Summary of Competitive overview: ISP 9_Draft

ICAP M20

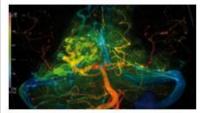
Competitive overview on Neurology

ISP	GE	Siemens	Toshiba /Vital	Relevant niche players
CT Brain Perfusion (+ summary maps)	CT Perfusion 4D Neuro	Syngo.CT Neuro (Volume) Perfusion	CT Brain Perfusion CT Brain Analysis 4D Olea Sphere	IschemiaView: RAPID
MR Neuro Perfusion (+ mismatch)		Syngo.MR Neuro Perfusion & Dynamics Syngo.MR Neuro Tumor		
MR Diffusion (+ FiberTrak)	BRAIN View	Syngo.MR Tractography		
MR iViewBOLD		Syngo.MR Neuro fMRI	Olea Sphere	
MR SpectroView	PROBE (acquisition, processing, viewing)	Syngo.MR Spectro CSI (and other research app's)		
MR Permeability		Syngo.MR Neuro Perfusion		
MR Subtraction				
MM AVA (for brain)	Autobone Vessel IQ Xpress	Syngo.CT Neuro DSA	CT Circle of Willis MR Vascular	
MMTT (for brain)	Integrated Registration	syngo.PET&CT Onco Multi-time-point syngo.MR OncoCare	Mirada Oncology Fusion MR Brain Tumor Olea Sphere: 4 brain tumor app's	
NM NeuroQ FDG (by Syntermed)	Cortex ID Suite	Syngo.PET Neuro DB Comparison		MIM Neuro
NM NeuroQ Amyloid (by Syntermed)	Cortex 1D Suite	Syngo.PET Amyloid Plaque		
NM NeuroQ EQuAL (by Syntermed)				
Multi-modality Viewer (MMV)	BRAIN View	Syngo.(MR) General Engine Multimodality 3D Routine Reading	Olea Sphere: Longitudinal Analysis Olea Vision	
Lobi	•		Olea Sphere Neuro -?	
NeuroQuant	Co-marketing (scanners, cloud)	9		NeuroReader, Quantib









AngioViz
AngioV s in a single infor iXR Viewing time (in MMV) under flow.



Autobone & Vessell Q Xpress
Autobor
provide MM ly
acces Advanced v tools
with V Vessel Analysis
angiog (AVA)



BRAIN View

MR Diffusion

CT Perfusion 4D Multi-organs

CT Perfusion 4D Multi-organs
Vs CT Perfus

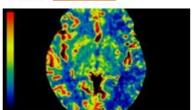
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MR nated CT Brain

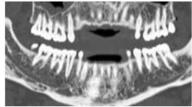
IViewBOLD yzing C Perfusion es

Ited to sti

Igiogenesis.



CT Perfusion 4D Neuro
GE's CT P
fast, ea nated
softwar CT Brain T
Perfus Perfusion d to
stroke a
angiogen



DentaScar

DentaScar

Oblique of reformation reformation dental image.



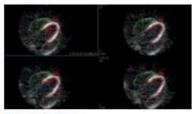
MR T2*

(Neuro)

Perfusion

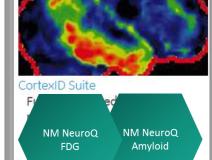
Dynamic Shuttle

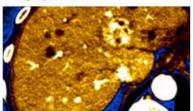
Dynamic Vides the ability MM visual Advanced in a d Vessel Analysis raphy exam.



Dynamic VUE

Dynamic optimur make optimur per ar NM Viewer provid and gat





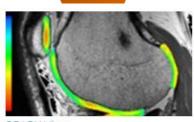
GSI Viewer

Gemstone Stactral Imaging
(GSI) is a novel and energy
application application in the dual energy
switchi energy
simultaneously.



Multi Modality Multi Modality
Tumor Tracking Viewer (MMV)

.



READY View
READY VI
most fre
exams Multi Modality
MR do Viewer (MMV)
images
get the
netric
vsis of



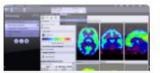
Volume Viewer
Vo'
O'
Multi Modality
Viewer (MMV)



Map me MR Spectroview single verifit imaging and visual ded to help characterize brain resions.

SIEMENS

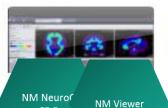




syngo.MI Neuro DB Creation



syngo.SPECT Striatal Analysis



syngo.SPECT Neuro DB Comparison



sync Pla NM NeuroQ Amyloid



syngo.MR Spectroscopy Research







FDG



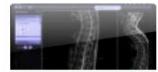


syngo.CT DE Direct Angio



















syngo.MR Composing

CSI synd

syngo.MR Spectro SVS

syngo.MR Spectro Extension

syngo.CT DE Brain Hemorrhage

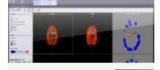


syng View









Subtraction



NM NeuroQ

EQuAL

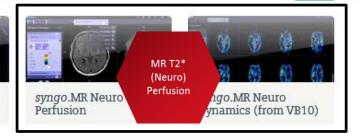




syngo.via General Engine





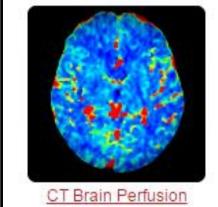


TOSHIBA Leading Innovation ViTAL A Toshiba Medical Systems Group Company

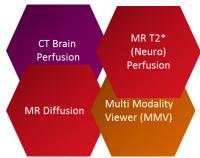


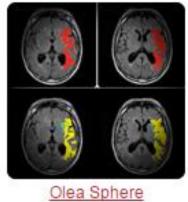
√Vitrea Advanced

CT Brain Perfusion





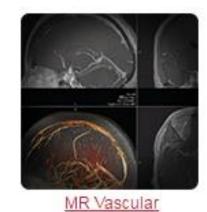




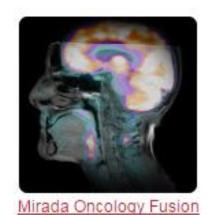




nere CT Circle of Willis













Summary: ISP v.9 NEURO portfolio

- Stroke
- **Brain tumors**
- Vascular interrogations
- Traumatic Brain Injuries
- **Dementia**
- Epilepsy (TLE)
- Surgical planning



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Longitudinal follow-up

10 Diagnosis Treatment decision Treatment assessment

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11 Diagnosis Treatment decision Treatment assessment Longitudinal follow-up

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12 Diagnosis Treatment decision Treatment assessment Longitudinal follow-up

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- Epilepsy (TLE)
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Diagnosis Treatment decision Treatment assessment Longitudinal follow-up

Additional neuro-focused materials

- 1. This presentation
- LoBI video clip (for internal use only!!!)
- 3. LoBI: White Paper on clinical utility
- 4. NeuroQuant™: Marketing Pack
- 5. Neurology Brochure
- 6. Neurology messaging guide
- 7. Two customer testimonials
- 8. RSNA: CME symposium by Dr. Wolansky (LoBI)
- 9. Webinar from March 2016
- And also: Neurology is highlighted in all marketing materials

















Competitive overview on NQ against others

Factoria		Nours Ou on t®	A40	Citations by Binefeeds	Neuroreader by	Quantity	
Feature		NeuroQuant®	MSmetrix by Icometrix	Cliniscan by Picofemto	Brainreader	Quantib	
General Morphometry Information		Yes	No	Unknown	No	No	
Hippocampal Atrophy Information		Yes	Yes	Yes	Yes	No	
Hippocampal Occupancy Score		Yes	No	No	No	No	
Hippocampal Volume Asymmetry Information		Yes	No	Unknown	No	No	
Whole Brain Atrophy		Yes	Yes	No	No	Unknown	
Multi-Structure Atrophy Report		Yes	Lesion Load only	No	No	No	
Triage Brain Atrophy Report		Yes	No	No	No	No	
Brain Development Report		Yes	No	No	No	Unknown	
Longitudinal analysis		Yes – multi-time point reports with follow up volume	Yes	Unknown	No	Unknown	
		measurements					
Cortical thickness measurements		No	No	Unknown	No	Unknown	
Age range for norms		3-100	18-96	No comparison to normative data known	Unknown Claim "FDA approved	No comparison to normative data known	
				udta kilowii	norms"	Hormative data known	
Predictive atlas Vnknown							
Dynamic atlas	NeuroQuant's main competitive advantages:						
Number of subjects in atlas					.0	nown	
Number of subjects in normative database	1. Greate	Greater body of scientific evidence and is much more tried & tested					
Scanner independence	2. Faster						
Quantitative data	3. Autom	Automatic reports, tailored to specific clinical questions/indications					
Fully automatic – no user interaction required		·					
		Automatic longitudinal analyses					
Ease of use	5. Norma	Normative age range 3-100y					
Speed of volumetric calculations	6. Dynam	Dynamic atlas (more accurate)					
Reports addressing a broad range of brain struc 7. Integrated in ISP, not a stand-alone niche solution					ted – only tissue sification		
510(k) cleared						5	

Yes

No FDA clearance

Yes

Yes

Yes

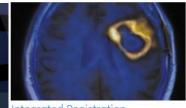
Assumed

CE marked

Reimbursement/CPT code

LoBI: competition





Integrated Registration

Integrated Registration provides you with the capability to fuse and register two volumetric acquisitions from either the same or different acquisition



LONGITUDINAL ANALYSIS

Embedded with unparalleled 3D registration between different time points, different modalities or different series within the same study, the Longitudinal Analysis plug-ins provide the optimum interface to efficiently track lesions and assess their progression over time.

Longitudinal analysis plug-in includes temporal subtraction, the advanced tool to assess the evolution of lesions between different time points, for an efficient follow-up of chronic conditions, i.e. tumors, multiple sclerosis, etc.



CT Brain perfusion: competitive overview

	PHILIPS	(ejg)	SIEMENS	A Toshiba Medical Systems Group Company	iSchemaView RAPID
Auto vessel		&		()	&
Volumetric					
Automatic ROI's				<u>()</u>	
Validated thresholds					
Delay insensitive					&
Fully automatic maps – direct to PACS					
Gray/White Matter separation				?	

Competitive overview on Cardiology

Cardiovascular AV Competition landscape

Scanner vendors:







Cardiac MR focus:





Enterprise AV, CT focus:



Cardiac CT procedure planning:





Siemens, Vital, GE

Philips main value points:

- 1. Integration to ISCV
- 2. Clinical Depth & Breadth
- **3. Continuous Improvements:** in house Philips solution. More control than on 3rd party like.



- AW (advanced workstation)
- Collaboration with Vioswork for 4D Qflow cloud service
- Cardiac MR: by Circle CMR42
- No decent MV support
- TAVI Basic; no automatic measurements
- No DMP (Dynamic Myocardial Perfusion)
- NM: No Corridor
- CT AVA: no stent planning, no ASC
- MR AVA: nice solution, available only on workstation. Separate MR\CT app



- syngo.via
- Released new CT Myocardial Perfusion (like DMP)
- CMR: Partial. No T1 mapping in Syngo.Via, only on scanner
- TAVI: no automatic measurements, only annulus detection; subtraction of aortic calcifications
- Plaque analysis- only on Research environment
- AVA CT: good preprocessing mechanism; results are hard to edit.
- AVA MR: only viewing; separate app



- Vitrea
- 3D printing collaboration with Stratasys
- Cardiac MR: by Medis QMass/QFlow
- TAVI: only Aorta segmentation, no auto measurements
- No DMP
- Vascular: nice one click extraction, no Auto bone removal; Use subtraction (2 scans)
- NM: No Corridor & Emory
- No NM planar cardiac applications

Careful here!
Be proud here with ISP!



Tera, 3mensio



- Focusing on Enterprise viewing, IT proposition
- Committing for full MV support
- TAVI: no automatic measurements
- Limited MR Cardiac, simple analysis (coronaries), no segmentation
- No DMP
- Vascular: Considered a very strong solution, but mostly for interactive; for MR only basic viewing
- NM: No Corridor & Emory
- No NM planar cardiac applications



- 1.Integration to ISCV
- 2.Clinical Depth & Breadth
- **3.Continuous Improvements**



- Focused solution for procedure planning for Vascular and SHD (structural heart disease)
- Strong SHD solution; Strong TAVI solution; Semiautomatic Tools for Mitral and LAAO
- **Business corporation with Medtronic**
- Vascular: No Automatic bone removal; Nice Stent planning workflow and templated reporting
- pre-op simulation of the optimal C-arm



- FDA 510k approved
- Offers CT-FFR as offsite service
- Pay per use ~USD 1500/case





Dedicated CMR Competitors

Philips main value points:

- 1. Modality business
- 2. Broader clinical coverage
- 3. IT horizontal strength

Medis is:

- Medis Suite: QMass, QFlow
- User-friendly interface
 - Tab-like
- More research oriented and numerous publications
- Broader quantification portfolio
 - Myocardial salvage calculation
 - Validated T2* measurement
 - VN ECV measurement
 - More background corrections in QFlow
- Advanced research module: Qstrain (Feature Tracking)
- Structural report
- Efficient multi-vendor support

But we are:

- Better hanging protocol for viewing
- Superior 3D heart scene.
- Strong MRA analysis capabilities
- CTA in Medis is only in research module.
- Enterprise configuration; scalability

Circle is:

- CMR42
- More advance quantifications
 - Scar 3D visualization
 - More background corrections in flow
- Advance research modules:
 - Tissue Tracking (Strain)
 - 4D Flow
- Comprehensive reporting module
- Efficient multi-vendor support
- iOS supported
- Team up with GE

But we have:

- Automatic LV segmentation with auto propagation
- Rich viewing environment and comparison of series
- Automatic whole heart segmentation & editing tools
- More comprehensive MRA tools
- Stronger CT CV tools
- Enterprise configuration; scalability





Medis



Thank you!