NORDIC HEALTH RESOLUTION

Health100 upgraded*

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Hanasaari Culture and Conference Center

The views expressed in this document do not necessarily represent the personal opinions of the individuals mentioned in or their affiliated institutions.

INTRODUCTION

On the 2nd of October 2019, a group of Nordic Health innovators gathered at the curated unconference Health100 to discuss how we can create the best possible healthcare in the Nordics.

This year's focus was set on the already foreseeable future: the challenges, opportunities and strategic steps on how to implement concrete health innovations into practice. The event was held in the format of a curated unconference, an engaging and interactive event format, where the attendees set the agenda and discussion topics.

This Nordic Health Resolution is a summary of key takeaways and action points discussed during Health100. The contents of this resolution comprise of eleven topics that were discussed during the event. The goal was to accumulate the collective expertise, knowledge, and experience during the sessions and to identify possible action points on how we can continue to work together on the questions raised.

Health100 was organised by Upgraded – a Finnish non-profit association for health startups and innovations as a part of a larger joint project "The Future of Healthcare: Sustainable and Smart today" together with Nordic Center for Sustainable Healthcare, DTU Business, funded by Nordic Innovation. The project aims at spreading the knowledge of the Nordic sustainable and smart solutions, and to bring the Nordic knowledge and solutions to the global market.

The text of the Nordic Health Resolution was composed by Upgraded, based on the summaries of the Health100 sessions, topic-host's key takeaways and insights collected through the web-based co-creation tool, Innoduel.

Website: www.Upgraded.fi/Health100
Contact: Health100@upgraded.fi

PARTNERS

Nordic Innovation

Pfizer

HEALTH CAPITAL HELSINKI

Fazer

Fazer Brainhow®

DATTACA LABS

NCSH Nordic Center for Sustainable Healthcare

BiotechClub.fi

DTU Business
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CONTENT

ENTRY BARRIERS

KEY TAKE-AWAYS:

HOW CAN WE OVERCOME THE BARRIERS OF ENTRY FOR NEW FORMS OF TREATMENT AND SMALL HEALTHCARE PROVIDERS?

Creating additional barriers for new forms of treatment and small healthcare providers stifles innovation and progress. What kind of entry barriers are there, and how do we overcome or lower barriers of entry to public health care services and the employer healthcare market?

- We should form a holistic picture of barriers and identify those we can impact. Many of the barriers are political in nature; we need to lobby the decision- and lawmakers. Eco-system organisations can play an important role in this and help to forward the statements. We also should identify the barriers that can be eliminated without any political influence by us as a community, enabling access to information and changing mentalities.

- Regulatory and compliance issues are a significant overhead for small players. Changes in MDR, such as allowing more flexibility for specific categories, e.g., devices for treatment of rare diseases, need to be implemented on the EU level. At community level, we can improve access to knowledge of regulations, and make sure such information is also available for the small companies, from the outset.

- Healthcare industry structure with its too heavy vertical integration, third-party payer system, lack of holistic responsibility, cost-minimization incentives, public sector reimbursement models and conservatism of healthcare professionals favouring own company services are making it difficult for

specialised companies to come into the treatment paths; thus leaving no room for completely new solutions.

- The healthcare industry needs more agile experimentation and adaptable scalable business models. Public sector policies should be changed to make purchases from small local startups easier.

- Development of healthcare innovations is capital intensive, and access to finance, as well as understanding business models and terms of financing, are always an issue. Sharing more information on how much funding is actually needed and what is the sustainable rate of dilution for a company from the early phases onwards could be a community solution to this barrier.

- Overall mindset and cultural barriers are strongly related to, and, underlying other barriers. We need to focus on the bigger picture of patient treatment processes, instead of concentrating on individual parts of it, and don't go in silos of rigid treatment categories and should take a holistic approach to human healthcare.

- The most significant entry barrier is our own lack of hope: startups should not accept or take the victim role. We should actively interact with healthcare organizations and question the status quo, as well as measure the outcomes

and discuss them more to develop clinical practices.

ACTION POINTS

1. Share knowledge, help out and spar inside the community.

2. Shift the discourse and vocabulary to change mindset and avoid victim mentality.

3. Move towards agile experimentation and create adoptable and scalable business models.

PREVENTION

HOW CAN WE BETTER PREDICT, MONITOR, AND REDUCE WORK-RELATED STRESS AND RELATED HEALTH CHALLENGES?

What are the best tools and practices for the screening of work-related stress? Work-related stress does not have a diagnosis number, and therefore it might be challenging to estimate the prevalence and start the preventive interventions.

Patient data may provide valuable information and indicators of work-related stress, e.g., Terveystalo data of 1,2 million people shows that mental health problems have been increasing strongly as a cause for sick leaves in people under 50 years of age.

- The definition of stress varies and is affected by, e.g., individual ranges and limits of stress, country, work culture, work environment, generational differences, and the individual circadian rhythm.

- The causes of stress within working life are varied; some of these include job insecurity, lack of opportunities, and lack of respect but also high work engagement and motivation. Causes of stress within working life should be dealt with at the workplace.

- What markers should be used to screen work-related stress?
  - Individuality is key. It is essential to identify markers and indicators of stressful behaviour that are relevant for an individual.
  - External and internal monitoring and evaluation are needed. Markers that enable peer support by having co-workers and family to evaluate the stress of an individual, and through that offer support in stress management.

- Big data can be used as a tool for helping tailor individual markers.

- Key points about the use of technology as a tool to prevent work-related stress:

  - Not only about measuring stress levels, but also about inspiring into action to reduce stress.

  - Personalization of technology.

  - Less is more, keep the technology simple for the user.

  - Use evidence-based design.

  - Technology should be able to adjust to changes in motivation, health status, and personal goals.

  - Technology is not enough. Personal assistance and consultation are needed.

  - Technology should be part of daily life and integrated into daily routines.

  - Feedback personalized and positive. The user should be rewarded and feel the benefit of getting knowledge in an actionable form. Make it visual so that the individual will quickly find the relevant points.

  - Remember the drawbacks of technology. Technology can itself become a cause of stress and create addic-

tion. We should avoid the addiction to the feeling or emotion of stress; for some people, that might be the feeling of being productive.

ACTION POINTS

1. Higher management to be more involved in stress management. Supporting a healthy work engagement and rewarding employees for healthy work-life balance.

2. Working cultures should be transformed together through collaboration.

3. More personalized solutions.
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ROLE OF PHARMA:
THE MINDSET AND STRUCTURE
OF THE HEALTHCARE ECOSYSTEM
– WHAT ARE WE AFRAID OF?

Healthcare is a vast ecosystem comprising of key players such as public healthcare provider organizations and pharmacies but also of many other important stakeholders, such as patient organizations, technology companies and the pharmaceutical industry. To ensure optimal efficiency and maximum patient benefit of the ecosystem, the roles of each stakeholder need to be clear and maybe even evaluated regularly. One of the key opportunities in a more digitized ecosystem is to find new and more efficient ways to measure the value of treatments more comprehensively. What is the current role of the pharmaceutical industry in the healthcare ecosystem? What should and could the role be?

- The healthcare industry is under a revolution of digitalisation and a movement from "sick care" to prevention and towards personalised medicine. Also, the evaluation of healthcare is moving from measuring volume to value, but what exactly is "value" and how should it be measured?

- The pharmaceutical industry and corporates operating in this area have a major role in the healthcare industry, but the clarity of their role (now & in the future) and their position in the ecosystem needs clarification.

- Health Solutions Startups provide a wide range of ideas and innovations, but their resources are very limited. Pharma has vast networks, insights, and resources for scaling innovation, research, and development. These resources of pharma should be put to better use in collaboration with startups and with the whole healthcare ecosystem.

- The key opportunity for better ecosystem collaboration is wider and better data utilization and integration. Regulation and data privacy should be protected, but strategic data collaboration still provides the biggest area of im-

provement in the holistic care ecosystem.

- One of the major challenges will be the interoperability of medications, electronic health records, health tech apps and devices. Also, doctors prescribe medications to patients, but who decides which digital solution or an application should be recommended for each patient?

- Open source has been successful in the software industry for up to two decades now, but it is not yet a norm in healthcare. In order to provide better solutions for the patients, pharma, as well as other ecosystem members, should consider open sourcing their insights and data, for furthering the development of treatments.

ACTION POINTS

1. We need open discussion and clear determination of all stakeholders' role in the digital health ecosystem.

2. Pharma should consider open sourcing their insights so startups can utilize the information in developing better solutions & treatments.

3. Interoperability of new solutions is key.

4. Data integration and real-world evidence creation for measuring the value of digital solution's impact should be golden rules for future ecosystem collaboration.

SUSTAINABLE HEALTHCARE

HOW CAN WE MAKE SUSTAINABLE HEALTHCARE PROGRESS IN THE NORDICS MATTER GLOBALLY?

To matter globally, we need to accelerate, export and implement what we do in other countries. An installation at one hospital doesn't matter globally, but how can we get 200 other hospitals to copy and paste it?

- Sustainability in healthcare is a very complex area, involving many different stakeholders, which makes it crucial to have a clear focus. It is essential to understand which stakeholders are more important than others. New Nordic hospitals, should be seen as role models in implementing new technology to create a good home market.

- Sustainability is high on the agenda for hospitals, especially when it comes to reducing the carbon footprint. Sustainability is much easier to implement in newer hospitals than in old ones.

- There is a need for standardization of sustainability solutions in hospitals.

- We need to raise awareness in the Nordics that we are good at sustainability. We should work a lot more with social media on spreading the knowledge about Nordic progress within sustainability.

- Nordic collaboration is necessary. The Nordic brand is strong within sustainability and is something that should be used.

Can we create a Nordic label or Nordic certification of sustainable products and services?

- Procurement is a powerful tool – and is something that can be used to get innovations on the market.

- Funding is critical – both internal for the hospital to invest in new technology, but also external to go to different new markets.

- We need to make collaboration between hospitals and companies easier. One fundamental question is how to make use of hospital based competent personnel, as hospital employees are the ones with the most knowledge about sustainability in healthcare. If someone needs that competence, how do we attain it from the hospital?

- What is it that we want to sell to the world within sustainable healthcare? We need to decide if it is tech, practice, or knowledge.

- It is important to link sustainable healthcare to the sustainable development goals, so that everyone speaks the same language.

- Sustainable healthcare is now one of the four prioritized export areas from the Nordics as per the latest report by the Nordic Ministry Council; thus there will be a lot of activities within the next year in sustainable healthcare.

ACTION POINTS

1. Raise awareness in the Nordics, that we are good at sustainability.

2. Make collaboration between hospitals and companies easier.

3. Find a way to extract the knowledge and competence regarding healthcare sustainability from the hospitals.

SUSTAINABLE HOSPITALS

HOW CAN WE MOVE TOWARDS MORE SUSTAINABLE AND CIRCULAR HOSPITALS AND TACKLE THE PROBLEM OF WASTE?

In spring 2019 a cooperation network for Finnish hospital districts was established to develop more sustainable procurement procedures for the hospitals. One of the recognized common goals is waste reduction and recycling. Key questions under discussion have been: how to prevent and reduce waste by means of smart procurement, and how to invest in circular economy and enhance recycling.

- Helsinki University Hospitals generated around 8 500 000 kg of waste in 2018. A significant amount of plastic waste comes from various medical processes and ends up in mixed waste. There are similar problems in other Nordic countries.

- Waste minimization is a top priority. Waste generated in the operation theaters is around 10kg per patient/operation. There is a need for a change from disposable to reusable: multi-use towels, gowns, single-use metal instruments, and redesigned surgical kits.

- There are seven different types of plastics, and they are not separated into seven different bins. Doctors and nurses do not have time to focus on waste sorting. We need to reduce the number of types of plastics used in the hospitals. There already are existing hospitals in Sweden and Norway that are PVC-free – the type of plastic that can't be recycled, but has to be destroyed because it is chlorine-based.

- We need to partner up with academia to have more evidence-based knowledge of plastics used in healthcare industry. At the moment, healthcare professionals rely on

knowledge generated decades ago.

- Infection control is of key importance in an operation theater. Hygiene experts always try to identify risks in everything, but only doctors can determine the amount of tolerable risk.

- We should work on behavioral change by creating the right infrastructure and atmosphere. Doctors and nurses should be listened to, and it should be made easy for them to do the right things, e.g., to not open unnecessary packages or how to sort waste. We could benefit from an updated set of case studies or educational videos.

- There are different systems in various Nordic countries. Some are sorting plastics into separate categories, whereas others are dumping everything together for the waste services to sort. Should producers pay for recycling? In Sweden, commercial waste is included in producer responsibility act, but still the problem persists. We need to address the manufacturers' responsibility for recycling plastics throughout the EU.

- Smart procurement could be used as a key tool to reduce the amount of waste and various kinds of plastic. We need to facilitate the exchange of best practices amongst procurement organisations, for example, by creating a product specification database for sustainable hospital procurement.

- We should create more public-private partnerships and send coherent and predictable signals that will help suppliers make the right investments in sustainability, e.g. by creating and sharing sustainable criteria of procurement.

- Sustainable solutions exist in the Nordics but they are developed and implemented in silos and are scattered in different hospitals. We should enhance Nordic cooperation, e.g. by creating a joint database for procurement and by copying the best cases and scaling them up.

ACTION POINTS

1. Create public-private partnerships and partner up with academia.

2. Enhance Nordic cooperation, e.g., by creating a joint database for procurement.

3. Copy with pride. Pick the best cases and scale them up. Don't reinvent the wheel.

4. Use smart procurement as a key tool.

COLLABORATION

HOW DO WE EMPOWER CARE COLLABORATION IN THE NORDICS?

The key actors of Nordic healthcare, such as healthcare providers, companies, innovators, frontrunners, funding and -supportive organizations, as well as, researchers should be brought together to emphasize Nordic Health and Wellbeing. Instead of national ecosystems and competing networks, we can develop global, market-leading solutions and boost the business for many SMEs in the Nordic countries.

- Startups in the Nordics should see themselves as a combined strength under the global health sector, especially when attracting investments to the Nordics. Startups need to put their strength together, and team up with the closest ones and, when possible, with competitors, too. They need to do that to be bigger and to attract more investment to the Nordics.

- All the opportunities in the Nordics should be utilized. Therefore, it is vital to utilize the pull-effect when international investors evaluate MedTech solutions from the Nordics.

- Nordic actors and ecosystems face challenges that aren´t unfamiliar in broader scale i.e. in collaboration projects between healthcare players, there is usually a recognized bias towards favoring local players.

- Another challenge is the choice of national branding vs. Nordic branding. There is often competition on how to brand the collaborative efforts – is it Nordic or a country-specific brand. That is, as discussed with the participants of this track, a positive matter since all Nordic countries and their

national healthcare branding are (from the global perspective) highly recognized and respected.

- For healthcare collaboration to be successful, it needs both a strong mandate and ownership.

- More success stories and mistakes need to be shared to benefit all startups in the Nordics.

- Reimbursement matters were discussed, including "an easy to buy" business model and reimbursement system for startups.

ACTION POINTS

1. The discussion group decided to raise the challenge of the Nordic collaboration within the healthcare sector to the Ministry level. The goal is to encourage health ministries in the Nordics to have a common view and common goals regarding collaboration.

2. More sharing of success stories and mistakes.

3. More collaboration between startups to increase their attractiveness.

4. The activity level of the group was very high: all five Nordic countries were represented or were discussed. The group members share a strong intent to meet next time in November and, additionally, in April 2020 at the STeHS20 -conference in Finland and Sweden.

IMPACT

HOW CAN WE MAKE HEALTH TECH INNOVATIONS RESPOND BETTER TO DEVELOPING WORLD CHALLENGES?

Major progress has been made in improving the health of millions of people, increasing life expectancy, reducing maternal and child mortality, and fighting against leading communicable diseases. However, progress has stalled or is not happening fast enough with regard to addressing major diseases, such as malaria and tuberculosis, while at least half the global population does not have access to essential health services and many of those who do suffer undue financial hardship, potentially pushing them into extreme poverty. Innovation and technology are seen as a potential booster for countries to cover some of these critical gaps in a high quality and cost-efficient manner and to support weak health systems and cover critical gaps in the health workforce. Nevertheless, a missing link continues to exist between health tech innovations and their applicability and feasibility in developing countries con-

texts. This session aimed to bring through some examples and concrete ideas insights on potential opportunities for developing contextualized health tech solutions to meet development challenges.

KEY TAKE-AWAYS:

- A health tech startup rolling out a potential solution to developing countries often comes across the following challenges:

  - Lack of awareness of specific problems in the healthcare field in particular countries.

  - Lack of understanding of beneficiaries' needs. There is a clear geographical gap that needs to be bridged to the developing countries, for startups to better understand the needs in these countries.

- Knowledge about failed trials or pilots in developed coun-

tries are rarely shared. There is much to learn from such failures.

- In developing countries, there is more flexibility in regulations, which can accommodate new technologies and innovations, and should be seen as an opportunity for startups.

- There is a high level of willingness to embrace innovations on governmental level in many countries. For many stakeholders, there is ready infrastructure to introduce innovations. There are real problems that can be tapped into, and possibly be solved through digital tech innovations.

- Creating social impact is good for business, as you guarantee that you are more sustainable, so you get longer-term commitments from your beneficiaries and employees. because of them being passionate about the cause of making a difference.

ACTION POINTS

1. Increase awareness of specific needs in developing countries to spark innovation.

2. Bridge the existing geographical gap to developing countries with field trips and exchange visits with key partners.

3. Aim to package tech solutions within a social impact/development intervention to solicit field support and make a difference.

4. Increase the sharing of failed trials and pilot projects by health startups in developing countries.

TELEHEALTH

HOW DO WE CREATE TELEHEALTH WITH A POSITIVE RETURN ON INVESTMENT?
WHAT ARE THE BARRIERS AND DEMONSTRATED SOLUTIONS?

Telehealth and remote patient monitoring have seen countless pilot projects, that all seem to fail when the accounting is done. Despite this fact – almost all consultants and business analysts agree that telehealth and remote monitoring should be and will be booming soon. The implementation figures, however, do not support this expectation – why is that?

- Telehealth can help in increasing capacity, prioritizing patients, and preventive monitoring, among several other things, but to be successful, it needs to have a positive return on investment.

- To have a successful implementation, key changemakers in the organization should be identified. To get doctors and nurses involved with the solution, it should be simple and user-friendly. If it is complicated, it will not work in a hospital as no one wants to waste time.

- The solution needs to be volume-based, and it is important to bring down the cost per patient by scaling up. The scaling of telehealth solutions requires stakeholder engagement. In a cross-sectorial implementation, all parties need to be on board, and they should have an incentive to scale up. Scaling up also requires removing bottlenecks before the client finds them and providing a turn-key solution.

- Public sector decision-makers seek solutions that are not very expensive, and can be used for many people and various diseases.

- It is an advantage for the solution to be cloud-agnostic, and thus being able to be deployed in any cloud making it more flexible in penetrating different markets.

- The public procurement system should be more flexible towards smaller projects and suppliers. Tender processes are difficult and hard to live through for small suppliers.

- Regulatory compliance could be handled by integrating the quality management system. Reduce human errors by automation.

- Developing countries could be seen as a possible market for telehealth solutions.

- Solution providers have to be flexible to adapt to established systems in hospitals.

ACTION POINTS

1. Integrate demands of regulatory compliance into the system and automate to decrease errors.

2. Make sure all stakeholders are involved and have an incentive to scale.

3. Assist users by keeping the solution simple.

4. Help by making public procurement systems more flexible towards smaller suppliers.

5. Be cloud-agnostic.

6. Use of volume-based pricing system.

DATA TRANSFER

UNINTERRUPTED DATA TRANSFER: HOW TO ENSURE DATA FLOW OF PATIENT INFORMATION UNDER ALL CIRCUMSTANCES?

Accurate record-keeping and tracking of the quality of the un-interrupted, high-quality healthcare chain, and the healthcare received is essential. Particularly important is a seamless and reliable chain under the circumstances where the data network does not work, and you must be able to make entries offline. There are also specific situations (e.g., under the circumstances) where patients may have to be transported to different countries and later between countries, whereby a unified communication system at the Nordic level would significantly increase patient safety. Occasionally, hospital information systems may crash, and the information must still be available.

- Legal and political issues, as well as linguistic barriers, are affecting the information flow of medical and healthcare data between the Nordic countries.

- There is a challenge related to information flow and data availability between different databases with medical and healthcare information.

- There is a need to proactively ensure the data flow by either utilizing already existing solutions (e.g., video/audio recordings) or new solutions like ID chips embedded under the skin or in a bracelet - something that is found on every person, readable with basic mobile phones.

- Can an application with health data information be already included in the phone to be accessible in an emergency? One of the challenges is how to ensure that different user groups effectively use technical solutions.

- At the moment, paper and verbal communication are used a lot, and there is always a high possibility of errors. An example of a concrete solution could be a NFC chip that is

traveling with a patient and making healthcare data protocols accessible throughout the healthcare chain and thus enabling the continuity of the flow of information.

- Whichever solution is used, it has to be global, standardized, and widely recognized, for it to be successful.

INSURANCE

HOW CAN WE CREATE BUSINESS AND CUSTOMER VALUE THROUGH THE BLEND OF DIGITAL INDUSTRY ECOSYSTEMS OF HEALTH AND INSURTECH?

The life & health insurance industry and its evolving digital ecosystem will, in the coming years, grow more tightly connected to other neighbouring industry ecosystems, such as healthcare, digital wellbeing and banking. The opportunities that come with this transformation, but also the challenges and concerns about sharing sensitive personal data, were discussed at Health100.

KEY TAKE-AWAYS:

- The insurance industry is undergoing digital transformation. The industry is conservative and risk-averse, but there is a sense of urgency to tap into the opportunities of being more data-driven.

- Much valuable information that is crucial for personalization, risk assessment, and pricing resides outside of the traditional insurance ecosystem. Getting access to this data will require collaboration with other stakeholders and ecosystems like healthcare, digital wellbeing, genetics, and wealth management.

- There is a lot of pressure in terms of costs, compliance and regulations. The data that insurance companies need to digest is personal and highly sensitive. Multiple aspects need to be considered in regards to customer data control (GDPR, PSD2 open banking, OID open insurance). The data should belong to and be controlled by the customer. Insurance companies will need to build customer trust and ensure that the customer's privacy is protected so that customers are willing to share their data.

- Utilizing more diverse datasets makes it possible to be more proactive and provide more preventive services to the customers, thus shifting towards preventing accidents and disabling conditions. Combined innovative packages could be developed aimed at taking into account individual behaviour, and "reward" systems for those committed to a healthy lifestyle.

- This also raises the philosophical and ethical question of a "big brother society", forcing people to pay an additional risk premium if they decide to live beyond the bounds of the standardised perfect wellbeing.

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DEEP TECH

KEY TAKE-AWAYS:

HOW CAN WE SOLVE THE CHALLENGES FOR UPCOMING DEEP TECH STARTUPS?

Deeptech start-ups who want to stay in Finland, face problems with having enough funding to bring highly skilled people from abroad.

- The founders of deep tech startups are experts in their own field, for example in biotechnology, but they might often lack business management, sales and recruiting skills & knowledge.

- More help and education needs to be provided for researchers and entrepreneurs about basic business skills, strategy, entrepreneurship, funding, regulations, recruiting, etc. rather sooner than later in their path.

- Deep tech startups operating in life sciences often face complicated regulatory & compliance issues. Startups need to be aware of the regulatory environment and actions needed, rather sooner than later. The regulatory officials need to be able to respond to the advances in technology and they should be able to act faster and be more agile in policymaking.

- In recruiting, startups can't compete with high salaries, so they need to consider sharing equity with the right professional(s) instead of just hiring them. Startups also might need to lower their thresholds and let the talents grow

with the company. Also consider using headhunters and other available help, such as networking and events, in the recruitment process.

- When recruiting, it is important to consider also people who don't agree with you or with your company on everything. Diversity in people means also diversity in experience, opinions and know-how.

- The Nordics should learn from the US, who have the know-how and a great infrastructure for life science startups. The Nordic countries should work together and create a Nordic life science start-up strategy & infrastructure. Also, this could help build the trust of investors towards life sciences/biotech.

- Tech startups from different industries, such as gaming and health, should not be compared or put to compete against each other. Investors and other stakeholders need to be aware of the characteristics of different industries and their specifications.

- The value of a company or a solution should not always be valued only in monetary terms. If a solution is changing or saving patient's lives, the value is immeasurable.

ACTION POINTS

1. More education about the basics of running a business and recruiting for beginner entrepreneurs is needed.

2. More help with regulations for (deep tech) start-ups is needed.

3. A Nordic life science start-up strategy & infrastructure needs to be created.

Health100
ATTENDEES

NAME	COMPANY
Ahmed El Saeed	United Nations Technology Innovation Labs
Aki Kuivalainen	Predicell / Kuta Nordic
Alessandro Lazarevic	Roche
Annmarie Kuurto	Innocello - Innovation Center Lohja
Anthony Lambrou	Pfizer
Atli Knutsson	Sidekick
Ben Gran	Metropolia UAS, Nursing
Christian Lardot	NewCo
Christian Lindholm	Upgraded Board
Daniel Eriksson	Nordic Center for Sustainable Healthcare
Daria Smyk	Metropolia UAS, Nursing
Darshan Kumar	BiotechClubFI
David Vernon	Sunnaas hospital
Elena Prokofyeva	Upgraded
Elina Ojala	Motiva
Elina A Pietila	University of Helsinki
Erika Gucciardo	University of Helsinki
Hans Guttormur Þormar	BioCule, University of Iceland
Heikki Kallasvaara	Helsinki-Uusimaa Regional Council
Henrik Allert	Itello
Henrik Resman	VitalSignum
Henrik Ibsen	OpenTeleHealth
Hulda Steingrímsdóttir	University Hospital of Iceland
Ilkka Tiainen	Apotti
Ilona Santavaara	Lean Entries
Iiris Tyni	Upgraded
Inka Mero	Voima Ventures
Jaakko Olkkonen	Wellmo
Janne Pitkänen	Adusso
Johanna M Anttila	University of Helsinki
Johannes Malkamäki	Science Communicator & Mentalist
Joni Karsikas	TESI - Finnish Industry Investment
Juha Paakkola	Health Capital Helsinki
Jurgita Paukstyte	University of Helsinki
Jussi Määttä	Buddy Healthcare
Jussi Kajovaara	Megical
Kaisu Sutinen	Health Capital Helsinki
Kari Klossner	Business Finland
Katja Pulli	The National Institute for Health and Welfare
Kenneth Salonius	Upgraded Board
Kimmo Konkarikoski	General Industry Federation YTL
Larisa Viazmina	University of Helsinki
Laura Ranin	Healthzilla

Laura Arpiainen	Aalto University	Raimo Mansikkaoja	TherMidas
Lauri Kuronen	Health Capital Helsinki	Raisamiina Rimpelä	Upgraded
Liliia Andriichuk	University of Helsinki	Riikka Juuma	HUS Logistics
Linn Grundtman	TEM Foundation	Riina-Riitta Helminen	Terveystalo
Maria Sanz Navarro	University of Helsinki	Sam Engström	Timespace
Marianne Larsson	Innivation Skåne	Sam Kondo Steffensen	Technical University of Denmark
Marika Laaksonen	Fazer	Sanna Hartman	Helsinki City
Marko Reponen	Huoleti	Sebastian Soidinsalo	Resistomap
Markus Väisänen	Pfizer	Sébastien Gianelli	Upgraded Board
Martin B Justesen	University of Copenhagen, SUND accelerator	Shinichi Nikkuni	NordicNinja
Matti Räty	Navigil	Simo Sorsakivi	Inscripta
Merja Hiltunen	Valvira	Sinikka Münte	Helsinki University Hospital
Mervi Lamminen	Auntie Solutions	Tero Era	Puhti
Michael Healy	Nightingale Health	Turo Pikkarainen	Pfizer
Michael Quarshie	MealLogger / Wellness Foundry	Tuure Parkkinen	Meru Health
Mika Karilahti	Medigoo	Ville Mujunen	Ninchat
Mikko Vesa	CutoSense	Virpi Muhonen	Askel Healthcare
Minna Storm	ECCA Nordic		
Niina Venho	Moodmetric		
Olga Koistinen	University of Helsinki		
Outi Toijala	EIT Digital		
Päivi Putkonen	Laurea		
Pekka Lehmus	Pfizer		
Peter Kelly	Pharmafilter		
Prateek Singh	Finnadvance		