

In Sweden – dementia and loneliness

In 2019 150,000 people have some type of dementia – an additional 25,000 people are diagnosed yearly.

2.6 million people are currently over 60 and 35% of them live alone.

Dementia forecast here and globally

Sweden 2030: 188 000 and 2050 253 000, counting only individuals over 65, younger than 65 data is currently unknown.

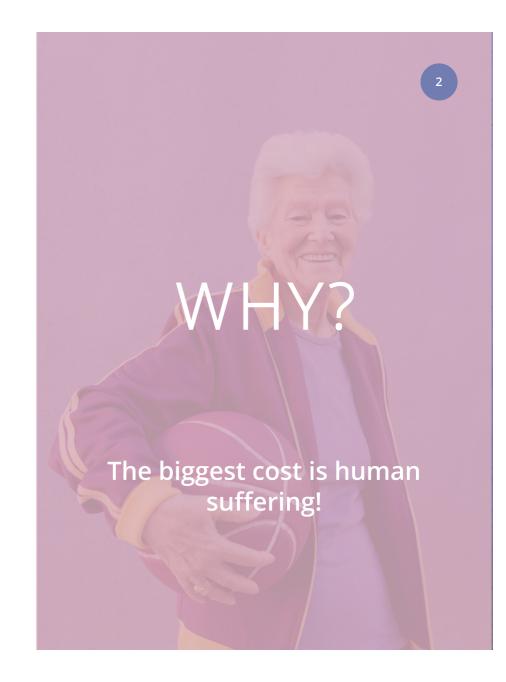
Globally: Currently at least 55 million people live with dementia, projected to grow to 75 million by 2030

Prevention – all of us are at risk

We aim to not only help and slow down regression of those diagnosed with some form of dementia but also to help and prevent with those at risk. Dementia affects next-of-kin greatly, resulting in lower quality of life and suffering.

We are already spending billions

In Sweden (2019) projected to 81.8 B SEK (\$8.5B) distributed over municipalities 66.8 BSEK, Regions 1.3 BSEK, next-of-kin care 12.5 BSEK, and other indirect costs such as sick leave etc. an additional 1.0 BSEK.



THE PROBLEM

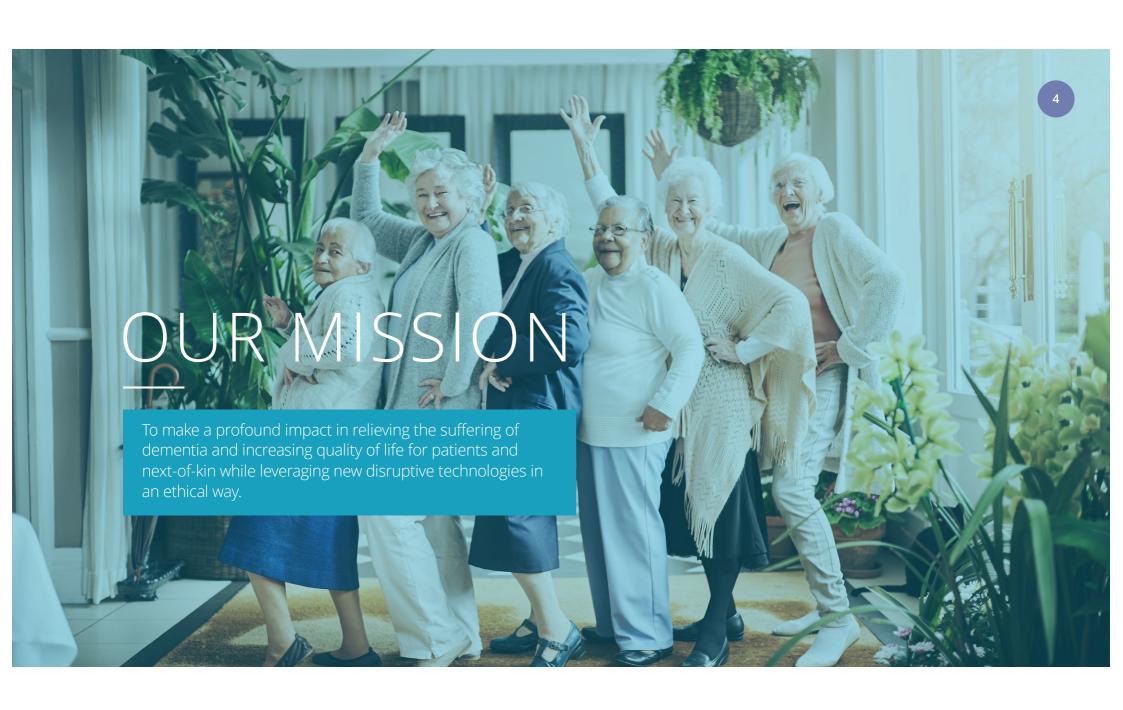
Dementia

Dementia is a growing challenge for humanity. Pharmaceutical remedies have so far not been successful- We know that conversational therapy works but is not at all scalable since it requires experts to perform the interviews. Experts such as dementia researchers and medical professionals. The conversation is also time consuming and needs to be frequent – making it expensive as well.

Loneliness

Loneliness adds to the challenge. We know that loneliness increases the risk of dementia and accelerates the decline. Loneliness is also a quality-of-life issue that affects too many in our society. There are many reasons and loneliness is often unforeseen by the individual, leading to depression as well





WHY NOW?

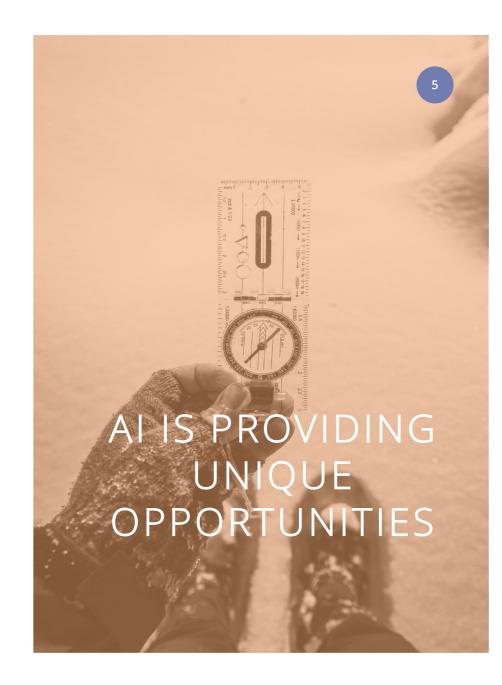
As tech entrepreneurs, communication experts, and business leaders, we've observed the convergence of research and disruptive technologies.

These can address a significant problem facing our aging population: dementia in its various forms and its precursor, loneliness. Close relatives to us are affected.

Research indicates that activities and exercises designed to stimulate thinking, concentration, memory, and communication skills can significantly slow the progress of dementia. Despite advancements in pharmaceutical treatment, there's a growing need for such interventions.

At the core is the meaningful, purposeful, conversation. We believe technology can assist in creating it at scale.

In modern society, elderly individuals often spend more time alone than is healthy or desired. We aim to develop a costeffective treatment method to not only address dementia but also improve the patient's quality of life.



THE SOLUTION

The Meaningful Conversation

At the core of what we do is to create "the Meaningful Conversation". A conversation that is "healing", is interesting and makes sense, and has a purpose, both for patient, care giver, and next-of-kin.

Interesting

To be meaningful the conversation needs to be interesting and vibrant for the patient. We achieve this with assistance of Al and access to external data sources in real time during the conversation.

Healing

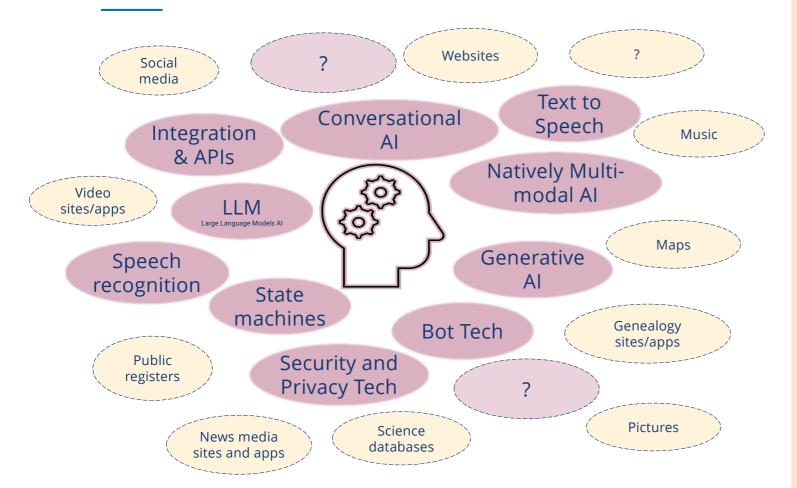
By guiding the conversation, we will be able to "jog" the brain and train the cognitive abilities with the goal of slowing down the progress of the disease. It can also help the patient to train executive abilities. Next of kin and caregivers can find comfort in that the disease slows down, and that the patient is feeling better..

Purposeful

The conversation has many purposes. It serves to prevent and slow down degradation of cognitive abilities and to increase quality of life. It can potentially also provide data and information for diagnosis and research and create value in its own.



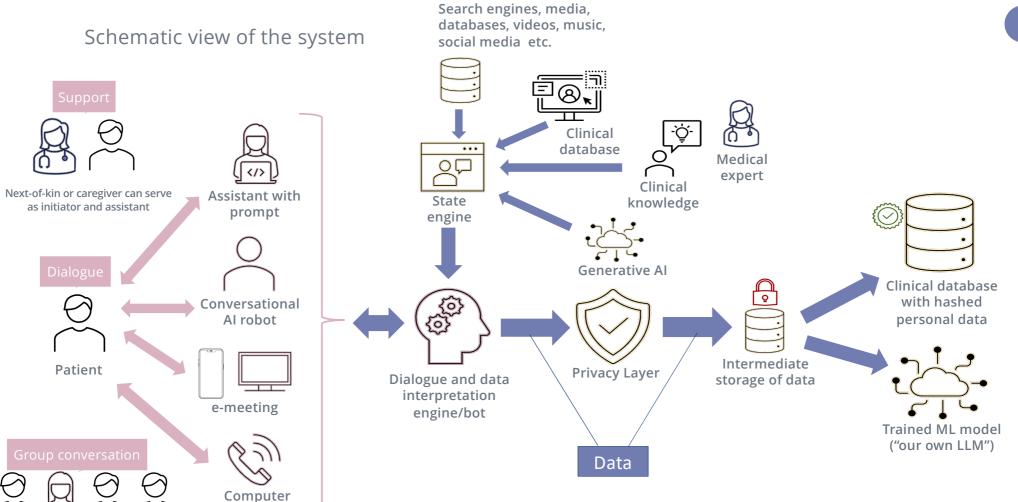
THE TECHNOLOGIES NEEDED ARE AVAILABLE



The technology is developing at a break-neck speed. New tools based on, or developed by, new Al tech makes previously impossible solutions possible.

Our solution is a unique, aggregated, collection of existing and disruptive, technologies.

Integrating relevant content from websites, media and databases into the conversations.



Potentially also help ignite and stimulate group conversation

generated voice

TIMELINE

In partnership with researchers test the first iteration of the solution Scaling Scaling in Europe, expanded partnerships

Team and Start (Q3 2024)

Research, scope solution and business model, partnering, secure first funding

General availability (Q2 2026)

Stable solution and organization able to serve the first markets (Nordics)

Expansion

Trusted brand and premier value creator for patients and health care in the field of non-pharmaceutical dementia treatment

INITIAL TEAM

Our goal is to retain a great team of motivated individuals. A team that can take the vision to reality and do it quickly. A team that is diverse in background and skill set and equal in gender balance.

Katy White

Business Developer / Project Manager

Leads the team and implements the plan.

Responsible for commercial activities and clients

James White

Dementia Expert

Our medical expert and interface to research

Sandra White

IT architect

Responsible for designing the solution



INTERNATIONAL RESEARCHERS AND EXPERTS ON OUR RADAR AS POTENTIAL ADVISORS



Dr. Rachel Gali Cinamon

Tel Aviv University, Israel

Focusing on the development of virtual agents for supporting individuals with dementia and their caregivers



Dr. Wendy Moyle

Griffith University, Australia

Investigating use of conversational agents and virtual reality interventions for care and improving the well-being



Dr. Frank Rudzicz

Dainousie University, Canada

Conducts research on natural language processing and conversational Al to assess cognitive decline due to dementia



Dr. Jesse Hoey

University of Waterloo, Canada

Use of conversational agents to support social interaction and engagement for individuals with dementia.



Dr. Gita Sukthankar

University of Central Florida, USA

Research on Al-driven conversational systems and applications in healthcare, including dementia care and monitoring



Dr. Nicholas T. Bott

Stanford University, USA

Researching the use of conversational Al and virtual agents to support cognitive rehabilitation and daily living activities for individuals with dementia

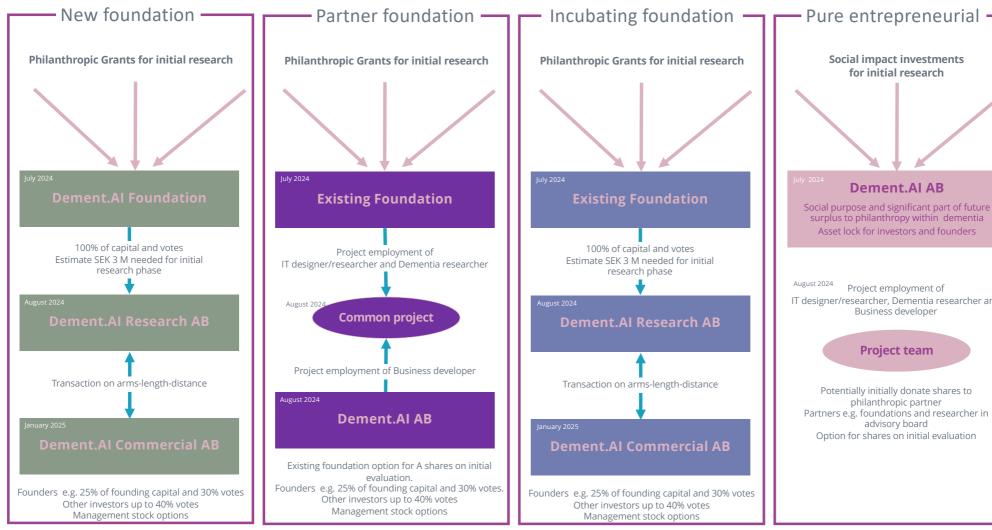


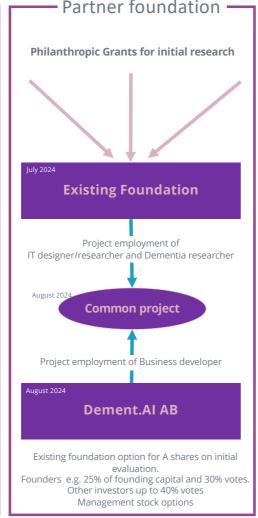
Dr. Suzanne Martin

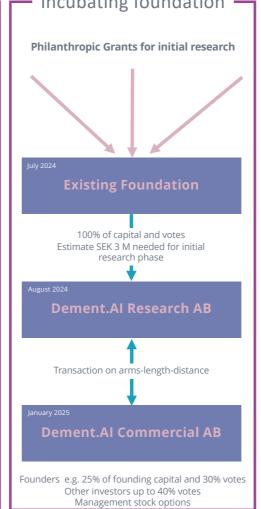
Ulster University, Northern Ireland

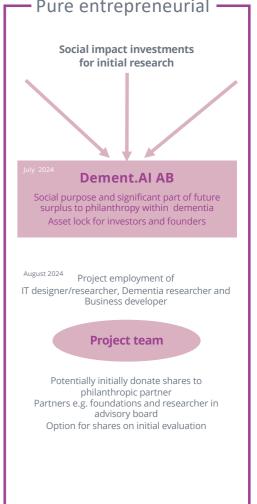
Use of virtual agents and chatbots for personalized support and interventions for individuals with dementia

Optional social entrepreneurship setups and financing models













Abraham Lincoln



WWW.DEMENT.AI



ADDRESS

Arena Sergel Malmskillnadsgatan 36 Stockholm, Sweden



E-MAIL

info@dement.ai <u>per@dement.ai</u> <u>anders@bylundadvisory.com</u>



MOBILE

Per: +46 705 861682 Anders +46 761 919171

