

# RealNose.ai

U N L O C K I N G   T H E   S U P E R P O W E R   O F   S C E N T

## AI-Bionano Machine Olfaction for Cancer Detection

# What is RealNose ?

Inspired by the remarkable canine ability to detect cancer via olfaction, RealNose develops bioprogrammable olfactory sensors, blending AI and bionanotechnology. RealNose revolutionizes early cancer detection, providing unparalleled precision, speed, and affordability. With RealNose, we're turning scent into a powerful diagnostic tool, starting with prostate cancer.

# Why RealNose?



Dogs demonstrate remarkable success in **detection through scent**

- Diseases like **prostate cancer** by sniffing urine
- Other **cancer diseases, Parkinson's, Alzheimer, Epilepsy**
- Signature of **explosives, drugs, bodies** etc.



The mechanism of **olfaction**

- **Doesn't depend** on **molecular biomarkers**
- It maps scent profiles and **recognizes patterns**
- Analogous to **vision**



**AI - Right timing**

- **AI** has **revolutionized computer vision**
- The **time is now to harness AI** for advanced olfactory detection solutions



**Current Detection Methods**

- **PSA:** Non-invasive blood test with **low accuracy**
- **DRE:** **Invasive** physical examination with **limited accuracy**
- **Biopsy:** **Highly invasive**, can lead to **severe side effects**
- **Imaging tests** (MRI, Ultrasound): **high cost, limited accuracy**

# Transforming Cancer Detection



## Our Solution

We're creating a unique **AI-powered bioprogrammable olfactory sensing** solution designed specifically to **detect prostate cancer from urine samples**



## Technology

Our solution involves a **fusion** of **AI** and **bionanotechnology**, encapsulating **organic receptors** that **mimic a dog's olfactory system**



## AI/ML

We use **Machine Learning** to train these receptors to recognize prostate cancer scent patterns, offering a **non-invasive** and **highly accurate** detection method



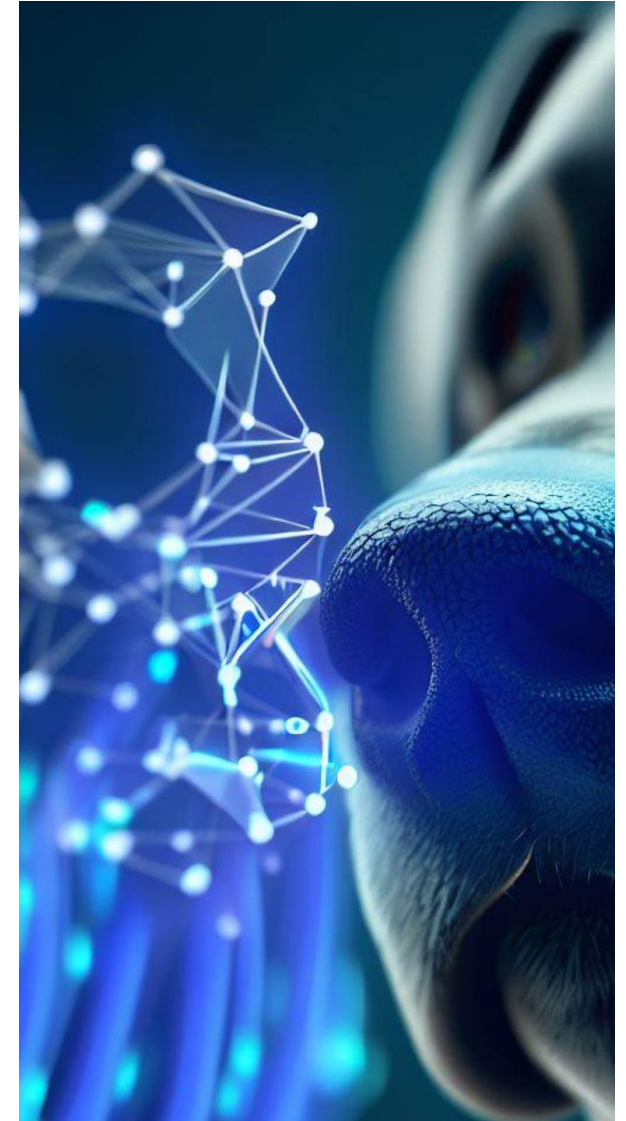
## Expandability

This technology **is not limited** to prostate cancer only; it can be **adapted** to detect **other types of cancer and diseases**, offering **vast possibilities** for **future applications**



## User friendliness

Our device is **compact, user-friendly**, and can **seamlessly integrate** into existing diagnostic procedures in healthcare facilities



# Management Team



**Nikolas Stefanou, CEO – Full Time**

Extensive entrepreneurial experience

Co-founder, CEO at Clickdelivery.gr - Series A, 3M EUR - Exited in 2015 to Delivery Hero, for 14 times forward revenue

BS Electrical and Computer Engineering from National Technical University of Athens

MS in Electrical Engineering from Texas A&M University

MBA with honors from Chicago Booth School of Business



**Dr. Andreas Mershin, CSO – Full Time**

He is an expert in nanotechnology and biophysics and has led groundbreaking research on replicating olfactory systems. He is the lead inventor listed on the MIT-TLO held patent resulting from his leading the DARPA MITRealNose effort

Director of MIT Label Free Research Group (2004-2023) and Instructor at MIT Sloan Executive Education “Lab to Market the MIT Way” (2014-2023)

MSci in Physics from Imperial College, London

MS and PhD in Physics and Biophysics from Texas A&M University



**TBA, AI & ML Specialist – Full Time**

Actively looking for an experienced professional AI & ML engineer



**Dr. Shuguang Zhang, Advisor – Part Time**

MIT PI and Director of the Molecular Architecture Laboratory, co-founded and led own invention to USD\$1.2B IPO exit (3DMatrix)

MS, PhD (Genetics)



**TBA, AI & ML Specialist –Advisor – Part Time**

In talks with an AI & ML professor in MIT’s Electrical Engineering department



**TBA, Healthcare professional – Clinical Advisor – Part Time**

Actively looking for an experienced professional with clinical trials expertise

# The history of RealNose

- **Conceived** at MIT, research **funded** by DARPA and GSK, and supported by **Medical Detection Dogs**
- Featured in [Wall St Journal](#), [Wired](#), [PBS\(s\)](#), [Financial Times](#), [MIT Tech Review](#), [MIT News](#), [Plos One Journal](#)
- Presented at the [Global Machine Olfaction Technologies Conference](#), published in [Plos One Journal](#), patented with USPTO



2010 – 2013

- MIT: **4M USD DARPA funding**
- DARPA VOCs Testing: **200x better limits of detection against dogs**
- **1<sup>st</sup> patent filed**



2015

- MIT: **Patent granted: [Methods and apparatus for artificial olfaction - US9140677B2](#)**



2018

- MIT: **2M USD GlaxoSmith Funding**
- Nth (miniaturized Prototype)



2021

- **Scentient.ai** co-founded by Andreas Mershin
- **Prostate Cancer detection** from urine samples using **GC-MS**
- **Similar sensitivity and selectivity** as trained canines
- Published in [Plos One Journal](#)

PLOS ONE

OPEN ACCESS PEER-REVIEWED RESEARCH ARTICLE

**Feasibility of integrating canine olfaction with chemical and microbial profiling of urine to detect lethal prostate cancer**

Claire Guent Robb Harris Karen S. Stefanos Eva Shrestha Alan W. Parth Bruce Trook Leslie Mangold Rebecca Bader Adam Kozak Scott Mosen Jonathan Simons Howard Soule Thomas Johnson [...] Andreas Mershin [View all](#)

Published: February 17, 2021 • <https://doi.org/10.1371/journal.pone.0245030>

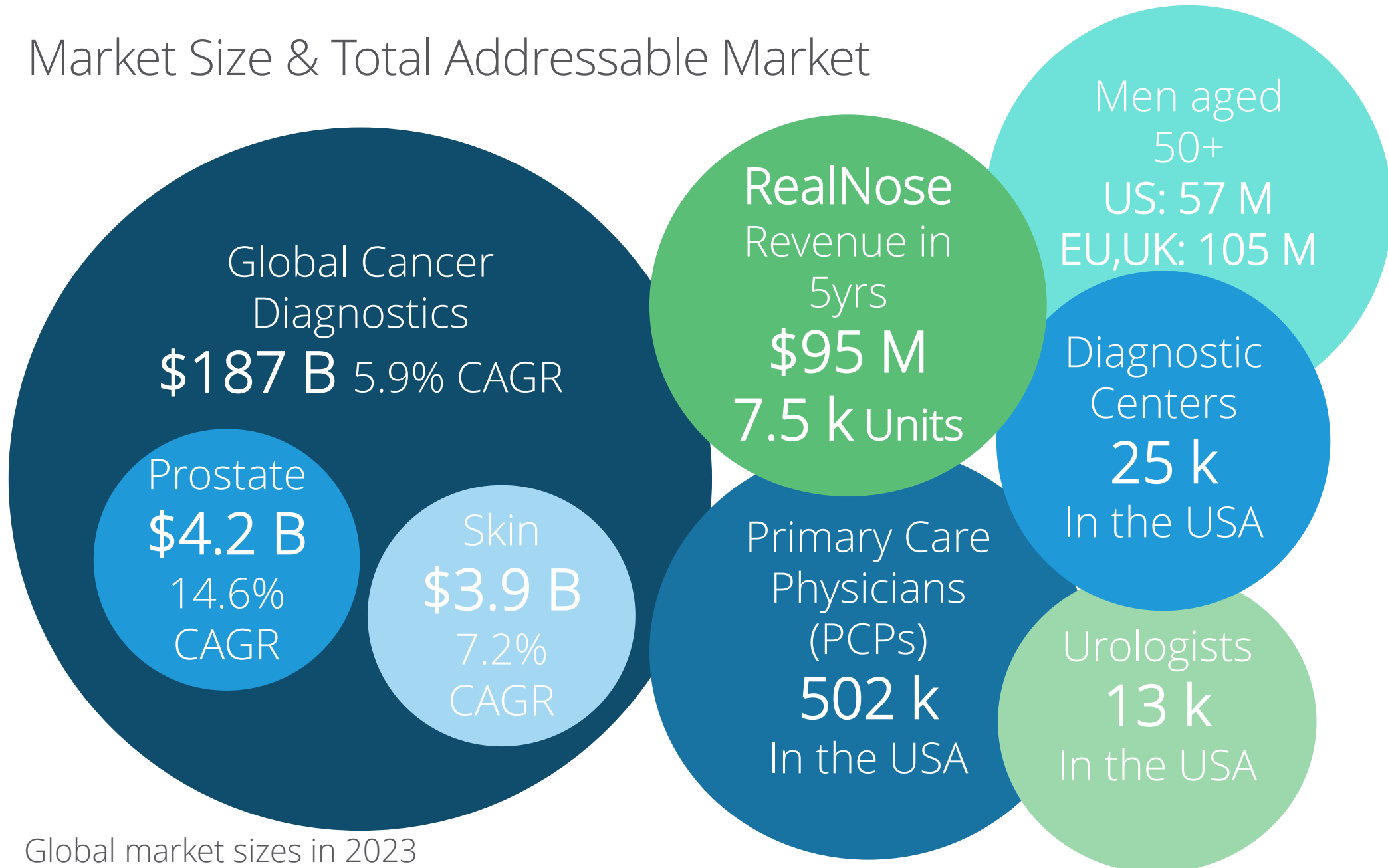
[See the preprint](#)



2023

- Scentient.ai dissolved
- **Incorporation of RealNose Inc.**

# Market Size & Total Addressable Market



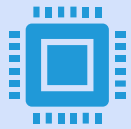
Global market sizes in 2023

Source: IMARC Group, Marketwatch, The Insight Partners, GlobeNewswire, IbisWorld, Statista, World Bank

# The landscape in prostate cancer early detection

Metrics	PSA (4 ng/mL)	DRE	Biopsy	MRI Scan	SelectMDx	ExoDx	Scientent.ai (Founded by Andreas)	RealNose
Tech	Blood Analysis	Physical	Invasive	MRI	Urine, mRNA	Urine, exosomes	Urine GC-MS	Urine scent sensing
Cost	\$ 50	Included in doctor's visit	\$ 2,200	\$ 1,800	\$ 250	\$ 760	\$ 200	\$ 30
Sensitivity (Low Score=Many False Negatives)	~30%	~55%	~83%	~80%	~77%	~86%	91%	~95%
Specificity (Low Score=Many False Positives)	~85%	~65%	~95%	~65%	~50%	~35%	99%	~99.5%
AUC (High Score=Better Trade-Off between sensitivity and specificity)	~0.60	~0.65	n/a	~0.80	~0.63	~0.81	0.93	~0.96
Regulatory Approval	FDA Approved	n/a	n/a	FDA Approved	CLIA, CE	FDA breakthrough device designation	none	Aim for CLIA, CE & later FDA

# Prototype & MVP Development



## Development

- **Prototype:**
  - Select **8 different receptors** from a large pool of human and other mammalian receptors
  - Collect **100 Urine samples** and **optimize** sensors and AI/ML algorithm
- **1<sup>st</sup> medical application** (prostate cancer detection) - **MVP:**
  - Collect **700 Urine samples** and **validate** device and AI/ML model



## Time and Cost

- **Prototype:**
  - **8 months** to develop and min cost of **\$1M** (limited urine samples)
- **1<sup>st</sup> medical application** (prostate cancer detection) - **MVP:**
  - **12 months** to develop and estimated cost of **\$1.6M** (incl. prototype)
- **Subsequent applications** will be developed **faster** and will **cost much less**



## Receptor Lifespan and Cost

- Receptors have a **lifespan** of about **two weeks**
- Replacement required every two weeks, which constitutes the **major cost**
- Cost to produce the receptors needed **per month** per device is approximately **\$700**

# Go-to-market Strategy



## Target Customers

- Diagnostic Centers
- Primary Care Physicians (PCPs) and Specialists
- Insurance companies
- Geographic Expansion: US, EU, UK



## Sales and Distribution

- Direct Sales: Key Account Managers focusing on large accounts and insurance networks, aiming to secure high-value contracts
- Indirect Sales: Partner with healthcare equipment distributors to sell to smaller accounts such as PCPs and diagnostic centers



## Revenue Model

- Medical Device-as-a-service (MDaaS)
- Monthly subscription fee: \$2,000 /month /unit (Retail Price) including receptor cartridge replacement
- Partner with insurance companies to subsidize cost in their networks



## Regulatory Approvals

- Anticipate CLIA (US) & CE (EU) certification initially and/or FDA clearance

# Partnerships and Current Status



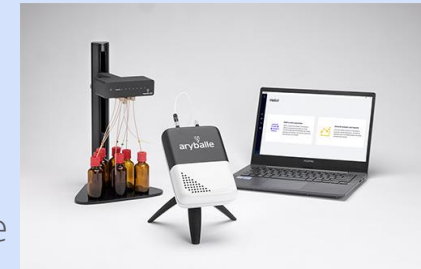
## IP Licensing

- Methods and apparatus for artificial olfaction – [Patents: US9140677B2](#)
- [MIT Technology Officer assigned](#): Jim Roberts negotiations started May 2023



## Device Prototyping

- [Partnered](#) with French Company [Aryballe](#) to use their e-Nose with MZI sensors
- [Tested](#) with urine samples and concluded that it **does not have the required resolution** for cancer detection
- [Negotiated a deal](#) to [integrate our receptors](#) into their e-Nose



## Data Collection

- Negotiation in progress with [The Johns Hopkins Hospital](#) and [Iatriko Athinon \(Athens Medical Group, Greece\)](#) to gather urine samples



# Traction and Investment Commitments



## Partnerships

- In positive talks with [GE Health Care](#) to explore synergies
- Initiated talks with [United Healthcare \(the largest health insurance company in the US\)](#) to tap into their network
- They have been [very receptive](#) & [excited](#)



## Grants

- Applied to [NSF Convergence Accelerator](#) Track L: [Real-World Chemical Sensing Applications](#)
- The track builds on [olfaction](#) and [chemical sensing, sensor technologies, digital olfaction, AI](#)
- [LOI accepted](#), full proposal in review. Results: Nov 2023, Grants given in Jan 2024
- Phase 1 funding: [\\$750k for 12 months](#), Phase 2 funding: [\\$5M for 24 months](#)



## Investment Commitments

- [Term sheet of \\$500k](#) from a [Technology & AI focused VC fund](#) with the requirement to raise another \$500k
- [Soft commitments of \\$250k](#) from two [angel investors](#)
- Collaboration with [Wells Fargo Advisors](#) to [fundraise](#)

# The Ask – Seed \$ 1.6 M – Series A \$ 5 M

YEAR 1

YEAR 2

YEAR 3

Milestones

- Develop Prototype Device
  - Receptor production
  - Partner with Aryballe
- Develop 1<sup>st</sup> Medical Application (MVP)
  - Prostate Cancer Detection
- Partner with hospitals to gather samples
- Develop the AI/ML algorithms
- Publish Results

- Apply for CLIA certification and/or FDA approval process
- Partner with Insurance companies to deploy and subsidize RealNose in their networks
- Acquire 2 major Distributors
- Deploy 200 Units
- Develop 2<sup>nd</sup> Medical Application
  - Skin Cancer Detection

- Develop 3<sup>rd</sup> & 4<sup>th</sup> Medical Applications
  - Skin Cancer Detection
  - Parkinson's Disease
- Partner with hospitals to take samples
- Continue FDA process with Clinical Trials
- Acquire 6 major Distributors
- Deploy 800 Units

Use of funds

- Cost of 1st Application (MVP) \$ 573 k
- Product \$ 889 k  
*COGS, Salaries, Marketing, Patents*
- Equipment, G&A \$ 134 k
- Total \$ 1,596 k
- Cash Flow Buffer \$ 4 k

- Cost of Application (2<sup>nd</sup>) \$ 413 k
- Product \$ 2,410 k  
*COGS, Salaries, Marketing, Patents*
- G&A \$ 84 k
- Total \$ 2,907 k
- Cash Flow Buffer \$ 493 k

- Cost of Applications (2) \$ 826 k
- Product \$ 8,672 k  
*COGS, Salaries, Marketing, Patents*
- G&A \$ 84 k
- Total \$ 9,582 k
- Cash Flow Buffer \$ 1,918 k

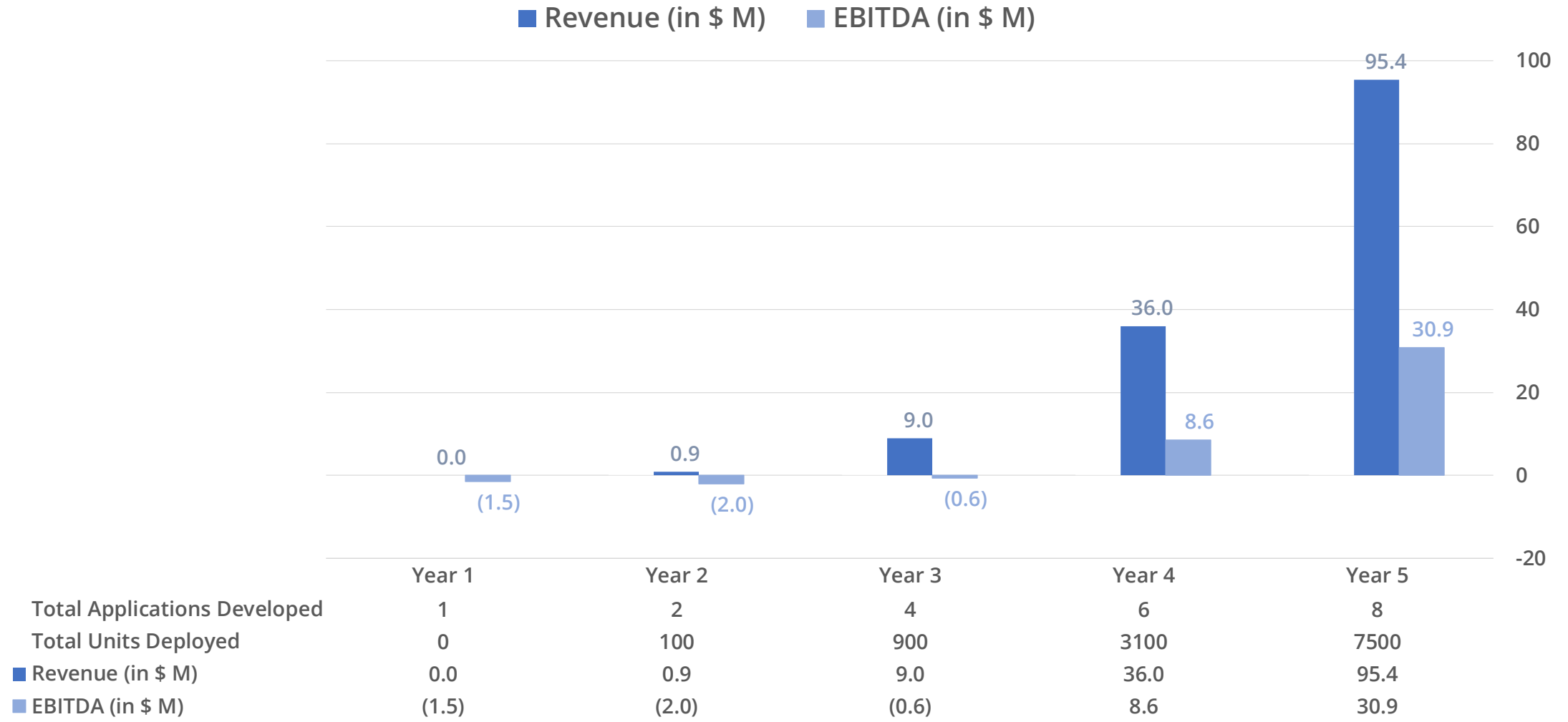
Source of funds

- Revenues \$ 0 k
- Seed \$ 1,600 k

- Revenues \$ 900 k
- Series A \$ 2,500 k

- Revenues \$ 9,000 k
- Series A \$ 2,500 k

# Financial projections



# What is our vision ?

## Innovate

- Be the best in digitizing olfaction

## Disrupt detection industry

- Create a new trend with a potential to grow in a billions-market segment

## Expand product

- Several Cancer Diagnostics
- Several Biopharma production lines
- Wineries, Breweries
- Food Production

## Further expand

- You're constantly leaking biologically relevant information
- Dogs can mine this information
- ... and so can machines



# Back up slides & Some more details

# Financial model - Projections

Cost of Application Development	
<b>Cost of 1st Application (MVP) - Prostate Cancer</b>	
Cost of receptor genes	\$7,200
Cost of receptors	\$36,000
Cost of integrating receptor sensors into Aryballe's e-Nose	\$200,000
Cost of devices	\$10,000
Cost of access to data	\$320,000
<b>Total Cost of 1st Application (MVP)</b>	<b>\$573,200</b>
<b>Cost of subsequent Applications (Medical)</b>	
Cost of receptor genes	\$7,200
Cost of receptors	\$36,000
Cost of integrating receptor sensors into Aryballe's e-Nose	\$40,000
Cost of devices	\$10,000
Cost of access to data	\$320,000
<b>Total Cost of Subsequent Applications (Medical)</b>	<b>\$413,200</b>

Unit Economics	
<b>Cost of Receptors for a Commercial Unit per month</b>	
Cost of materials for 8 receptors per unit per month	\$480
Cost of labour for inhouse receptor cartridges production per month (won't apply)	\$270
Cost of outsourced receptor cartridges production per month (without materials)	\$150
<b>Cost of Commercial Unit</b>	
Cost of device	\$2,000
Cost of receptors per unit per month (outsourced)	\$630
Cost of cloud computing per month (Incremental per unit)	\$50
Cost of logistics per month (per unit)	\$50
<b>Total Cost of Commercial Unit per Month</b>	<b>\$730</b>
<b>Commercial Unit Retail Price - MDaaS</b>	
Device (without receptors) sale	\$0
Subscription fee per unit per month	\$2,000
<b>RealNose &amp; Distribution Gross Margin (Outsourced Receptor Production)</b>	<b>64%</b>
<b>Commercial Unit Distribution Price - MDaaS</b>	
Device (without receptors) sale	\$0
Subscription fee per unit per month	\$1,500
<b>Distribution Gross Margin</b>	<b>25%</b>
<b>RealNose Gross Margin (Outsourced Receptor Production)</b>	<b>51%</b>

Financial Plan					
	Year				
	1	2	3	4	5
<b>Development &amp; Customers</b>					
New Applications Development	1	1	2	2	2
Total Applications Developed	1	2	4	6	8
New Distributors Onboarded	0	1	3	6	10
Total Distributors Onboarded	0	1	4	10	20
New Champions (Insurance Co. & Lab chains)	0	0	2	4	6
Total Champions (Insurance Co. & Lab chains)	0	0	2	6	12
New Units Deployed	0	100	800	2200	4400
Total Units Deployed	0	100	900	3100	7500
<b>CAPEX</b>					
Equipment	\$(50) k	\$0 k	\$0 k	\$0 k	\$0 k
<b>OPEX</b>					
<i>Product Development</i>					
Cost of Applications Development	\$(573) k	\$(413) k	\$(826) k	\$(826) k	\$(826) k
Legal & Regulatory Fees	\$(55) k	\$(273) k	\$(435) k	\$(975) k	\$(2.16) M
<i>COGS</i>					
Cost of Commerical Units (Devices only)	\$0 k	\$(200) k	\$(1.60) M	\$(4.40) M	\$(8.80) M
Cost of Commerical Units (Receptors)	\$0 k	\$(378) k	\$(3.78) M	\$(15.12) M	\$(40.07) M
Cloud Computing	\$(60) k	\$(63) k	\$(85) k	\$(160) k	\$(325) k
Logistics	\$(0) k	\$(3) k	\$(25) k	\$(100) k	\$(265) k
<i>Overheads</i>					
Salaries (inc. labor & fringe overhead)	\$(774) k	\$(1.40) M	\$(1.85) M	\$(2.16) M	\$(2.47) M
Marketing	\$0 k	\$(90) k	\$(0.90) M	\$(3.60) M	\$(9.54) M
G & A	\$(84) k	\$(84) k	\$(84) k	\$(84) k	\$(84) k
<b>Total OPEX</b>	<b>\$(1.55) M</b>	<b>\$(2.91) M</b>	<b>\$(9.58) M</b>	<b>\$(27.42) M</b>	<b>\$(64.54) M</b>
<b>Revenues</b>					
Devices Sale	\$0	\$0 k	\$0.00 M	\$0.00 M	\$0.00 M
Subscription Fees	\$0	\$0.90 M	\$9.00 M	\$36.00 M	\$95.40 M
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0.90 M</b>	<b>\$9.00 M</b>	<b>\$36.00 M</b>	<b>\$95.40 M</b>
<b>EBITDA</b>	<b>\$(1.55) M</b>	<b>\$(2.01) M</b>	<b>\$(0.58) M</b>	<b>\$8.58 M</b>	<b>\$30.86 M</b>
<i>EBITDA margin</i>		-223.05%	-6.47%	23.82%	32.35%
Net Income	\$(1.22) M	\$(1.59) M	\$(0.46) M	\$6.78 M	\$24.38 M
Taxes Payable	\$256 k	\$590 k	\$0.69 M	\$(0.74) M	\$(5.12) M
Free Cash Flow	\$(1.60) M	\$(2.01) M	\$(0.58) M	\$7.84 M	\$25.74 M
<b>Cumulative Cash</b>	<b>\$(1.60) M</b>	<b>\$(3.60) M</b>	<b>\$(4.19) M</b>	<b>\$3.65 M</b>	<b>\$29.39 M</b>

# Financial model - Assumptions

Assumptions	
<b>Receptors</b>	
#Receptors needed per development cartridge	24
#Receptors needed per commercial cartridge	8
Cost per receptor gene	\$300
Cost per receptor cell free expression kit (or cell based)	\$1,500
Receptor instances per kit	50
Receptor life (2xHalf-life) #Months	0.5
Mandays needed to manufacture receptor instances (pkg of 50)	2
Outsourced receptor production (From Y2 onwards) per unit (8 receptors) per month	\$150
<b>Devices (Aryballe's e-Nose with RealNose Receptors)</b>	
Mandays to integrate receptor sensors into Aryballe's e-Nose - 1st Application (Prototype)	250
Mandays to integrate receptor sensors into Aryballe's e-Nose - Subsequent Applications	50
Aryballe's manday Cost	\$800
Device (without receptors) cost	\$2,000
Units needed per application development	5
Incremental cost of cloud computing per unit per month	\$50
<b>Data Collection for Medical Applications</b>	
Cost of urine sample (or other medical sample)	\$400
# of samples needed for high accuracy	800
<b>Commercial Unit Retail Price: Medical Device-as-a-Service (MDaaS)</b>	
Device (without receptors) price	\$0
Subscription fee per unit per month (includes 2 cartridges of 8 receptors per month)	\$2,000
<b>Commercial Unit Distribution Price: Medical Device-as-a-Service (MDaaS)</b>	
Device (without receptors) price	\$0
Subscription fee per unit per month (includes 2 cartridges of 8 receptors per month)	\$1,500
<b>Distribution &amp; Key Account Management</b>	
New units per distributor per year (distributor's effort)	100
New units per champion (insurance companies, diagnostic lab chains) per year	200
Logistics cost per unit per month	\$50

Assumptions - Continued	
<b>Overheads</b>	
<i>Salaries</i>	
CEO	\$185,000
CSO	\$185,000
AI Scientist (1 in Y1H2)	\$150,000
Bio Scientist (1 in Y1)	\$100,000
Data Scientist (1 in Y1H2, 2 from Y3 onwards)	\$100,000
Channel Distribution Manager (0-Y1, 1-Y2, 2-Y3, 3-Y4, 4-Y5)	\$120,000
Key Account Manager (0-Y1, 1-Y2, 2-Y3, 3-Y4, 4-Y5)	\$120,000
Marketing Manager (1 from Y2 onwards)	\$120,000
Labor Overhead & Fringe Benefits	30%
<i>Cloud Computing</i>	
Cloud Computing Base System cost per month	\$5,000
<i>Legal &amp; Regulatory Fees</i>	
MIT patent licensing fees per year (flat fee)	\$10,000
MIT patent licensing fees % of revenue	2%
Legal fees and IP expenses (new patents) per year	\$45,000
Regulatory approvals and clinical trials (from Y2 onwards) per year	\$200,000
<i>Marketing</i>	
Marketing (% on revenue)	10%
<i>G &amp; A</i>	
Rent per month	\$4,000
Utilities per month	\$1,000
Equipment (in Y1)	\$50,000
Other Expenses (Accounting, Travel, HR) per month	\$2,000
<b>Other</b>	
Tax rate	21%

Timeline of Applications Development	Months
<b>1st Application (MVP) - Prostate Cancer</b>	
Receptor Gene and Expression Development	5
Sensor Integration with Aryballe's e-Nose Development	3
Data Collection - Urine Samples	2
AI Algorithm development - Optimization	2
<b>Total Time to develop 1st Application (MVP)</b>	<b>12</b>
<b>Subsequent Applications (Medical)</b>	
Receptor Gene and Expression Development	2
Sensor Integration with Aryballe's e-Nose Development	1
Data Collection - Medical Samples	2
AI Algorithm development - Optimization	1
<b>Total Time to develop Subsequent Applications (Medical)</b>	<b>6</b>

# Cost-Effectiveness of RealNose



## Current Screening Costs

- Prostate-Specific Antigen (PSA) Test: \$50 - \$100 (uninsured cost)
- Prostate Biopsy: \$1,000 - \$2,500



## RealNose Subscription Cost

- \$2,000 per month, per device, per PCP or Diagnostic Center
- Assuming one PCP screens approximately 20 patients per week (a conservative estimate), the cost per screening is approximately \$25



## Potential Patient Charges

- A price of \$30-\$50 per screening to the patient could cover costs and provide some margin
- This would be generally comparable to the out-of-pocket cost of a PSA test, and most insurances would cover it



## Benefits for PCPs & Diagnostic Centers

- Increased visits due to offering a novel, non-invasive screening method
- Potential income from the screening fee, assuming some margin over the cost



## Benefits for Insurance Companies

- Early detection of prostate cancer can significantly reduce treatment costs
- The average cost of prostate cancer treatment ranges from \$15,000 to \$30,000 for early-stage cases, to over \$100,000 for advanced cases
- Savings from avoided biopsies & less expensive treatments with early detection

# Exit Opportunity

MedTech - HealthTech Multiples	Multiple	Real Nose Exit Valuation in 5 Yrs
Revenue	6.43x	\$613 M
EBITDA	21.4x	\$661 M

Mercer Capital's Value Focus: Medtech & Device Industry Second Quarter 2022

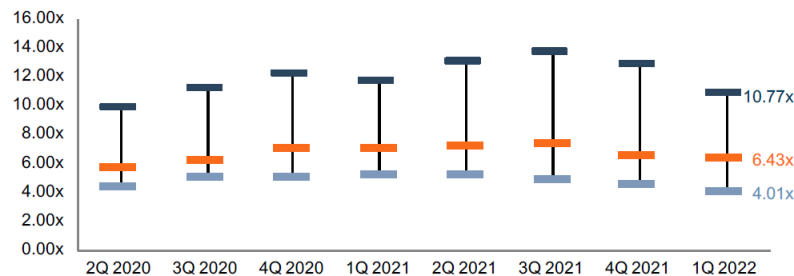
## Revenue Multiples

■ 75% Quartile ■ Median ■ 25% Quartile

Median Revenue multiples from each MCM group. Data source: Bloomberg

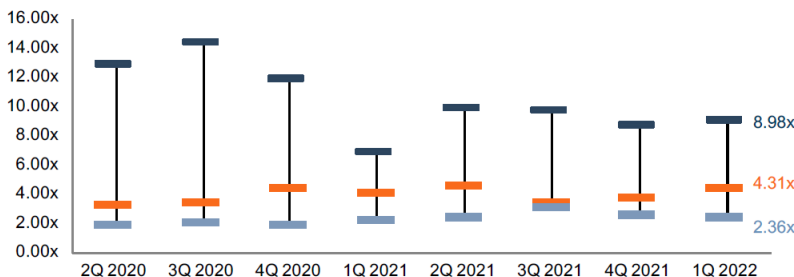
### Medical Devices

EV / Trailing LTM Revenue



### Healthcare Technology

EV / Trailing LTM Revenue



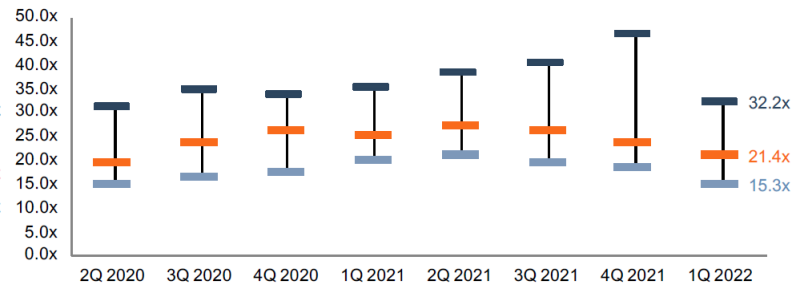
## EBITDA Multiples

■ 75% Quartile ■ Median ■ 25% Quartile

Median EBITDA multiples from each MCM group. Data source: Bloomberg

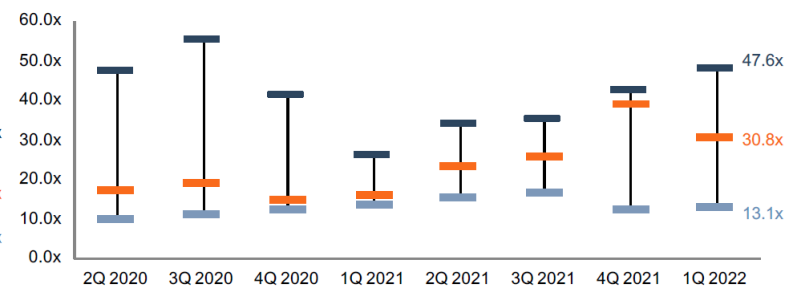
### Medical Devices

EV / Trailing LTM EBITDA



### Healthcare Technology

EV / Trailing LTM EBITDA



- Exosome Diagnostics

- Maker of ExoDx test
- Without any other products
- Was acquired for \$577 M
- 2 years after 1<sup>st</sup> validation study
- With much lower accuracy and higher cost than RealNose





# RealNose.ai

UNLOCKING THE SUPERPOWER OF SCENT

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# Thank you!