



Do you also know someone that suffers from dementia?

Most of us have some relation to Alzheimer's or other diseases that cause dementia. Detection at an early stage is difficult and most are hence missing out on critical treatment and care. The consequence is unnecessary suffering for both patients and relatives.



- Poor patient access
- Low quality and capability
- Resource restraints
- Low effectiveness



never get a correct diagnose and treatment



2x cancer 3x cardiovascular

Total cost to society in Sweden – Socialstyrelsen 2019



New treatment for Alzheimer's – Breakthrough brings enormous pressure on healthcare

The results from the study is a gamechanger showing progression of Alzheimer's disease were significantly slowed down the in the early stages of the disease*. The study meets primary and all key secondary endpoints with high statistical significance. Estimated market release 2024.

"The introduction of disease modifying treatments will give new hope to patients suffering from Alzheimer's disease.

Early detection via digital cognitive tests and blood-based biomarkers will be instrumental, and all actors that can provide a new way to improve quality, efficiency and patient access has an important role to play"

Gunilla Oswald, CEO at BioArctic about Geras Solutions

Success of experimental Alzheimer's drug hailed as 'historic moment' Study shows cognition in early-stage patients on lecanemab declines by 27% less than those on placebo



Finally: Big Win on All Outcomes for Lecanemab in Phase 3 Topline Results





*A Study to Confirm Safety and Efficacy of Lecanemab in Participants With Early Alzheimer's Disease (Clarity AD) September 28, 2022



We drive necessary change by digitalization of dementia assessments

"With digital support, we drastically shorten the time of the cognitive investigation process and at the same time gain access to a significantly better material for decision-making" - Göran Hagman, Neuropsychologist, Karolinska University Hospital



A new gold standard - co-created with clinicians and proven in research

Main clinical validation study has been done at Karolinska University Hospital. Results show reliability and improved diagnostical precision compared to traditional gold standard.

We are unique with a comprehensive digitalization of the assessment. Other tools with varying scientific evidence exist. They do however only perform subsets of the assessment, such as just a cognitive test. No one else is providing full digitalization of the clinical procedure.



Published scientific papers

Read more at:

minnesmottagningen.se/forskning-evidens



according to "Person-centered and cohesive care ss Cognitive impairment in suspected dementia"	Path / Managment
on of cognitive impairment / dementia	 Initial screening battery
ision point: Begin basic dementia investigation	 Automated in the flow
om inventory (patient)	Separate question battery
m inventory (relative)	 Neurocognitive Symptom Survey (CIMP-QUEST)
esis	Heredity, drugs, family, diet, exercise etc.
status	Tests: PHQ-9 and KEDS + call case-by-case
ve tests	GSKT - Further development of MoCA / MMT
ision point: Well-founded suspicion of cognitive impairment lementia	Medical assessment based on the above (tot ca 15 min)
view	Journal read-out (partly also already managed above)
tory test to rule out other diseases	Referral
c status	& Neurological status, balance, vision, hearing etc.
n	Referral
	🚱 Referral
red assessment of functional and activity ability	$\frac{d^2}{\Delta}$ Referral to occupational therapist
ision point: Diagnosis or on to extended dementia estigation	Diagnose alt. further referral to specialist

Alignment to national guidelines

Experts contributing to the development of the platform



HÖGSKOLAN VÄST

Market needs are significant and growing with aging populations

25 000 new cases in Sweden per year and 150 000 patients are to be monitored on annual basis. Total need is +150 000 assessments per year as many do not lead to a diagnosis.

The digitalized procedure covers a clinical scope of work equivalent to 3000 SEK.



Large aging population entering risk group

Enabling future of healthcare via SaaS-model and as digital healthcare provider



Platform for health care (SaaS)

Primary care and specialist care clinics use the platform to manage the assessments of their own patients





Digital healthcare provider

Direct to patient via Minnesmottagningen.se, reimbursed by the public healthcare system

+

Off-load other healthcare providers via referral

Paying customers and agreements with both private and public sector





Registered health care provider

Sub-contracted for public reimbursement throughout Sweden

Price model

1 600-2 000 Reimbursement per assessment - Video call

- Anamnesis, cognitive test
- Relatives' assessment
- Doctor concluding assessment
- *Referral when in need of CT etc.*

~250 mSEK **Potential** (Sweden) (150 000 assessments – verified interest from homepage visitors to date is 30 000 per year)





Roadmap to 8000 helped patients and break-even by 2025

Market



- Sales funnel power-up execute B2B/B2G
- Optimized packaging customized packaging customized
- Digital marketing leverage social media, customer engagement

Clinical



Scalable clinical operations – ability to deli assessment direct to own patients and on r

Product & tech



- UX-uplift improve funnel and patient ado
- Tech-stack future-proofing update for im scalability and requested features

 $\underbrace{\mathbf{Compliance}}_{\underline{\mathbf{III}}} \mathbf{C} \mathbf{E}$

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G funnel ging to pers , SEO etc. for	 Scalable sales distribution – build partnerships to drive distribution and larger volumes Internationalization prep – analysis, stakeholder engagement and prep for international expansion 	
eliver referral	 Multi cultural inclusion – new languages and expanded capability to support all patient groups (immigrants, limited educ. etc) 	
option nproved	 Integrations with other healthcare systems (SITHS authentication, referrals / lab tests etc) 	

• **CE certification uplift** - from Class I (MDD) to Class IIa (MDR) for future conformity and strengthened of market position

Plan for growth of an attractive business (Sweden as first market)

- Target revenue of 100 mSEK in 2027 equals 1/3 of total market in Sweden. Growth of 200-250% per year.
- Break-even for Sweden in 2025 with 4% market coverage
- Key drivers for revenue and cost
 - Continued sales work to drive implementation and increased adaptation with already established contacts is important for credibility, but also contributes with high margin income (SaaS)
 - Dialogues with other healthcare providers will focus on customer needs to offer both SaaS and outsourcing via referral
 - Sales and marketing direct to patients will include optimizing CAC (now 26 SEK until "download app") but mainly increasing reach and general stakeholder engagement
 - Product development and scalability in the operations for Minnesmottagningen.se is important to ensure consistency, quality and responsiveness, beyond the main target of better gross margins. Initial focus for clinical operations is however to build organization and capacity to deliver on market needs



*driven by cost structure for direct patient contact

– i.e. the more labor-intensive delivery model

Small team with the right competencies and track record

Market





Rickard Forsman

CEO

International experience from digitalization in Life Sciences. Worked with 17 of the 21 healthcare regions in Sweden as management consultant. Degree in Engineering and Economics.

Clinical





Johanna Ulfvarson

Head of Clinical Operation and Customer Success Registered nurse with comprehensive network from national nurse association as well as national innovation agency (Vinnova). PhD in medicine and associated professor at Karolinska Institutet.

Product & tech





Adam King

Head of Tech. and Prod. Dev. Start-up experiences and award-winning Product Owner with tech background. Degree in Cognitive Science.



Viktoria Skyman Head of Growth Comprehensive network and experience within *healthcare from consulting and business* development in eHealth and digital transformation. Degree in Physical Therapy.

MD. PhD Johan Sundelöf* Specialist Clinician

MD. PhD Victor Bloniecki K.* Head of Clinical Research

MD. PhD Yvonne Freund* Specialist Clinician

MD. Keivan Javanshiri* Clinician

Yevhenii Bondarenko Full-stack developer

Fahima Sharegh* Tester

Alexander Movchan* Front-end developer

*Part-time engagement





Join us in changing the future of dementia care

- We are now raising **15 mSEK** (1,5 mEUR)
- Looking for additional owners that also can bring network and experiences that contribute to our shared vison of improving patient outcomes in dementia care
- Round closing in December
- Looking forward to share more!



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