Moderator: Adi Gaskell

What changes have you seen in the health-tech world in the last 18 moths?

Caroline Amblard-Sai:

* During COVID it was interesting to see how many start-ups were capable of pivoting towards solutions that could help battle the pandemic. Which is from common cases unusual, but a lot of them needed it for their survival, as there were not many other possibilities.

Tamas Bekasi:

* There are many regional variations as for technologies deployed (tele-medicine, etc..)
* One of the most interesting cases of tele-medicine is Romania, as for its poorer healthcare infrastructure
* EIT Health has brought a big contribution towards knowledge sharing between countries and start-ups

Nina Dremejl

* Suddenly with the whole world going online, COVID boosted start-up market, as a lot of big companies looked to start-ups for solutions, not the other way around, again, for example with tele-medicine

Petr Šrámek

* Last 24 months have been interesting concerning the longevity of productive mid-life part of life. And, of course, COVID has accelerated this development by a lot.
* Chronological age vs biological age can vary by up to 20 years, which we can scientifically measure.

Filip Tvrdek

* We have not been investing into healthcare before, but one area are we are keen on investing and exploring is female healthcare, as there are many differences between males and females.
* We can expect to see faster time to market with medications.

Tamas Bekasi on EIT/startups:

* This is the golden era for start-ups, as there is constant need for innovation.
* The unsynchronised development of products vs the business spot is still a problem. In which we can kind of learn from Israel, as they are good in marketing, something, that European start-ups are still trying to learn.
* Re-fragmented distribution of information concerning funding in EU is also a problem, as pre-seed start-ups struggle to find investors, as they are not as attractive, in which EIT Health could help.
* Time to market is something that needs to be worked on in EU (US market entry is much easier)

Nina Dremejl on elongated time to market:

* Healthcare time to market is very influenced by if start-ups require clinical trials, if they do, their time to market could be in years.
* One thing we are seeing in Slovenia is that there is currently nothing in place to help start-ups in clinical trials.

Caroline Amblard-Sai on importance of start-ups capability to pivot into new areas:

* It is important for start-ups to listen to investors telling them what their weaknesses are and where their company is going.
* Start-ups should use not only the investors money, but also their expertise and knowledge.
* It is harder to expand beyond start-ups home region, if they do not have sufficient funding/there are no public funding opportunities in where they are based. You must be really good.

Petr Šrámek on different coming to market strategies:

* Finding the right strategy for start-ups differs case to case, for which Longevity Fund has assembled an interesting team of consultants.
* Valuation differs market to market, the US market is more valuable, but there are also negatives.
* Start-ups in US moving forwards to market are faster, than in EU, market fragmentation is not helping.

Tamás Békasi on on EIT market expansion – Africa:

* There is a big market opportunity for expansion in Africa
* African market is reacting a lot more wisely, due to certain conditions, to innovation in healthcare.

Sum up something you would like to see in the med-tech world in 2022 in 240 characters, animated GIFs are allowed.

Petr Šrámek:

“I would like to see a better consensus on biomarkers of health/aging – diagnosis of all health. After we reach a consensus, we can start to implement it as a final step of clinical trials, currently, the regulations and opinions are still really fragmented”

Filip Tvrdek:

“I would like to see the global health-tech sector learning from the recent crisis to make them better working/more efficient, finding more ways to improve the healthcare”

Caroline Amblard-Sai:

“I would like to see a step-back from the new medical device regulations which makes market access a lot more difficult, on one side US’s FDA has implemented fast track implementation, as on the other side EU is making it more difficult. Regulation should not kill innovation”

Nina Dremejl:

“My wish is for research to become more commercialisation oriented; we need more technologies from the universities out on the market”

Tamás Békasi:

“I truly hope that more and more countries reimbursement system will grow up to level of innovation where we are now, because, especially in the healthcare field, many of the innovations are just dying because they cannot get into the reimbursement system, or if they can, it takes years. We need to have a more flexible reimbursement system all over Europe, country by country, but on the European level as well.”