

Intelligent Dermatology: Unlocking the power of data for improved outcomes

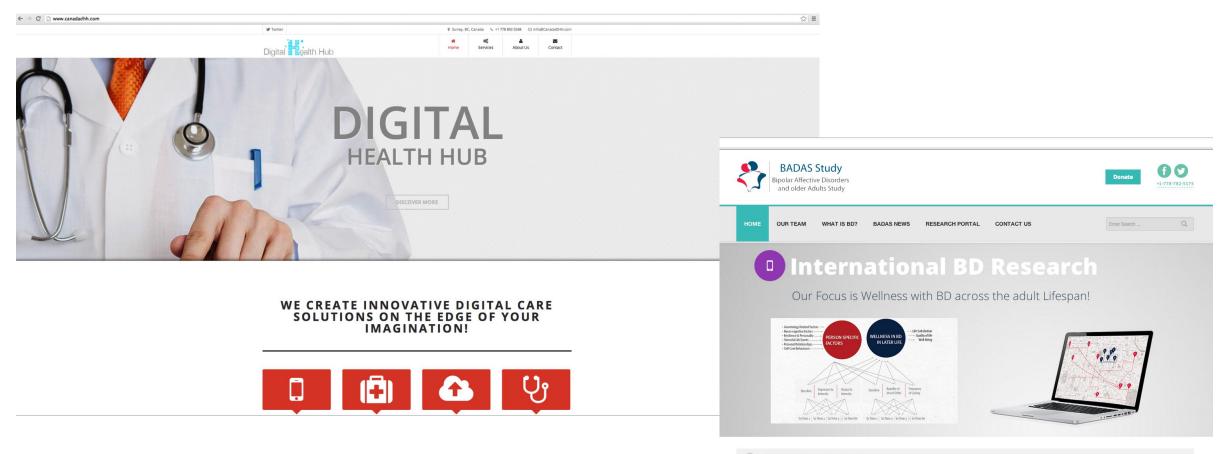
in skin health and care

Maryam Sadeghi, PhD CEO – MetaOptima Technology Inc.

Our vision is to be the world leader in smart data-driven dermatology and analytics.

Our mission is to facilitate faster and more accurate care for anyone anywhere.

Digital Health Hub



(i) WHAT IS BIPOLAR DISORDER?



About BADAS

This program of study brings researchers with SPU's Interdisciplinary Research in the Mathematical and Computational Sciences (IRMACS) Centre together with academic clinicians. Our team includes experts in BD research and practice, geopsychology, social work, technology, geography, computing science, health psychology, mathematics and neuropsychology. We constitute a multinational and multidisciplinary team. Significant synergies exist across this network of experts in BD research, practice and technology. We will use of advanced qualitative and quantitative research methods (e.g., mixed methods, experiential sampling, latent growth and hierarchical linear modelling). Exceptional research training and knowledge translation (K1) opportunities are envisioned.

Digital Health Hub



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Aging Well

- Advanced Care Solutions
- **c**ross-Cutting Activities
- Mobile-Health
- Point of Care Technologies





RESEARCH TEAM EVENTS NEWS VIDEOS PARTNERS CONTACT

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About AGE-WELL



AGE-WELL: Aging Gracefully across Environments using Technology to Support Wellness, Engagement, and Long Life

A globally aging population demands innovative approaches to ensure people across societies can live and age well. In particular, there is a need to move from health and social agendas that emphasize dependency as we age, to ones that promote healthy aging and independence.

The AGE-WELL Vision

The vision of the AGE-WELL is to harness the potential of technology to provide high-quality and sustainable services and solutions to meet the needs of the current and future generations of older adults in Canada. Our vision includes the creation of capacity for Canada to further establish its position as a global leader

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My Journey – Science and Entrepreneurship

NSERC Innovation Challenge Award





CIPPRS Doctoral Award







Microsoft ACM Silver Medal

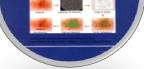


World Congress of Dermatology Gold Medal



CMIG Journal Recognition





TECHVIBES

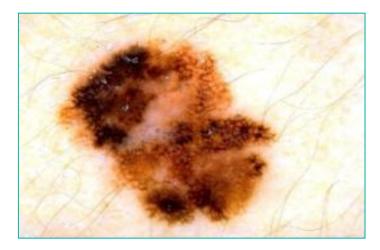
BUSINESS VANCOUVER

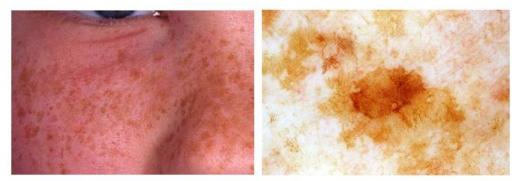


Computer-aided Analysis of Skin Lesions

- Benign lesions
- Skin Cancers
 - Basal Cell Carcinoma (BCC)
 - Squamous Cell Carcinoma (SCC)
 - Melanoma

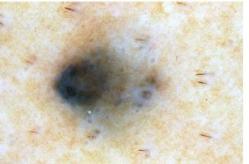
Melanoma





(a) Freckles

(b) Lentigo (Solar)



(c) Melanocytic Nevus(Blue Nevus)



(e) Seborrhoeic Keratosis

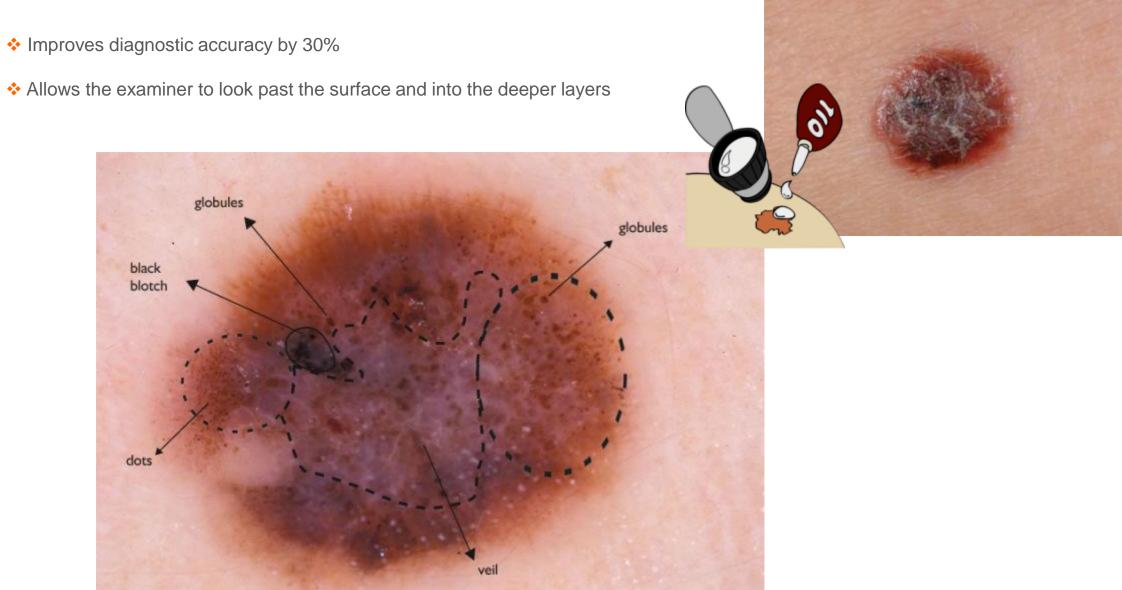


(d) Atypical Nevus (Clark Nevus)

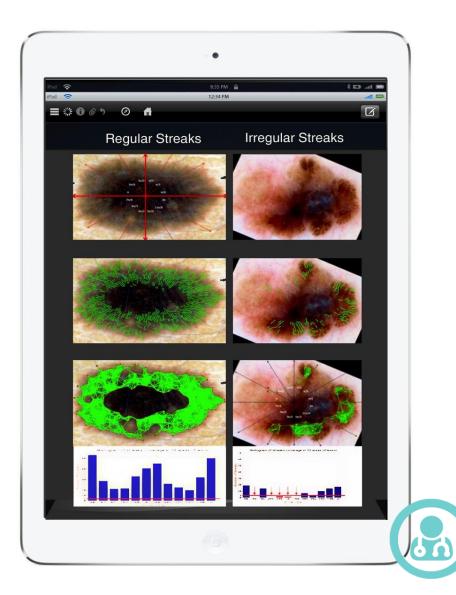


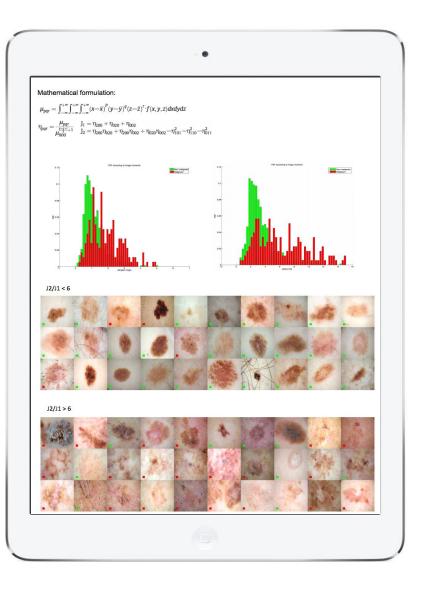
(f) Dermatofibroma

Dermoscopy



Pattern Recognition and Matching



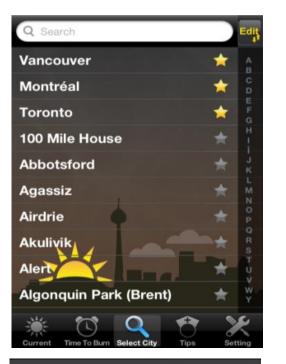




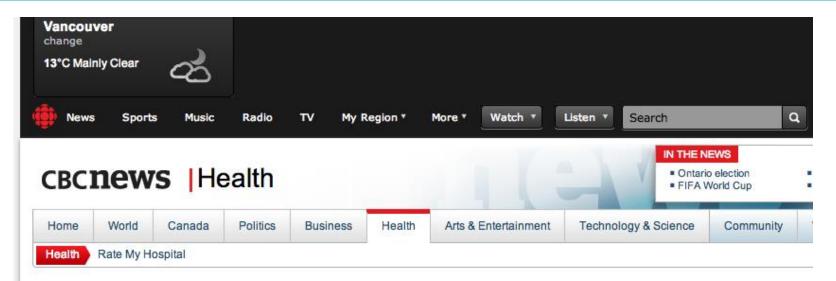












Melanoma a fast rising cancer in Canada

Canadians spend too much time in sun without protection, cancer society finds

CBC News Posted: May 28, 2014 3:01 AM ET | Last Updated: May 28, 2014 5:13 PM ET







Top News Headlines



A BIG Problem

- Skin Cancer is the most common cancer
 - 2 in 3 Australians
 - 1 in 5 Americans
 - 1 in 7 Canadians
- Doubles every 10 years
- Early diagnosis saves life and cost

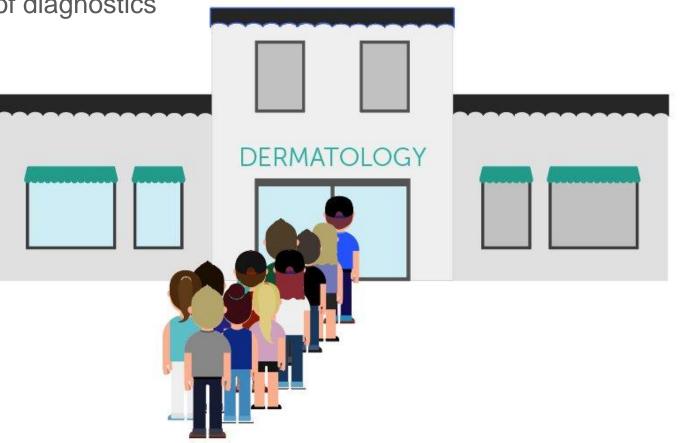
Canad	a 1 in 7	
	us 4Million	TS ST
0011		2 in 3
60Million		2 in 3

150,000,000 Patients Worldwide

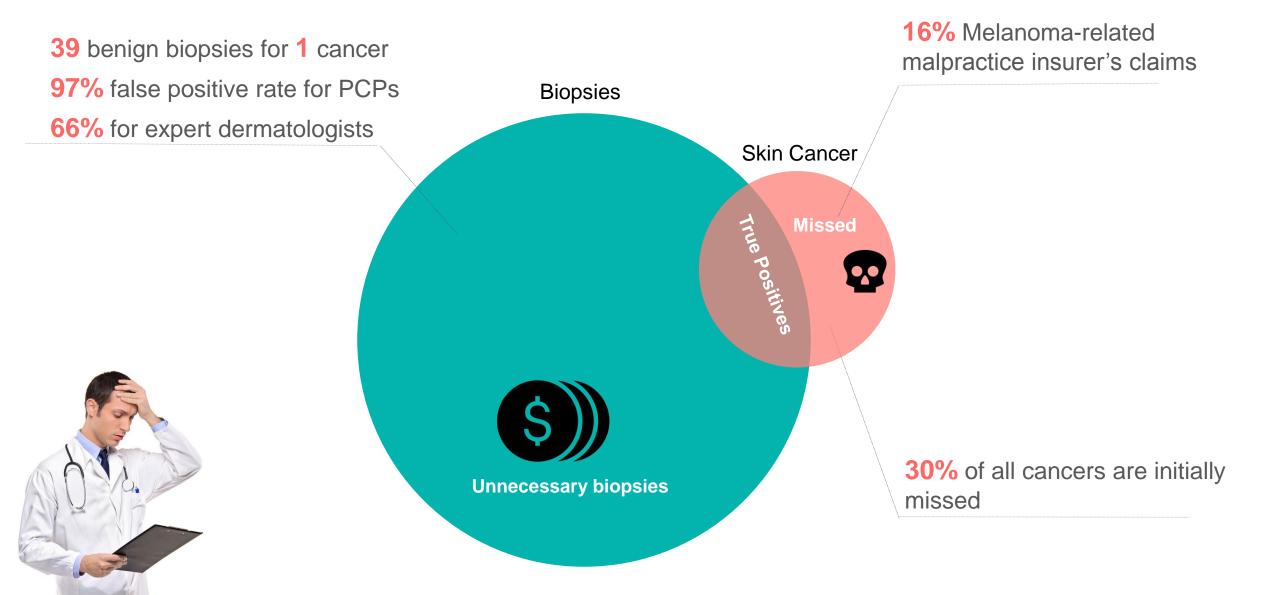
	Early Stage	Late Stage
Survival Rate	98%	15%
Cost	\$200	\$150,000

Access to Care

- Long wait times to access specialists
 - From 3 to 12 months
- Primary Care Physicians are in front line of diagnostics
- PCPs do not have training



Deadly & Costly

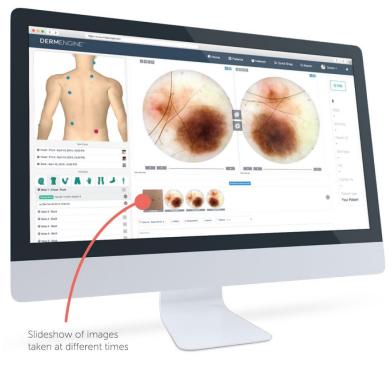


Solution: Data-driven Intelligent Dermatology





Our Products





DermEngine is an end-to-end proprietary dermatology platform.





MoleScope is a mini-dermoscope attachable to smartphones

DermEngine

DermEngine is an end-to-end proprietary dermatology platform offering

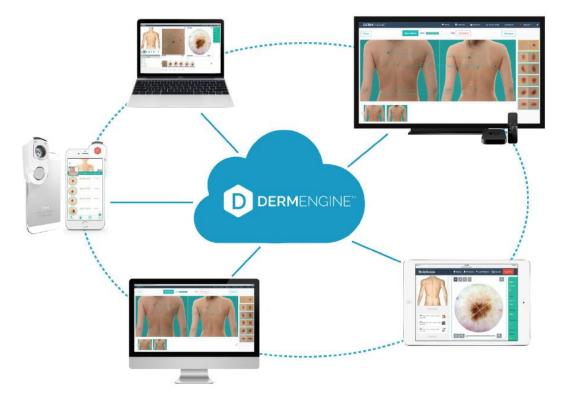
- Easy to use and advanced imaging tools
- Efficient clinical workflow
- Intelligent clinical decision support tools
- For diagnostics & therapeutics

- DermEngine offers a powerful ENGINE
 - For payers and providers
 - By leveraging their data
 - Using Machine Learning & Computer Vision algorithms



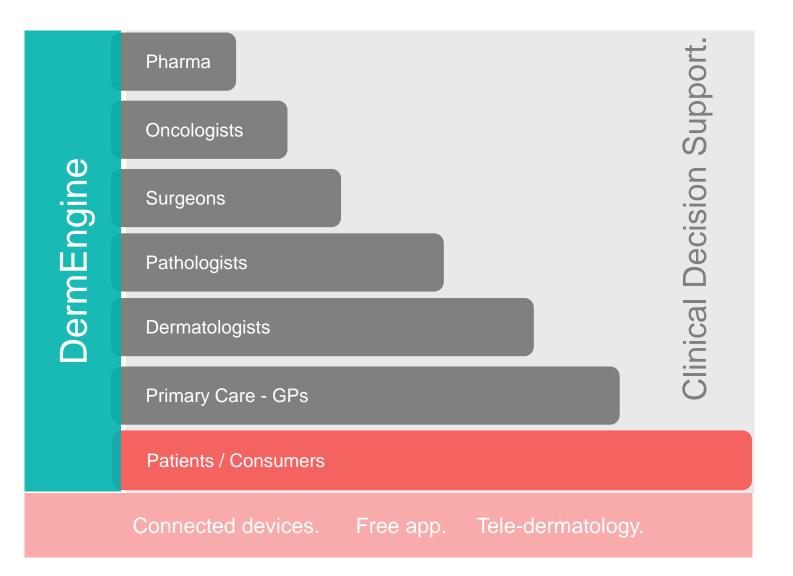


Cross Platform Connected Eco-system

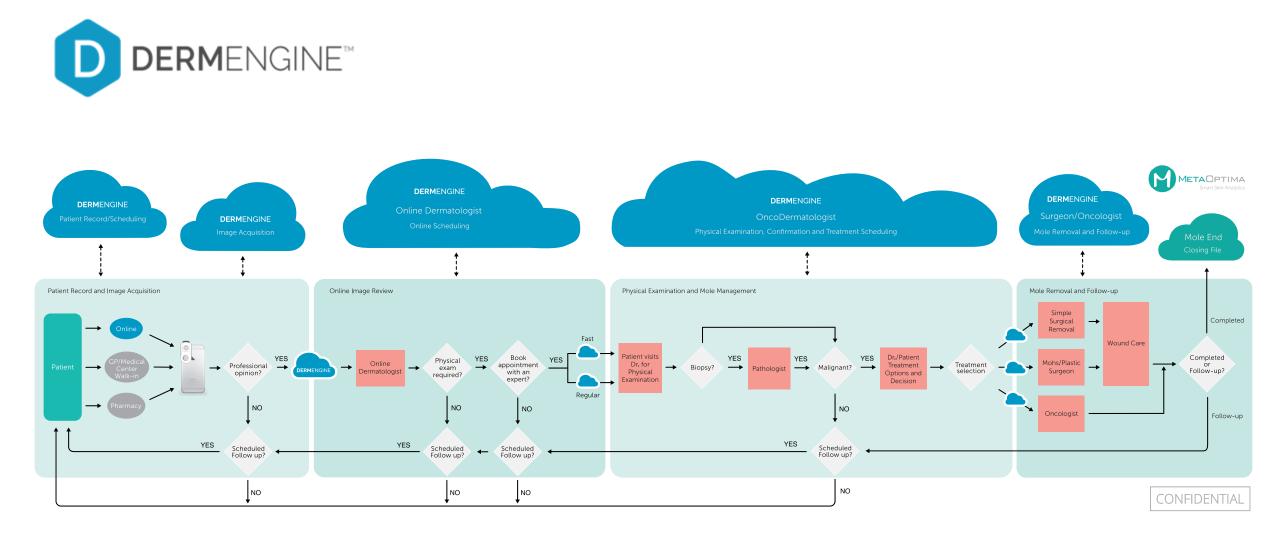




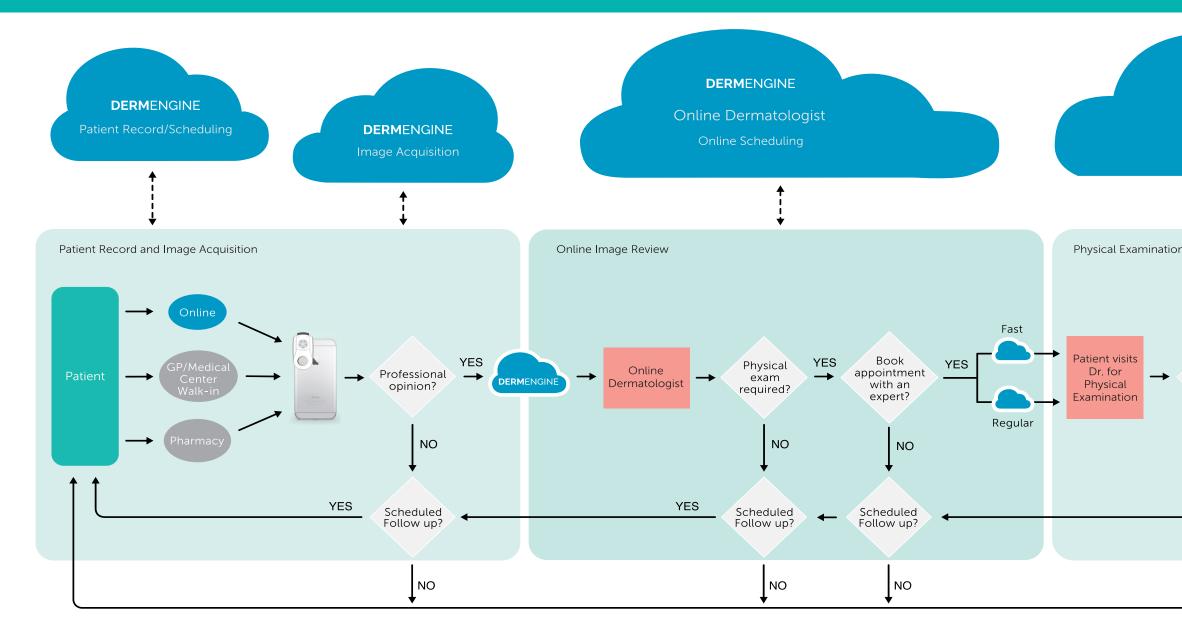
Vertical Integration of Artificial Intelligence



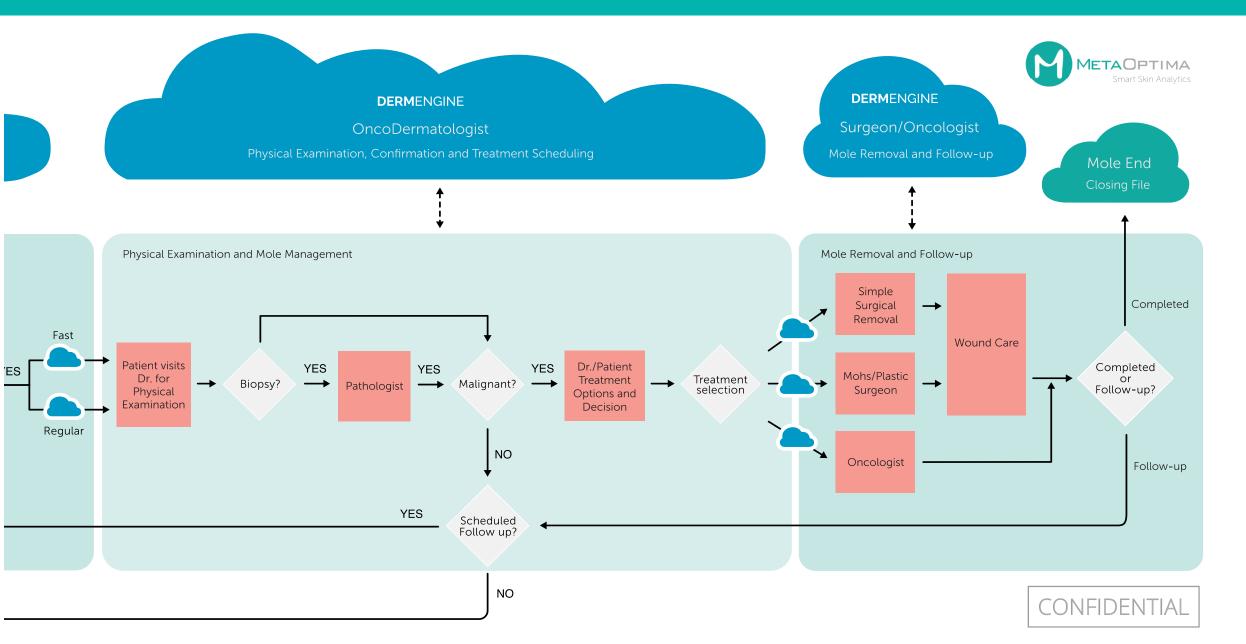




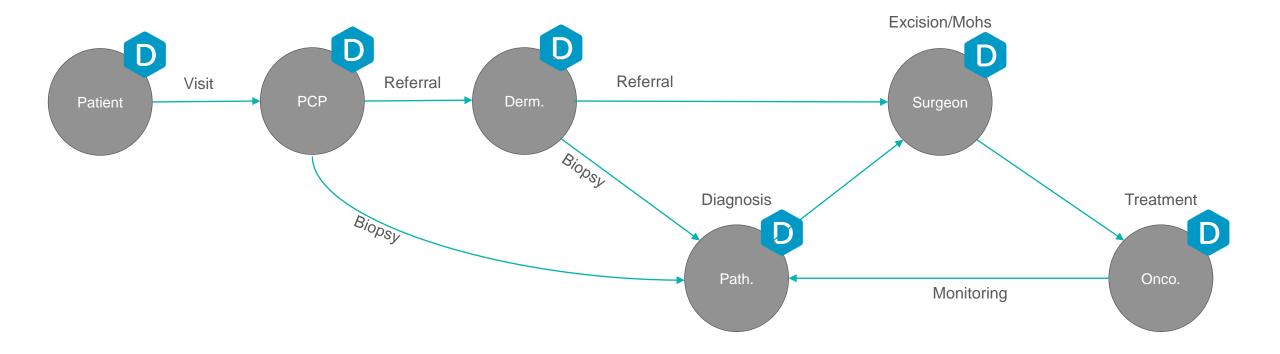
Ecosystem



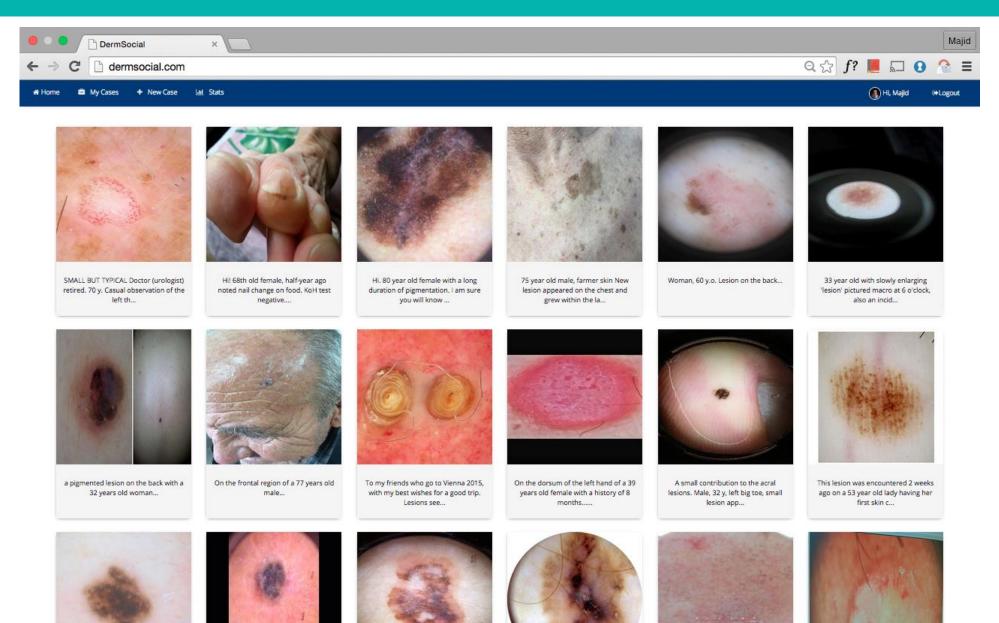
Ecosystem



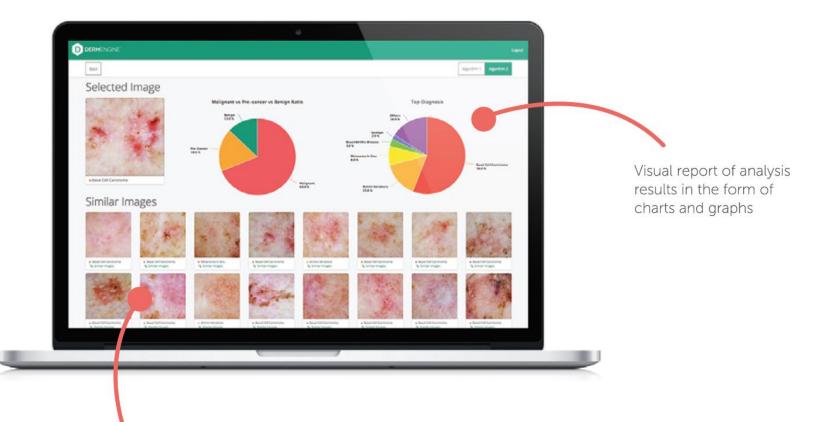
Patient Journey



Dermatology



Clinical Decision Support



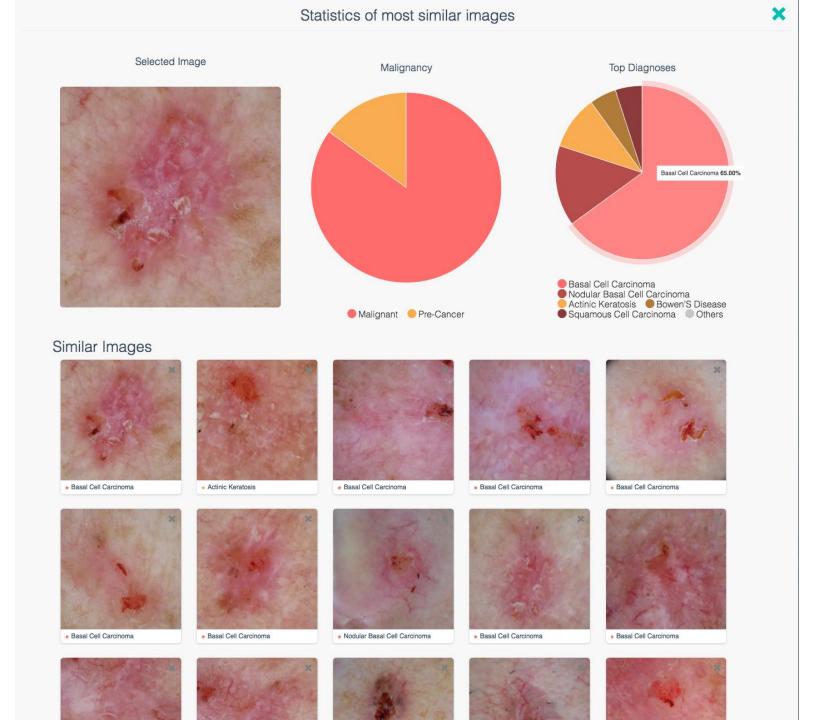
Find similar lesions automatically and compare side by side

DEEP ANALYTICS

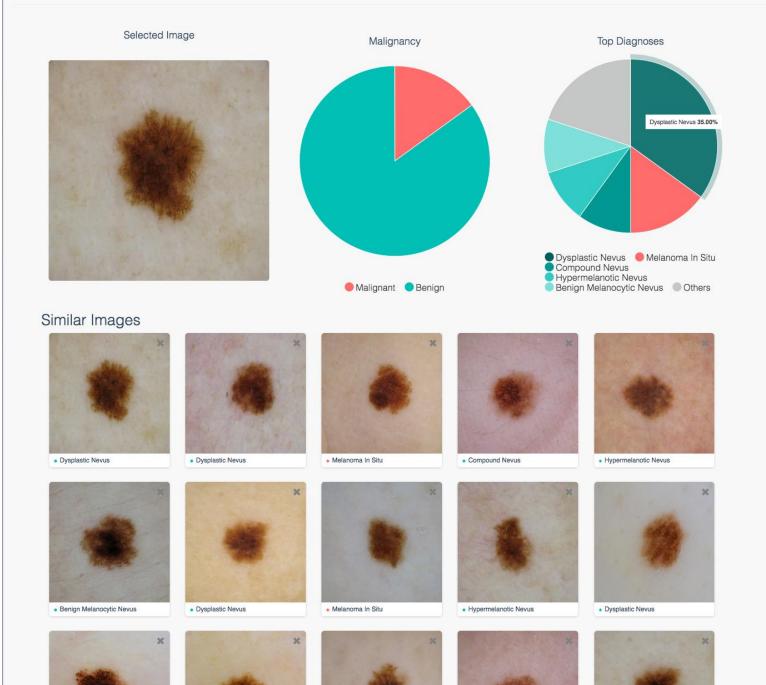
- Visual Search
- Evolution Tracker

Clinical Decision Support





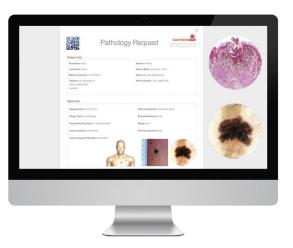


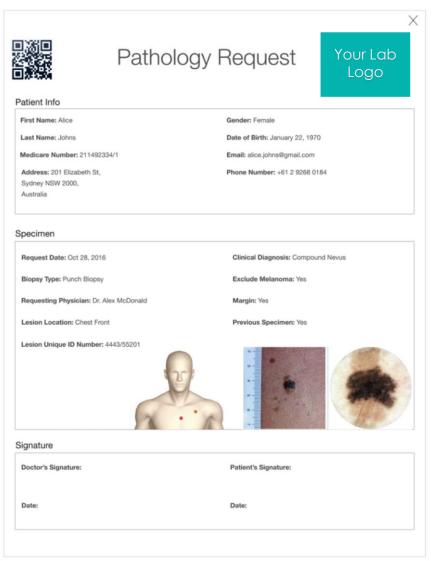


DermEngine Pathology Module

- Integration with Pathology lab systems
- Integration with major Practice Management Systems in AUS and NZ: Best Practice, Genie, ClinicToCloud, MedTech, etc.
- Integration with US Pathology providers is in progress

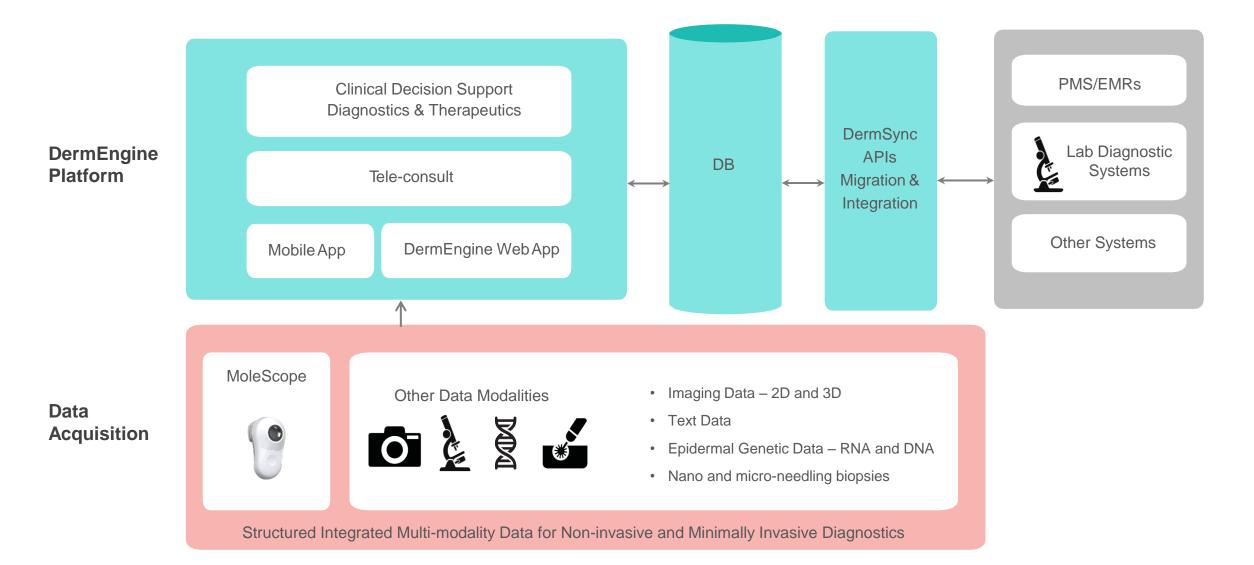




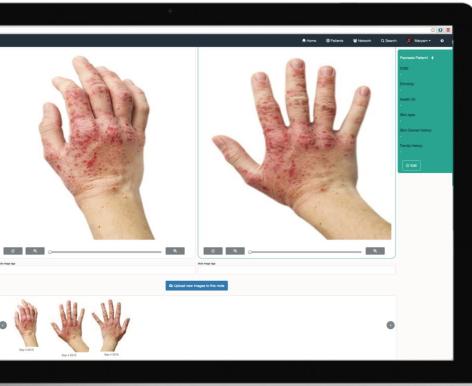


https://dermengine.com

The Engine



Chronic Dermatological Conditions









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@SFU alumna & @MetaOptima founder @Maryam_Sadeghi explains #app to track/treat pressure ulcers ow.ly/i/5Pecc @retconcepts #aging

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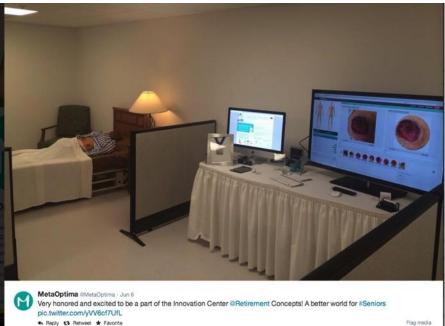
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Flag media

MetaOptima @MetaOptima · Jun 12 @FAS_SFU @sfu @retconcepts isn't it amazing? Our innovation will make a better world for #seniors #digitalhealth @CanadaDHH @MoleScope Details





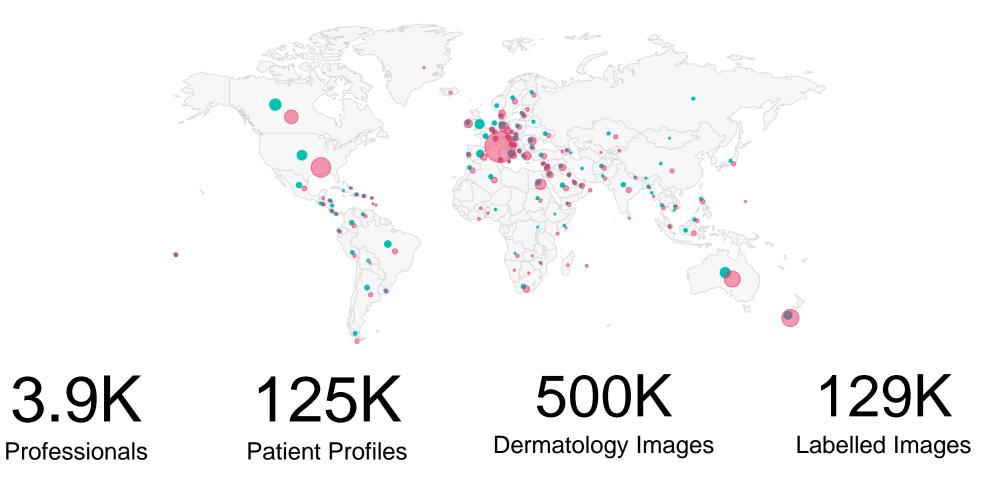
Regulation Roadmap

- HIPAA-compliant
- Regional data centers
- Visual Search will be exempt from FDA's Cures Act
- Class I for MoleScope
 - Health Canada, FDA, CE Mark, TGA (AU) and MedSafe (NZ) \rightarrow Done
 - Brazil, Mexico, Argentina → In Progress
- Class II for DermEngine diagnostics
 - ISO Certification → Done
 - Health Canada, CE & FDA → In Progress

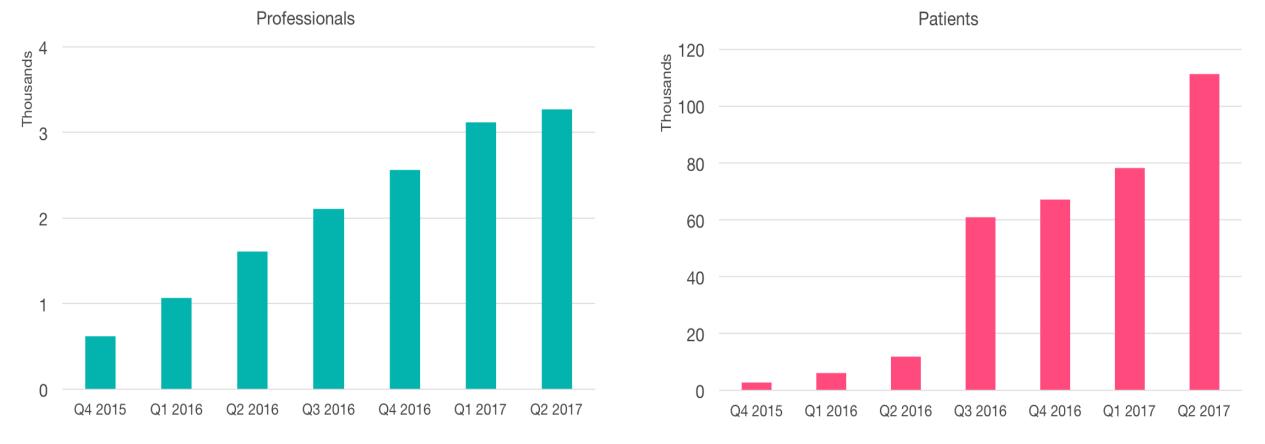


Traction

- DermEngine has the largest database of Skin Cancer images in the world
 - Gets bigger everyday physicians use the system



Traction



Pharmacy

Chains

HMOs, Hospitals, Clinic Chains

SunDoctors, Mount Sinai, Quebec Hospital, Sydney Royal Prince Alfred Hospital, Mayo Clinic, Cleveland Clinic, Kaiser Permanente, Aetna, Blue Cross, Geisinger, CIGNA, Humana, Ascension Health, UPMC, Highmark

L'Oreal, La Roche Posay, Henkel, Coty, Roche, Sanofi, Allergan, Valeant, Genentech,

Pharmaceuticals

J&J, Merck, BMS

Public Health

Federal Governments, Health Authorities, First Nations, Military & Veterans

Device + DermEngine Subscription + Service Transactions



Pathology Labs

London Drugs, Shoppers

Drug Mart, FamiliPrix,

Pure Pharmacy, Boots, Walgreens, CVS

> **SouthernSun**, Sonic, Quest Diagnostics, DermPath, AmeriPath

PARTNERS & CHANNELS



IDCP, **TeamMedical**, AmTech, Brazil, US, South Africa, Asia

Medical Device & Software

Companies

Philips, GE, IBM, McKesson, Canfield, 3Gen, **DinoLite**

EMRs and TeleMedicine

BestPractice, MedicalDirector, Genie, ClinicToCloud, MedTech, DermOnCall, Teladoc, Telus Health, Epic, Cerner

Customers

























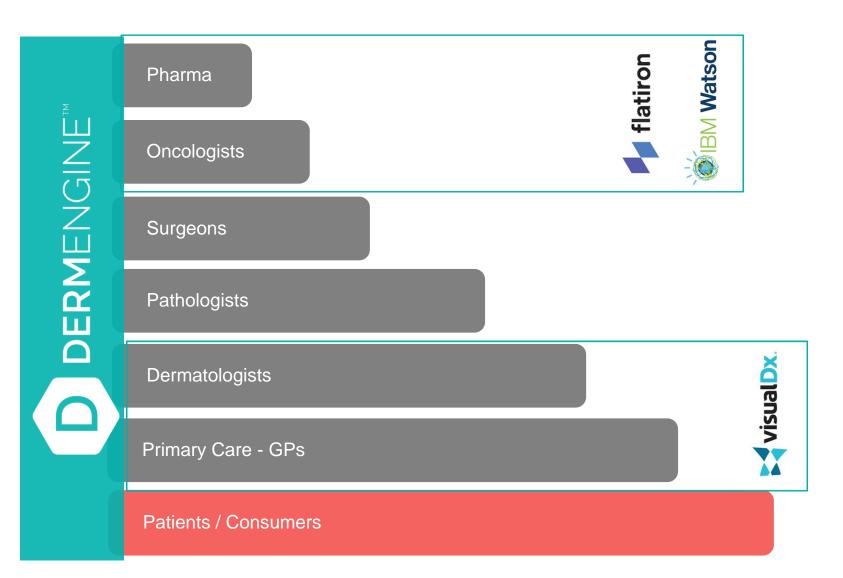






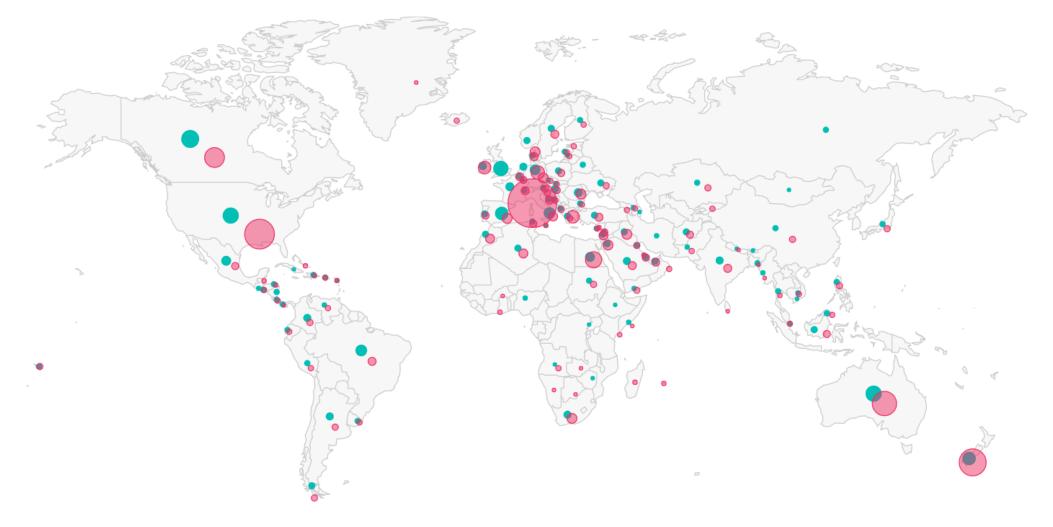


Competition



User Map

DermEngine Doctors & Patients by country



Dermatology eTriage in Canada

Problem:

- Canada facing shortage of dermatologists
- Long waiting time (8 months to 12 months) for dermatologist
- Referrals from GPs required, but there is no efficient referral solution

Solution:

- Empowering GPs and FPs at the front line of healthcare
- Using smart and secure solutions for eTriage in dermatology
- Efficient workflow using Integration with current EHRs/EMRs

DermEngine – Teledermoscopy Validation



Study Protocol

Study Protocol for teledermatology and teledermoscopy as tools to help general practitioners in effective eTriage of suspicious skin lesions prior to dermatology evaluation

AUTHORS : Joël Claveau, Marie-Pierre Faure, Stella Atkins, Josée Bordeleau, Simon Claveau, Maryam Sadeghi.

Abstract

Background: Teledermatology has the potential to improve skin health management through the regular monitoring of skin disorders and pigmented lesions by medical professionals. Although the benefits of utilizing Telehealth for improved telemedicine management have been extensively studied, the feasibility of using teledermoscopy to support skin management when connecting general practitioners with dermatologists has not been investigated thoroughly. This study aims to evaluate the use of teledermatology for remotely monitoring pigmented lesions and implementing a connected referral system for effective eTriage.

Methods: The study comprised of a connected platform (DermEngine) and its mobile application which was supported by a mobile dermatoscope (MoleScope). MoleScope was used by GPs to capture high quality images of the pigmented lesion, while DermEngine was used by them to refer the cases to a dermatologist at the regional skin cancer center. The dermatologist would have access to patient information through this system and provide an eTriage report. All communications and patient results were compiled and used for the final study.

Discussion: This is the first study to evaluate the the efficacy of teledermatology being used to optimize eTriage consultations used for pigmented lesions. If effective, this Teledermatology program has great potential to improve the referral system between general practitioners and dermatologists. **Protocol number**: eTriage-08-2015

Keywords: Skin cancer, Teledermoscopy, Teledermatology

Clinical Outcomes

- Effective e-triage of skin cancers
- Expert Opinion on a Secure referral network

ABSTRACT BODY:

Body: Access to dermatology is a big challenge in Canada. Following a visit to a general practitioner, the actual time delay to see a dermatalogist varies from 6 to 24 months. To help facilitate timely evaluation and prioritization of suspicious skin lesions by a dermatologist, we conducted a controlled trial on the efficiency of e-triage with teledermatology and teledermoscopy. A group of 23 general practitioners were enrolled and trained to use their iPhone and a MoleScope® device in the evaluation of a suspicious skin lesion. After obtaining patient's informed consent, clinical and dermoscopic images of one suspicious skin lesion were taken by physicians, incorporated in a specialized DermEngine eTriage module and sent to the dermatologist. A total of 312 patients were enrolled in the study and later evaluated by the dermatologist. The time delay to see the various patients was between 14 to 90 days according to the degree of suspicion. A total of 6 melanomas, 15 basal cell carcinomas and 8 squamous cell carcinomas were diagnosed in the study. Other benign lesions were acquired benign nevi, atypical nevi, seborrheic keratoses, angiomas and dermatofibromas. With the growing incidence of skin cancers, we are expecting a very high work load in the future and we believe new technologies like this one could bring optimized patient management and earlier diagnosis of cutaneous malignancies.



18-21 OCTOBER 2017 BRISBANE, AUSTRALIA

- Melanoma
- Keratinocyte cancer
- Merkel cell carcinoma



Dermatology Made



Contact

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