

RETINARISK

RetinaRisk sets a **new standard** in diabetic eye care by integrating sophisticated **risk detection** with revolutionary **AI imaging diagnostics**, providing an unmatched, comprehensive care solution

TEAM

Over 30 Years Of Academic And Clinical Experience In Managing And Treating Diabetes And Diabetic Eye Disease



Prof. Einar Stefansson
Founder

Dr. Stefansson is a leading physician in the field of diabetic eye disease and diabetic eye screening. He has served as Dean of the Faculty of Medicine at the University of Iceland and as Professor and Chair of the Department of Ophthalmology at the National University Hospital in Iceland. Dr. Stefansson has co-founded several biotechnology firms, including Oculis, acquired by Novartis in 2018. Dr. Stefansson has published more than 300 peer-reviewed international publications, more than 400 abstracts, numerous book chapters and patents.



Dr. Arna Guðmundsdóttir
Co-Founder

Dr. Guðmundsdóttir is a leading Endocrinologist at the National Hospital of Iceland and in Hjartamiðstöðin, a private clinic in Reykjavik. She was the chair of the Doctors' Association of Reykjavik from 2016-2018. Dr. Guðmundsdóttir published extensive guidelines and educational material for people with diabetes.



Prof. Thor Aspelund
Co-Founder

Thor Aspelund is a professor of biostatistics in the Center of Public Health Sciences at University of Iceland. Professor Aspelund has lead research risk modelling, prediction models, survival analysis, ROC analysis, and categorical data analysis. In addition to RetinaRisk, he has been involved in risk modeling for coronary and cardiovascular risk, atrial fibrillation and risk of fracture. Professor Aspelund also serves a biostatistician at the Icelandic Heart Association and leads the Icelandic modeling team for COVID-19 predictions.



Ægir Þór Steinarsson
CEO

Ægir holds a degree in business administration from laSalle in Barcelona and Master's degree in human centered design from IE in Madrid. Ægir has been involved in the startup world for a long time around the world both in health tech and other ventures.



PROBLEM

WHAT IS THE SITUATION?

Number of Diabetic patients > 530M is set to grow by 20% over 10 years; while the global population is expected to grow by 8%

22% of the diabetic population have DR symptoms est. at 120 million and in addition, 6% suffer from vision-threatening DR, est. at 33 million

WHAT IS THE PROBLEM?

Diabetic Retinopathy screening is safe and effective in reducing blindness. This can be made less expensive and more accessible

Increasing Diabetes prevalence and a shortage of ophthalmologists (Asia, Africa, and North America) will compound the challenge

OUR SOLUTION TO THE PROBLEM?

RetinaRisk can eliminate redundant screenings,

**INCREASE OPERATIONAL EFFICIENCY AND
REDUCE SCREENING COSTS BY MORE THAN 50%**

by combining hand-held fundus cameras, AI-enabled detection of diabetic retinopathy and risk-based personalized profiling of patients,

SOLUTION

RetinaRisk Predicts Future Disease Progression & Enables Timely Intervention And Prevention

Six risk factors inserted

<input checked="" type="radio"/> Male <input type="radio"/> Female Gender	<input type="radio"/> Type 1 <input type="radio"/> Type 2 Type of diabetes
<input type="radio"/> No <input type="radio"/> Mild non-proliferative diabetic retinopathy <input type="radio"/> Moderate non-proliferative diabetic retinopathy Diabetic retinopathy present?	
Diagnosis year	Systolic Diastolic Blood pressure
HbA1c <input type="radio"/> mmol/mol <input type="radio"/> %	Average whole blood glucose <input type="radio"/> mg/dL <input type="radio"/> mmol/L

1

Individualized risk calculation for diabetic eye disease

2

Key risk factors based on the patient's risk profile

3

Recommendation for personalized eye screening interval



HIGH RISK OF RETINOPATHY

You have a high risk of developing sight threatening retinopathy.

HbA1c - Poor

HbA1c levels are elevated. In order to minimize the risk of diabetic complications, it is important to keep HbA1c levels at optimum levels. If HbA1c can be reduced to the AACE target of 6.5%, the annualized risk of developing sight-threatening retinopathy drops to 3.4%, which signifies a total reduction of 42%.



Blood Pressure - High

Your blood pressure is high. High blood pressure accelerates the progression of diabetic retinopathy. If the blood pressure can be reduced to the ADA goal of 130/80, the annualized risk of developing sight-threatening retinopathy drops to 3.9%, which signifies a total reduction of 34%.



Diabetes Duration

Your risk of developing sight threatening retinopathy is impacted by your duration of your diabetes. As the duration increases the need for better eye care is of importance.

Next screening: 05/2022

Screening interval: 7 months

SOLUTION


Remidio Delivers AI Diagnostics And Hardware

AI Diagnostics

- Diabetic retinopathy
- Glaucoma
- AMD

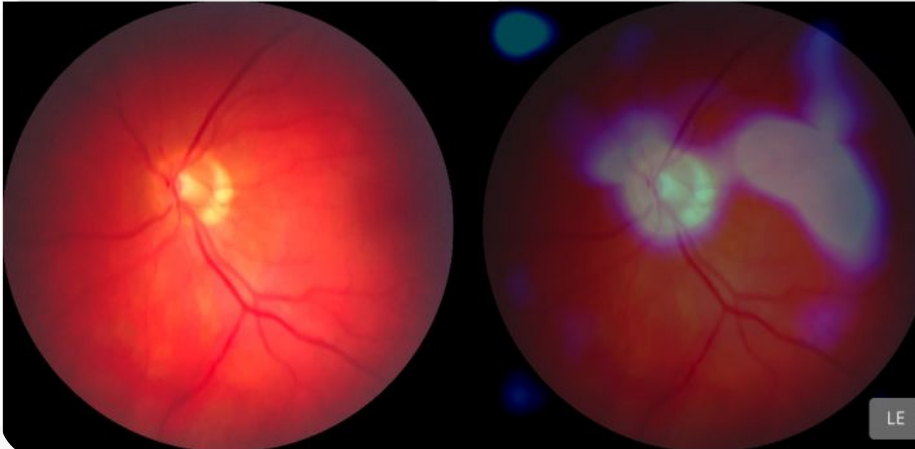
RetinaRisk
RetinaRisk

Diabetic Retinopathy Report

 **RETINARISK**

Patient MRN: 7 Gender: Male Age: 35
Patient Name: Bjorn Doctor: Doctor N/A Date: 07 Sep 2023

Result: **Signs of Retinopathy detected. Examples of lesions are highlighted.**

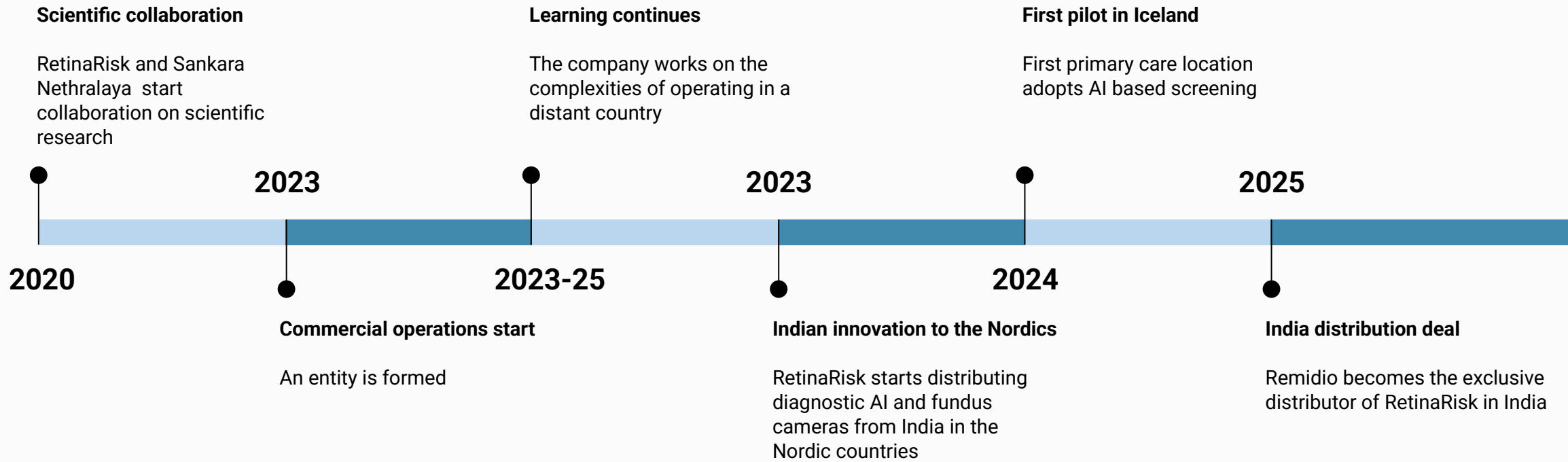


LE

Hardware



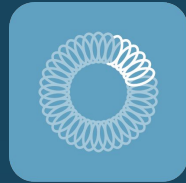
TIMELINE



KEY TAKEAWAYS

- Do you need an entity?
- Find local distribution
- Establish a local reputation
- India takes time (at least in healthtech)
- Healthcare in India is a different model
- Understand the nature of your collaborator (NGO?)





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