHS enables multi-stakeholder dialogue on healthcare data policies and practices. As a legacy of the Estonian Presidency of the Council of the European Union in 2017, it was formed to promote the adoption of digital health and the use of health data. thedigitalhealthsociety.com/







International projects

Our Innovation Team delivers Research & Innovation projects in health and data sharing/governance, scouts funding opportunities for our community, builds consortia and designs project proposals involving our ecosystems and members.

As project partners we carry out policy and socio-economic studies, market analysis, exploitation and dissemination tasks and can lead on stakeholder engagement to ensure the project sustainability.















































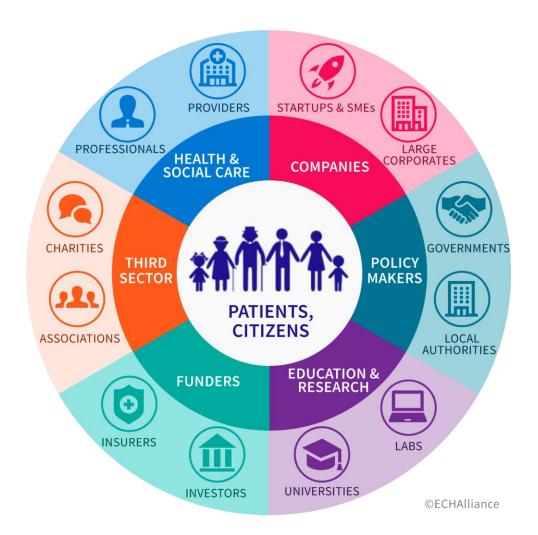


ECHAlliance The Global Health Connector









...bring together a permanent community of stakeholders to develop a joint health agenda, aiming to address and find common solutions to regional health challenges

Match Need and Solution

The main benefit of working together in an Ecosystem is the multiplier effect of collaborating in our International Network of Ecosystems.

- break down silos,
- transform healthcare delivery,
- create economic growth

FCHAlliance International Network of Digital Health Ecosystems











Argentina



Melbourne



Belgium Brussels

Flanders







Czech Republic



Croatia



Denmark

Scandinavia Nordic Health 2030 SoutherDenmark



England

London Manchester North West Coast Yorks/Humber South West Coast



Estonia



Finland

Central Finland Helsinki

Kuopio

Oulu Ostrobothnia South Ostrobothnia



France

Bretagne Hauts-de-France

Lille Nice

Normandy Nouvelle-Aquitaine

Paris



Germany

Hess

Nuremberg Rheinland Stuttgart & Neckar-Alb

Greece

Hungary

India

Israel

Italy

Treviso

Lithuania

Luxembourg

West Hungary

Athens



Moldova

Malta

Mexico



Netherlands



Northern Ireland



Norway

Health Tech Cluster Smart Care Cluster



Poland





Portugal

Digital Health Portugal Health Cluster Portugal SHAFE Portugal



Republic of Ireland



Romania

Serbia

Scotland

Slovenia

Spain

Catalonia

Galicia

Madrid

Sri Lanka

North East Transvlvania South West Oltenia

Highlands & Islands

Scottish Digital

Health & Care

Castilla y León

Basque Country

Extremadura

Com. Valenciana



Turkey

Sweden



Ukraine



Uruguay





USA Central Florida

Massachusetts



Wales



Zimbabwe





Housing & Health

Thematic Innovation

We have developed a brand new set of ECHAlliance Group Thematic Innovation Ecosystems that target cross-border themes led by our ecosystems and

members to match need and solution and foster

Ecosystems (TIE)



Digital

Life

Sciences

Medicines

Optimisation

Continence

Care

Health Data

Procurement

Health



Mental Health



Digital Health & Wellbeing



Women's Health



Cancer



Telemedicine & Health Inequalities x

















What does the DHS do?





- Thought leadership activities focused on digital and health data e.g the Round Table Programme
- Annual DHS Virtual Summit
- Digital and health data activities of the ECHAlliance Global Health Connector initiatives
- Al Club
- Providing expertise for EU funded research & development projects
- Planning Hospital clubs (benchmarking, collaborations for innovation and research and commercial activities).

















Multi-stakeholder consensus recommendations

Raise the digital, literacy & skills of all stakeholders

Demonstrate benefits to society from data access, use and reuse

Generate and value trustworthy Real **World Evidence**

Adopt a risk stratification approach

Adopt a approach to

Accelerate interoperability across **Europe** and globally

> **Build** a trustworthy framework for data access and use









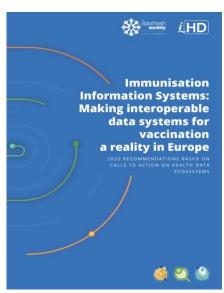


Multi-stakeholder events and reports 2020-22, joint with Digital Health Society, sponsored by MS, J&J and MSD











Read the DHS Round Table published reports



Annual DHS Virtual Summit?





- The 5th Summit in 2023
- Moved to Virtual Summit 2-day format during the pandemic
- In 2022 almost 1,000 registrations from 95 countries!
- Industry, Academia, Policy Makers & NGOs
- Showcases innovations, capabilities of countries and informs and addresses key health policy subjects

#DHSSUMMIT23

5th DIGITAL HEALTH SOCIETY SUMMIT

14-15 NOVEMBER 2023



Register free today









- Invite only & Chatham House rules apply to meetings
- Launched in 2022/23
- Chaired by Professor Rachel Dunscombe, UK AI Council & DHS Director.
- Industry (Tech, Pharma, Medtech), Academics, Clinicians, & Regulators are members
- 4 virtual meetings a year and some virtual email working. Spin off from Round Table Digital Health Programme.
- Discussing shared challenges, possible solutions and sharing know-how and information
- About to publish its first paper on AI in healthcare



Thank you!

To get involved with DHS become an ECHAlliance member



Bleddyn Rees

Chair at The Digital Health Society

⊕ www.echalliance.com⋈ bleddyn@echalliance.com

@ECHAlliance

@BleddynRees



Global Health Connector Village @ HLTH23

Yellow Schedule

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Who we are //

We are global healthcare scheduling experts

We are Yellow Schedule.



To democratise healthcare by powering 20 million appointments annually.



What we do //

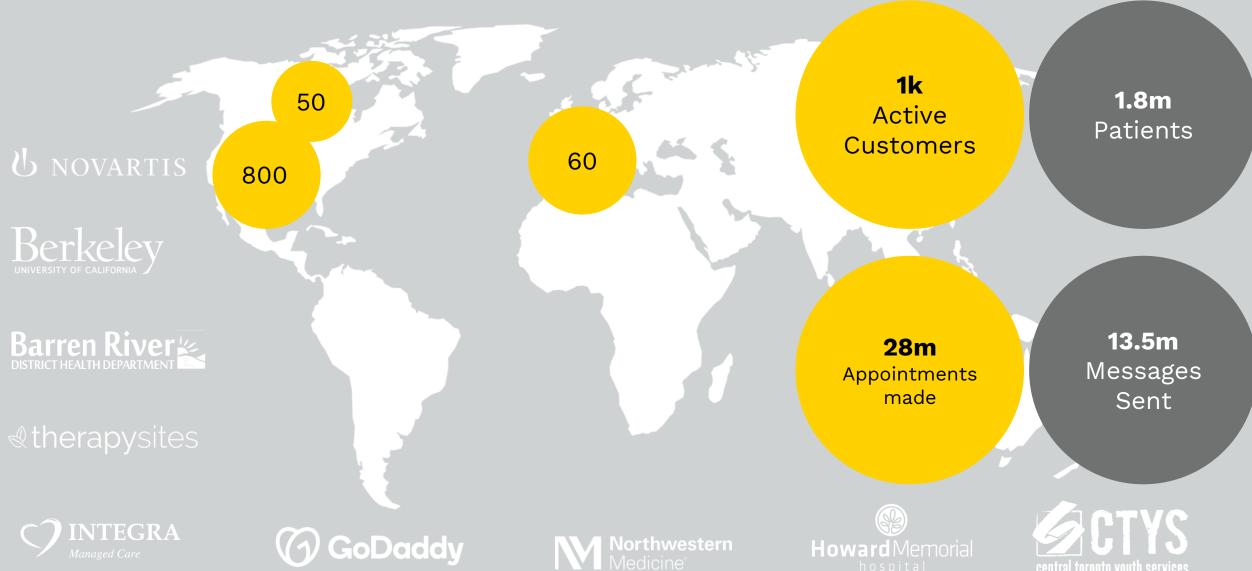
Yellow Schedule provides modular and end-to-end solutions for:

- Scheduling
- Visitor Management
- Patient Communications
- Workforce Scheduling

- Queue Management
- Waiting List Management
- Intake & Consent Forms
- Unified Bed Management
- Check-in Kiosks

YellowSchedule

Who we do it for //





Martina Skelly martina@yellowschedule.com Kiosk #3441-16

We are Yellow Schedule.

```
// experienced
```

// dependable

// transformative

Global Health Connector Village @ HLTH23



GLOBAL VILLAGE EXHIBITOR











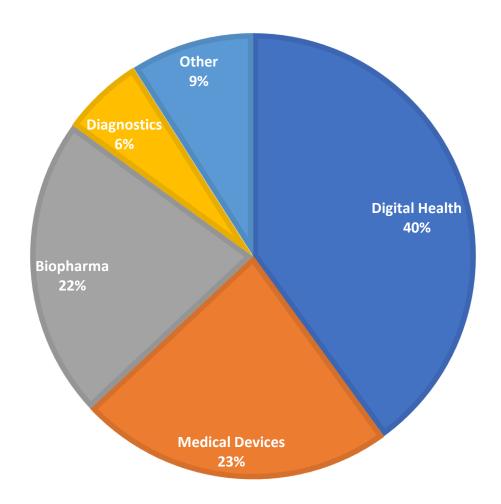
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NORWEGIAN HEALTHCARE MARKET







Digital Health:

- Education
- Healthy Ageing
- Remote Care
- Mental Health
- Dental



Medical Devices:

- Sensors/ Monitoring
- Wound Care
- Infection Control
- Surgical



Biopharma:

- Oncology
- Radiopharmaceuticals
- Personalized Medicine



Diagnostics:

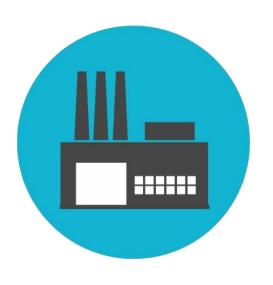
- Oncology
- Cardiovascular
- Remote Testing



Other:

- Hospital Improvement
- Aquaculture
- Utilization



















Market Research and Business Model Advisory	Healthcare Market Navigation	Secondary	Primary
Business Development	Service Provider Navigation	Capital Strategy and Access	Corporate Access
	Hospital Relationships	Payer Relationships	Conferences and Receptions (external and internal)
General Market Access Research and Advisory	Incorporate / Partner / Distributor	Logistics and Warehousing	Hiring, Insights and Strategies



Questions?

John Vislosky, Senior Advisor: john.vislosky@innovationnorway.no

Zach Holm, Health Advisor: zacharias.holm@innovationnorway.no



Global Health Connector Village @ HLTH23



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Universal Genomic Screening for Cardiovascular Disease

Meg Samek-Smith meg@multiplaihealth.com +1 (410) 271 4994

Millions of people are at risk of coronary artery disease without knowing it

18m deaths / year #1 cause of mortality 15X
more women die of it than breast cancer

reason for waste in healthcare spending

Traditional clinical risk stratification tools misclassify 40-50% of people as low risk.

We Are Digitizing the Blood: Proprietary Process Perfected Through Six Clinical Studies

Blood Whole Blood Comprehensive **Proprietary Data** A Single Super-Neural **Transformation Biomarker Networks** Results Sample RNA-Seq Our Predictive **CVD Risk Score** Coronary artery disease Steatosis/ Fatty Liver Disease

Administered virtually anywhere

Digital processing of all biomarkers in the blood

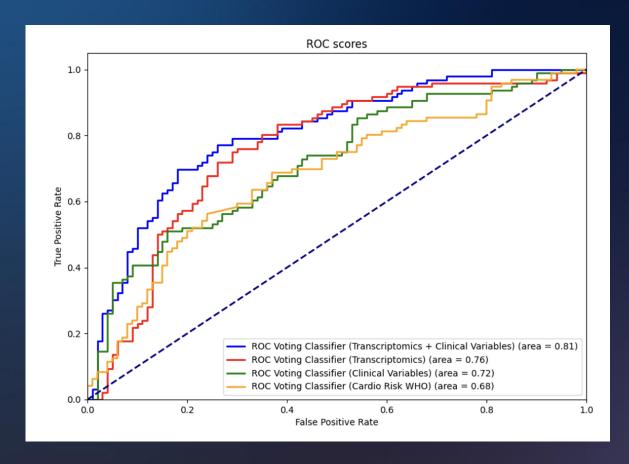
High processing ability needed to prepare data

1M pixel image format ideal for algorithmic analysis

Specifically calibrated neural network analysis

Guide decisive & personalised intervention

Our results are already 20% Better than the Clinical Standard in CAC detection:



Pilot Study Results **AUC 0.81** vs 0.68

 Higher accuracy in predicting coronary calcifications compared to the traditional approach

Better performance guiding doctorswith decision making

Clinical Studies

Partners and funding

Commercializing

Product development expertise

Series A

\$10 million, lead investor by Q3 2023



Universal genomic screening

Join The Healthspan Revolution



Scan for Digital Prospectus or visit www.superbiomarker.com

Meg Samek-Smith meg@multiplaihealth.com +1 (410) 271 4994

Global Health Connector Village @ HLTH23



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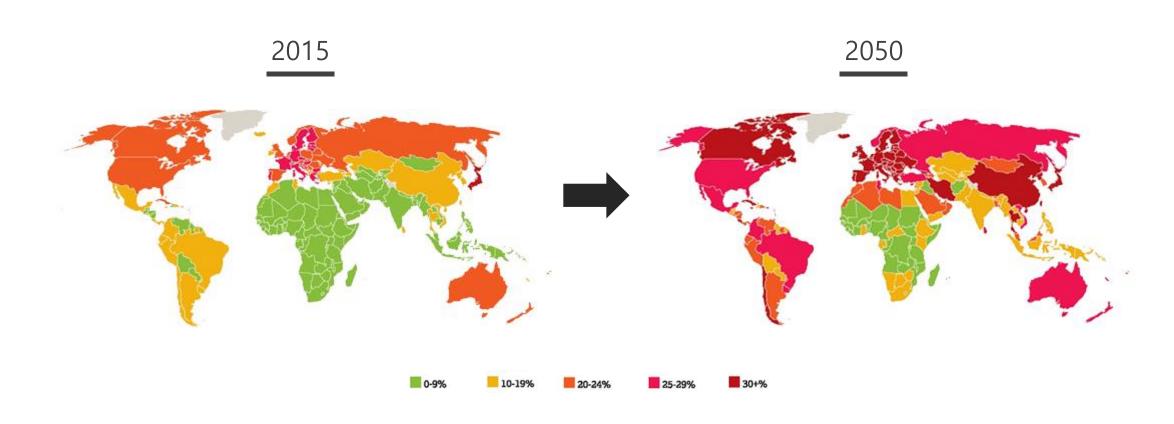


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Digital Healthcare for Aging World





Dementia and Early Diagnosis

Dementia Cases

3x (150m)

Potential Cost Saving Of Early Diagnosis

US\$7tn

Undiagnosed Ratio in the US

91%



- Easy 1-min screening for dementia
- Analyzing verbal fluency and semantic memory
- 20 Al-algorithm for humanless screening

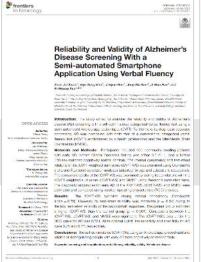


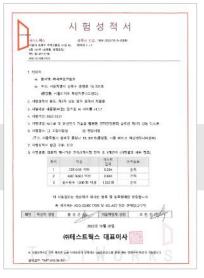
High accuracy despite short test time

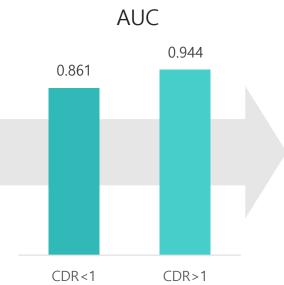
- 3 clinical studies at Seoul National University Hospital + a 3rd party test
- Recognized for its innovation and originality by being published in three international papers
- Comparison of test results according to the severity of dementia
 - 100 patients with CDR < 1 vs. 100 contrast group : AUC (0.861)
 - 50 patients with CDR > 1 vs. 50 contrast group: AUC (0.944)





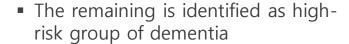




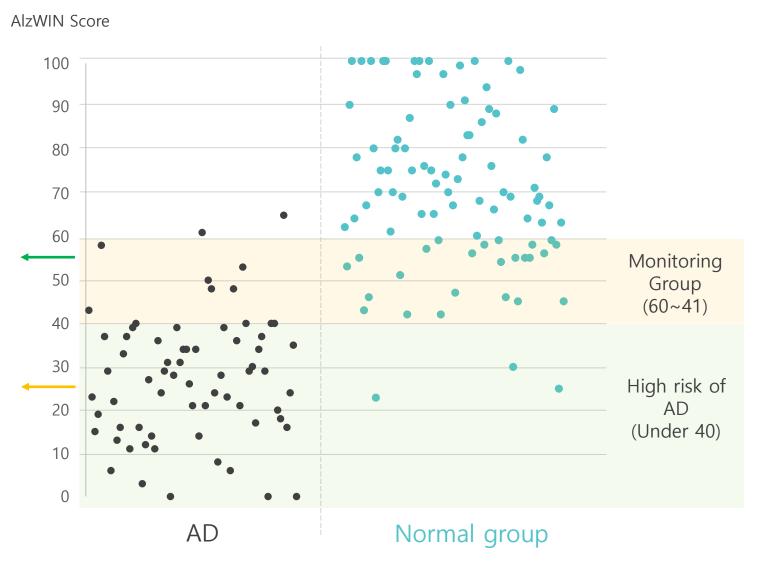


Mar 2013 Jan 2014 July 2021 Oct 2022 test report

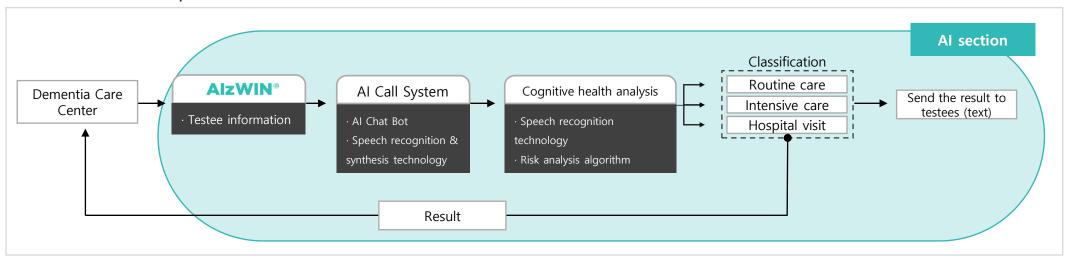
AlzWIN Algorithm Data (AD VS Normal group)



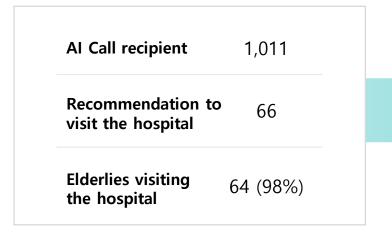
- Most people with dementia score below 40
- Only 3 in the normal group scored below 40



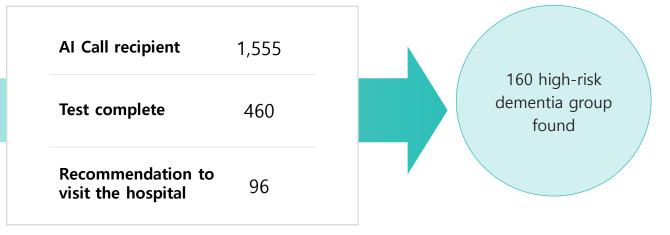
| AlzWIN AI Call process



I 1st pilot project in Gyeonggi-do



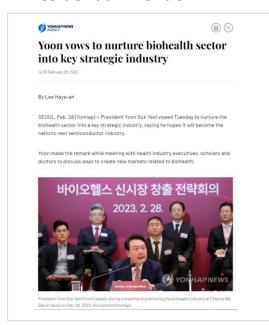
I 2nd pilot project in Gyeonggi-do



SEVEN POINT ONE

Domestic and international appreciation of AlzWIN

Presidential mention



Presidential commendation



I CES2023 Innovation Award



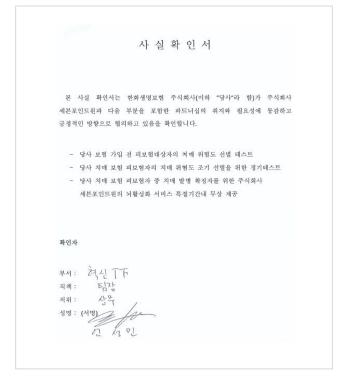
I Gyeonggi-do's excellent policy



I Samsung Life



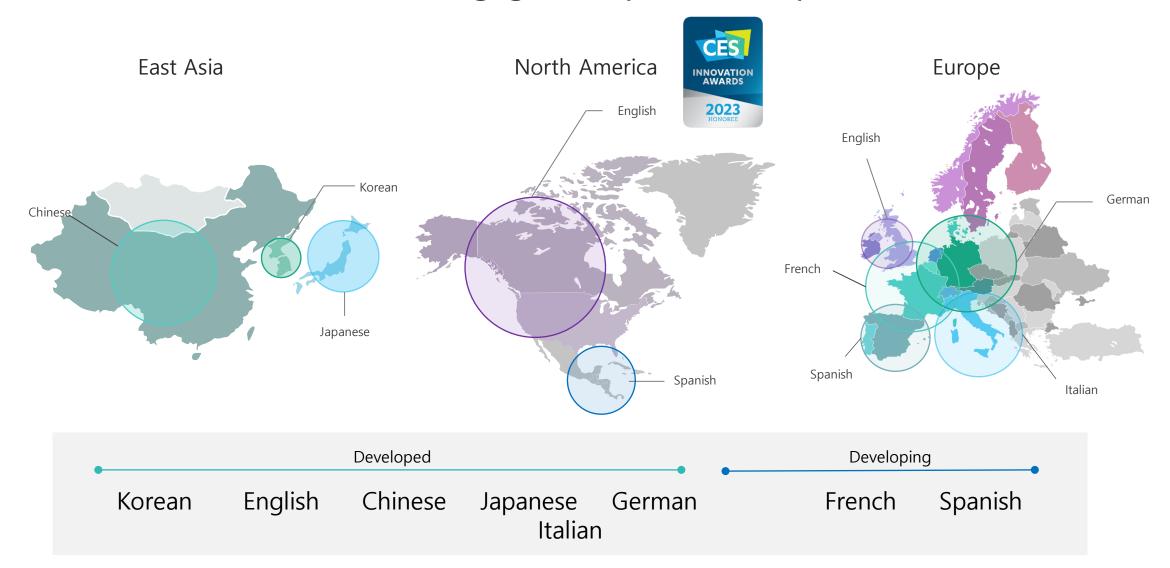
Hanwha Life



I Lina Life (Cigna)



Building global partnerships











LAS VEGAS USA

Best Pitching Prize #4YFN











Powering startups





Barcelona 2023 in numbers

#4YFN24

Startups & Exhibitors

Countries Represented









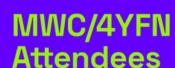


Startup **Pitches**



88,500









Conference Speakers

375



Hours of Content

Almost

Investors and VCs attended 4YFN from 39 countries





of funds represented









Female Speakers

4YFN Award 🖁 🗒



1 Winner / PAYFLOW



4YFN Programmes

Digital Health Tech & Planet **Frontier Tech** FinTech

Edtech

Investors

Partner **Progammes**

Founders Programme









Welcome to the 4YFN24 Health Selection!

Prize package HLTH pitch winner

Highlights

- 4-day startup pod at the heart of the Digital Health zone at 4YFN, 26-29/02/2024
- MWC Discovery Pass with access to 4YFN and MWC
- Access to the Digital Health and Wellness Summit, coorganized by ECHAlliance

And much more...

- Pitching opportunities
- Access to 4YFN exclusive lounge
- Invites to exclusive networking activities with investors
- Visibility and promotion

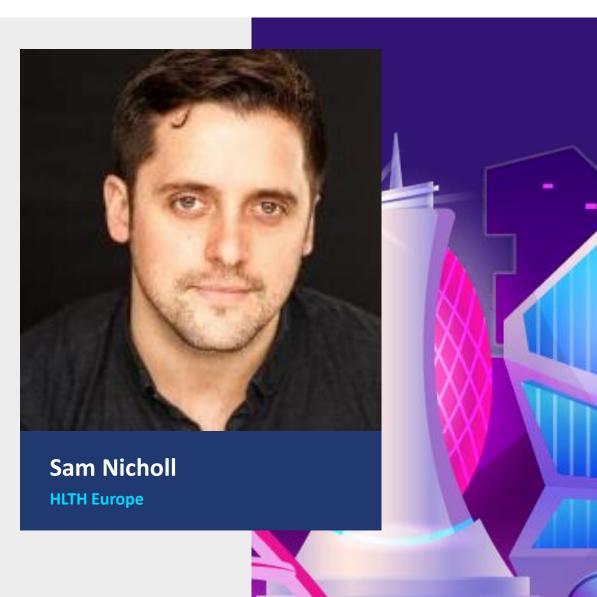




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