

Real time AI for skin cancer detection

Peter Ma

Hackathon

Intel Software Innovator

5 startups

Built AI, IoT, BlockChain, Mobile









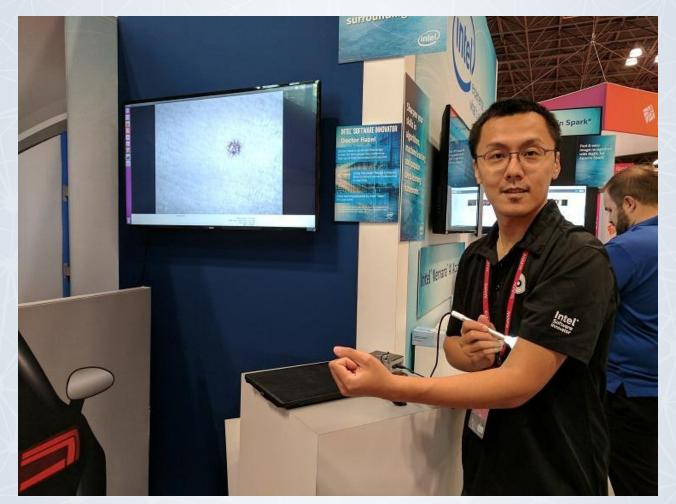
Problem

- Between 40 and 50 percent of Americans who live to age 65 will have either basal cell carcinoma or squamous cell carcinoma at least once.
- The annual cost of treating skin cancers in the U.S. is estimated at \$8.1 billion: about \$4.8 billion for nonmelanoma skin cancers and \$3.3 billion for melanoma.
- The estimated 5-year survival rate for patients whose melanoma is detected early is about <u>98 percent</u> in the U.S.
- The survival rate falls to 62 percent when the disease reaches the lymph nodes, and 18 percent when the disease metastasizes to distant organs















After losing a friend to cancer, two engineers created a revolutionary way to detect the deadly disease.



Skin Cancer Detection App

Detecting skin cancer Al: Pamphlet explaining skin cancer

IQ.INTEL.COM

Learn More





9 Comments 65 Shares











Artificial Intelligence (AI) Helps with Skin Cancer Screening

Published on March 26, 2018 Translate

anslate

CONTENTS

Challenge

Solution

Background and History

Enabling Technologies

Resources

References



"The long-term goal and true potential of AI is to replicate the complexity of human thinking at the macro level, and then surpass it to solve complex problems—problems both well-documented and currently unimaginable in nature."

Challenge

Skin cancer has reached epidemic proportions in much of the world. A simple test is needed to perform initial screening on a wide scale to encourage individuals to seek treatment when necessary.

Solution

Doctor Hazel, a skin cancer screening service powered by artificial intelligence (AI) that operates in real time, relies on an extensive library of images to distinguish between skin cancer and benign lesions, making it easier for people to seek professional medical advice.



Press Coverage















The Vision

Everyone in the world gets a free AI powered cancer screening. Patients can engage a real dermatologist for biopsy and get a real treatment.

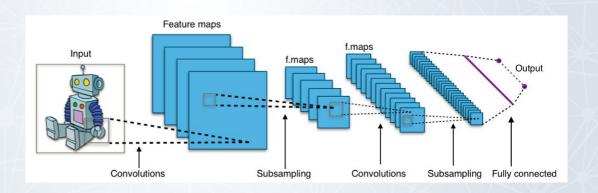
Every patient and every diagnosis trains the Artificial Intelligence delivering better care to more people and saving more lives.



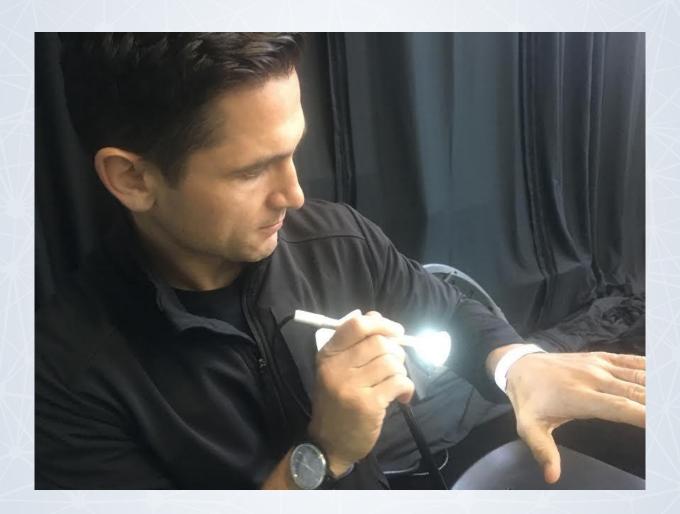


Solution

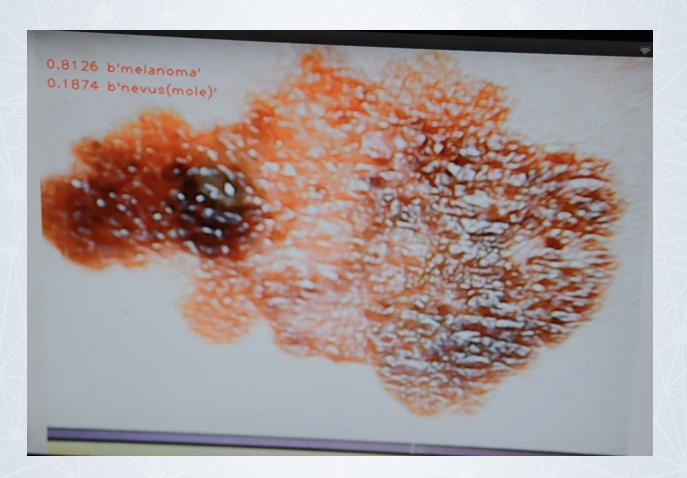
A cloud AI service that classifies skin conditions and recommending the right treatment and follow up. The service would be available through special high definition camera equipment, embedded in insurance and provider mobile apps and available on the web.

















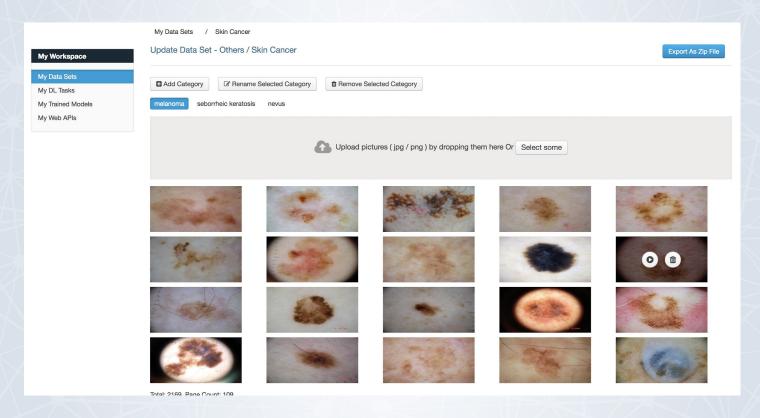
Sources of Data

- 1. Stanford already supported one study
- 2. University of Washington Mike's alma mater
- 3. Fred Hutch
- 4. UCSF





Power Vision Al





Power Vision Al





Who cares and why?

Insurance Companies

- Detecting cancer early lowers the costs of treatment.
- Getting people more engaged in their software helps them with population analysis and risk planning.

HMOs:

- Their goal is to have healthier population
- Cost of care of a person dying of cancer is way more than early detection.

And obviously patients because having cancer is devastating!



Events and Demos

- 1. TechCrunch San Francisco 2017, San Francisco, CA
- 2. STRATA Big Data NY 2017, New York City, NY
- 3. NIPS 2017 Long Beach, CA
- 4. Al Academy Workshop 12/2017, Long Beach, CA
- 5. ACM SIGSCE 2018 Baltimore, MD
- 6. SOLVE: Healthcare #IntelSolve 2018, San Francisco, CA
- 7. O'Reilly AI Conference NY 2018





Target Customers and Partners

- 1. Kaiser they perceive the total cost of ownership
- 2. UCSF
- 3. Blue Shield
- 4. Teladoc
- 5. Walgreens



Go To Market in the Order of Priority

1. HMOs and Insurance companies:

- a. A lot of customers at once.
- b. Monetization on the entire population of insured.

2. Walgreens and other drug stores:

- a. There is already a precedent with blood pressure monitoring in the stores.
- b. Might be tied to Walgreens rewards.

3. Direct to consumer:

- a. Freemium model on the web.
- b. Allow hospital and doctor advertisement.



Team

Mike Borozdin Co-Founder Engineering

- 20 years in software.
- 9 years at DocuSign
- 3 years at Microsoft
- Exec at multiple startups.



Peter Ma Co-Founder Engineering

- Software (15 years)
- 5 Startups (1 in EMR)
- Intel Software Innovator
- Samsung Championship
- Verizon (4 years)



Sarah Han UX & Design

- Design (4 years)
- Software (3 years)
- China-US Young Maker Semifinalist 2016, 2017
- SAP Esri Hackathon Grand Winner, 2018



Johnny Madrid *Biz Dev*

- Truman Scholar, Stanford
- Goldman Sachs
- Lombardia Capital Partners



Wesley Ryan Marketing

- Published Writer
- 2 years in Copywriting
- Speaker at the Two-Year College English Association, 2015



Christine L. Brady Marketing

- Marketing (2 years)
- Western States Communication Association (WSCA) Scholarly Conference Presenter, 2017





Advisors



Dr. Harold Milstein, MD

Dermatologist



Dr. Eric Wong, MD

Primary care



Roadmap

	Raise seed round (\$2MM). Get into accelerator. Build the Al engine.	
H1 2019	Start the FDA process.	
H2 2019	Finish building product. Clinical trial.	
H1 2020	Launch with Major partners. Raise Series A (\$10-\$12MM).	







FDA

The Food and Drug Administration's (FDA, the Agency, or we) Center for Devices and Radiological Health (CDRH or Center) is announcing its Software Precertification Pilot Program. The program aims to evaluate a new approach toward software products, including a precertification program for the assessment of companies that perform high-quality software design and testing. This voluntary pilot program is part of FDA's ongoing efforts to develop pragmatic approaches to balance benefits and risks of digital health products. **FDA intends to develop a precertification program that could replace the need for a premarket submission in some cases and allow for decreased submission content and/or faster review of marketing applications for software products in other cases.** During the pilot program, FDA customers, including pilot participants, will have the opportunity to provide input on the development of the precertification program.



Major Risks

FDA	FDA doesn't know how to deal with AI yet	This could be a great way to get in given that we have a good cause and are willing to work with them
Insurance Companies and Kaiser	Medical field is risk averse	We are involving them early
Data Sources	UW, Stanford, UCSF might not want to share the images	



Business Model

Primary Care EMR Integration (per API call)



Reference Materials

Nature.com paper on Stanford findings:

http://www.nature.com/nature/journal/v542/n7639/full/nature21056.html, http://sci-hub.cc/10.1038/nature21056

Stanford Study on using AI for skin cancer:

https://www.youtube.com/watch?v=toK1OSLep3s&feature=youtu.be

Teladoc IPO - disrupting health delivery:

https://rockhealth.com/deconstructing-teladoc-ipo-s-1/

FDA software certification process:

https://www.federalregister.gov/documents/2017/07/28/2017-15891/fostering-medical-innovation-a-plan-for-digital-health-devices-software-precertification-pilot



