

The Next Frontier Of Medical Education

How Augmented & Virtual Reality Can Help the Healthcare Sector

Company Highlights

- Market-leading Position: world leader in Augmented Virtual Reality (AVR) based knowledge transfer
- Proven Staged Strategy:
- Eon Human 2.0 government solution that can uplift millions of smart student & smart workers
- Classroom 3.0 that enables academic institutions to help students
 Learn faster, remember longer and make better decisions and
- Industry 4.0 that enable enterprises to upskill their workers
- Mission-driven Organization: EON Human 2.0 is bridging the gap between man and machine
- Track Record With Blue-chip Customers: including Exxon, GSK, Honeywell, GE, Mercedes, China Merchant Group, NTU, J&J, Shell and Pearson.
- Massive, Disruptive And Growing Market: AVR \$100B by 2020.
- Enterprise-class Avr Saas Platform: Securely creates, stores, analyzes, distributes and publishes AVR agnostically fueled by AI, IoT and GIS
- **Industry-leading Management Team:** proven experience in Enterprise solutions, Education and ICT.
- Scalable Saas Based Platform: compound annual growth rate of the order values is expected to grow with over 50% annually over the next 3 years



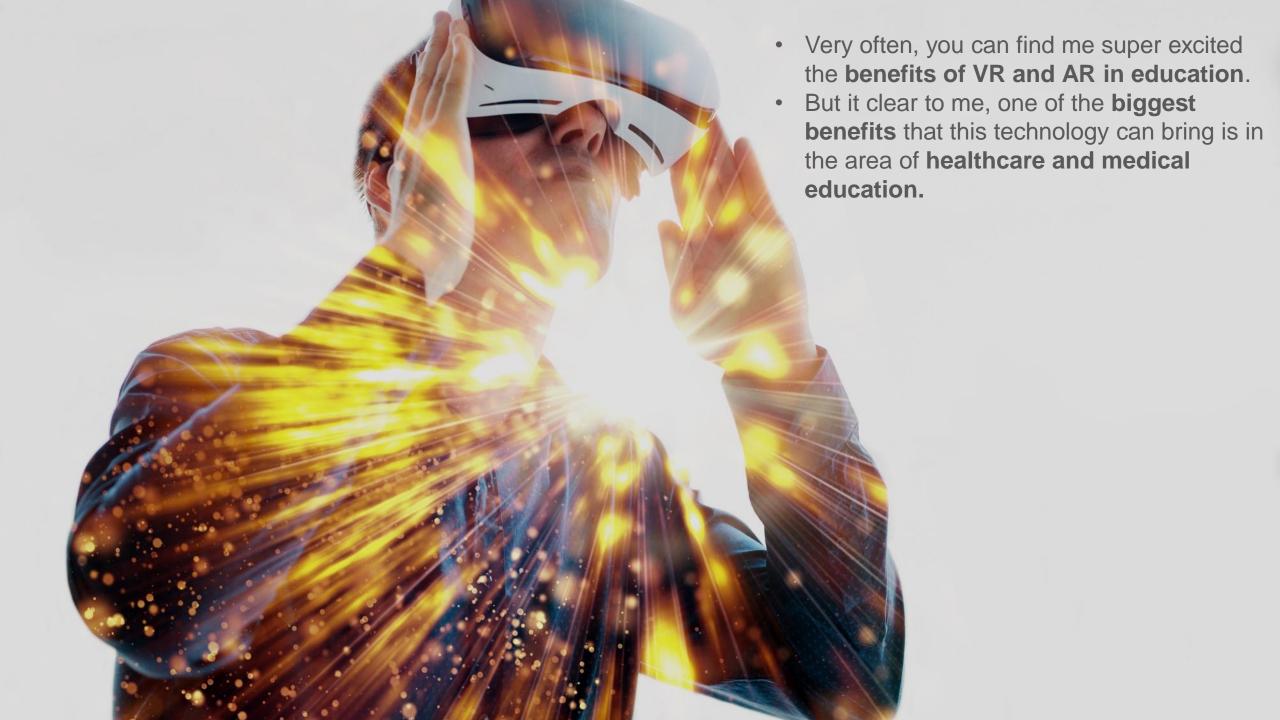


At the heart of healthcare is **empathy**.

When we talk about digital transformations in healthcare, what we're really talking about is how we can improve existing processes better, deliver efficiencies and affordability to provide better care and greater empathy to the people we are looking after.



What is at the heart of healthcare?





General Surgery
Residency
Inadequately Prepares
Trainees for
Fellowship: Results of
a Survey of Fellowship
Program Directors

Objective: To assess readiness of general surgery graduate trainees entering accredited surgical subspecialty fellowships in North America.

Methods: A multidomain, global assessment survey designed by the Fellowship Council research committee was electronically sent to all subspecialty program directors. Respondents spanned minimally invasive surgery, bariatric, colorectal, hepatobiliary, and thoracic specialties. There were 46 quantitative questions distributed across 5 domains and 1 or more reflective qualitative questions/domains.

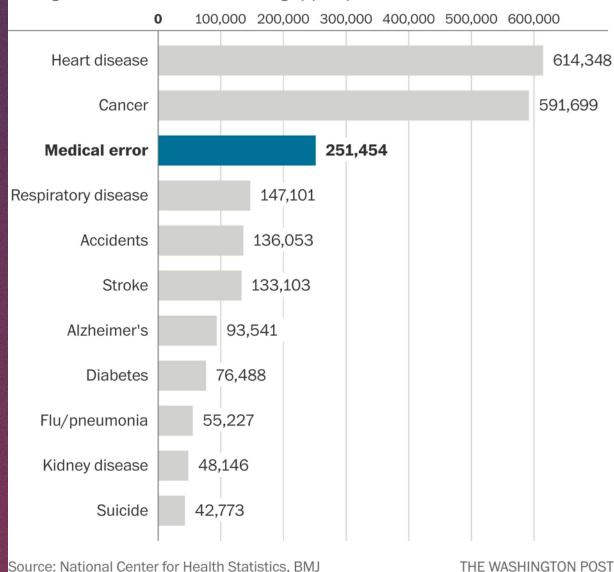
Results: There was a 63% response rate (n = 91/145). Of respondent program directors, 21% felt that new fellows arrived unprepared for the operating room, 38% demonstrated lack of patient ownership, 30% could not independently perform a laparoscopic cholecystectomy, and 66% were deemed unable to operate for 30 unsupervised minutes of a major procedure. With regard to laparoscopic skills, 30% could not atraumatically manipulate tissue, 26% could not recognize anatomical planes, and 56% could not suture. Furthermore, 28% of fellows were not familiar with therapeutic options and 24% were unable to recognize early signs of complications. Finally, it was felt that the majority of new fellows were unable to conceive, design, and conduct research/academic projects. Thematic clustering of qualitative data revealed deficits in domains of operative autonomy, progressive responsibility, longitudinal follow-up, and scholarly focus after general surgery education.

And this is translating directly into worrying statistics. A study published in another medical journal (The BMJ, 2016) found that medical error was the **third** leading cause of death in the US. Could these deaths been prevented with better and more rigorous training? No doubt.

Contentious study by Makary and Daniel (2016), but one would argue that one death by error is one death too many

Death in the United States

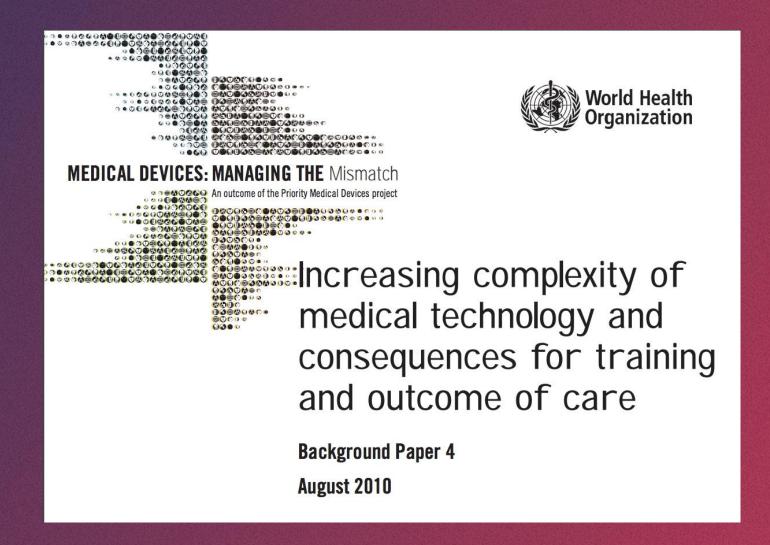
Johns Hopkins University researchers estimate that medical error is now the third leading cause of death. Here's a ranking by yearly deaths.



Many of these procedures are not only very much dependent on technology, but are also technically complex to perform.

Such is the trend: new technologies require competent health professionals who are continuously expanding their breadth of knowledge and expertise.

WHO, 2010

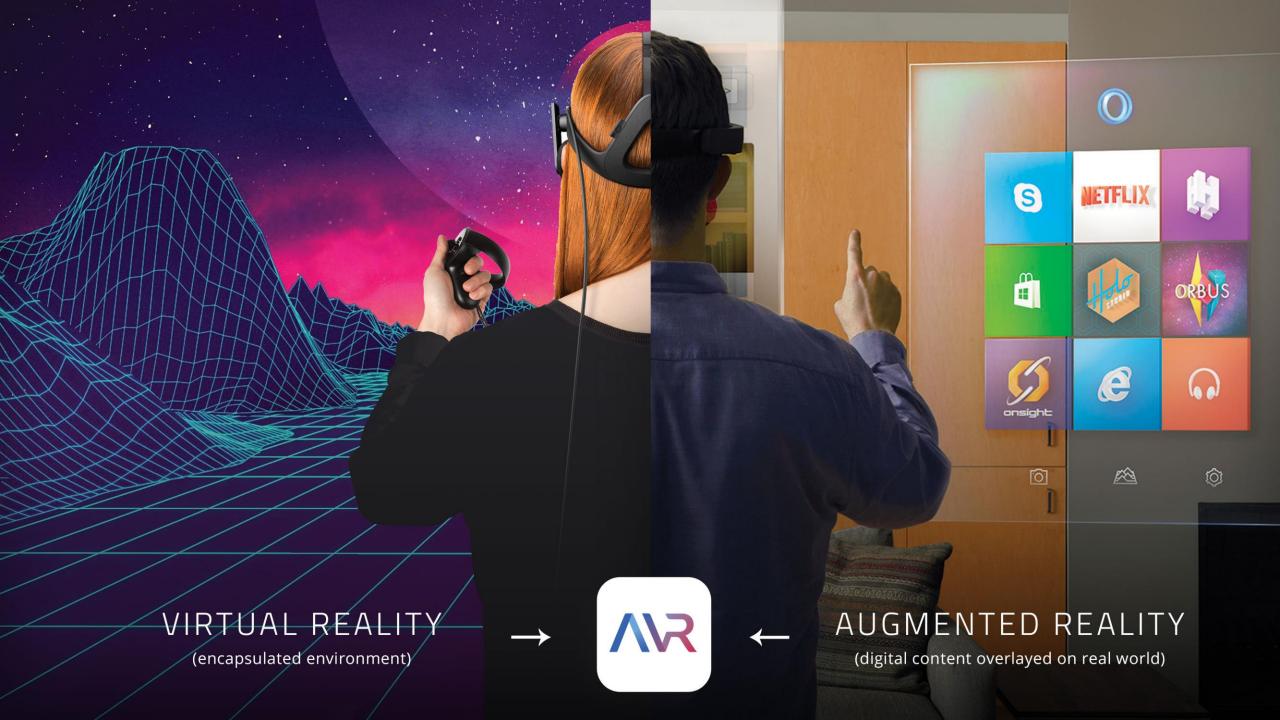


Yet with procedures becoming more complicated with the rapid development of new devices and procedures, the risks become higher with clinicians needing more training to operate safely.

OLD METHODS ARE NO LONGER ACCEPTABLE

If we teach today's students as we taught yesterday's, we rob them of tomorrow."

— John Dewey



IDC Singapore Event April 27, 2019





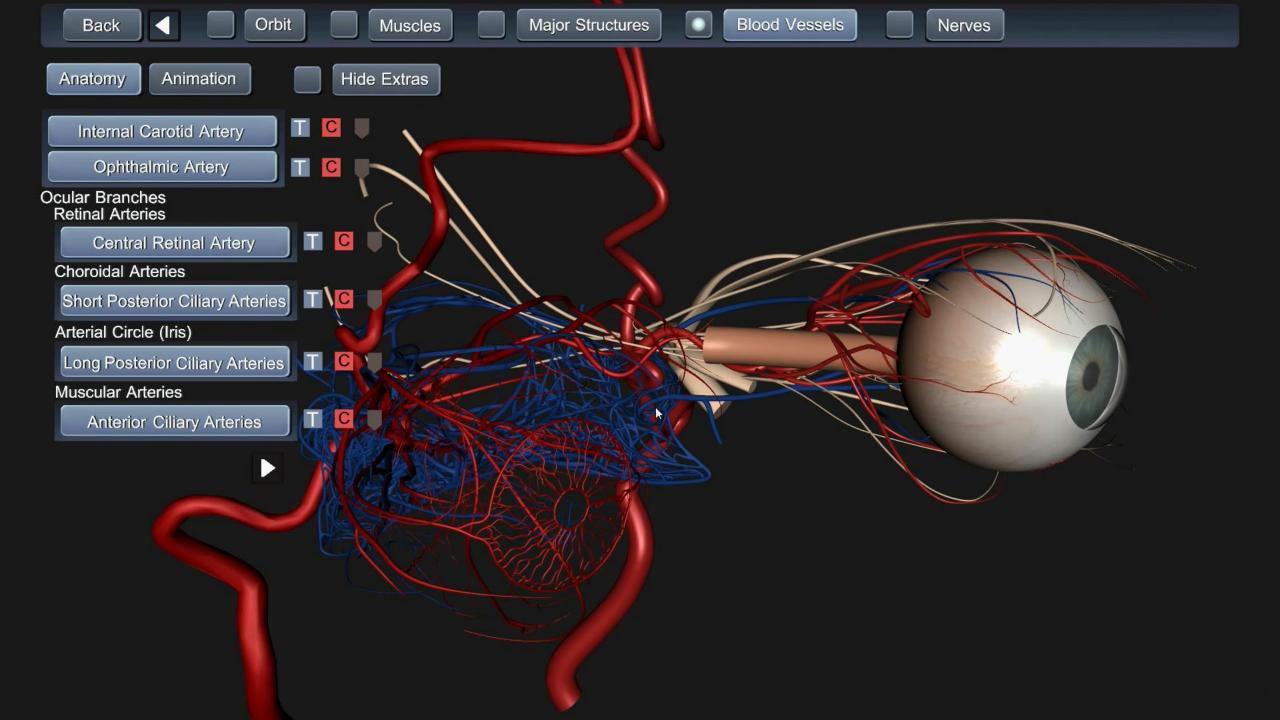
EyeSim

- EyeSim, developed together with Dr.
 Anuradha Khanna, is a Virtual Reality
 ophthalmic training simulator designed
 for educators to use in the classroom
- Learners can achieve mastery learning through deliberate practice
- Initially available modules include:
 - Ocular anatomy
 - Pupil Simulator
 - Ocular motility simulator
 - Visual pathway simulator









EyeSim

Advanced Pupil Simulator

Developed By Anuradha Khanna, MD

Subject Matter Experts: Sachin Kedar, MD Deepta Ghate, MD

EyeSim Team:

Catherine Cox, Steve Bowden, Mark Cheben, Lloyd Churches, Stevie Giovanni, Marcin Kasica, Sophia Li, Matthew Taylor, Michelle Williams, Palmer Williams, Sam Wan, Vincent Liu, Edward Laurenzi, Chris Chapman, Stephen Hart







Learning pupillary examination using the Advanced Pupil Simulator among medical students and residents

Sachin Kedar^{1,2}, Jideofor K Ndulue¹, Deepta Ghate¹,

¹Stanley M. Truhlsen Eye Institute; ²Department of Neurological Sciences, University of Nebraska Medical Center, Omaha, NE, United States.

Advanced Pupil Simulator ®



- We recently designed a virtual reality-based application, Advanced Pupil Simulator® (APS) in collaboration with EON Reality Inc. and A Nu Reality
- EyeSim APS is a virtual reality application that allows trainees to work in a simulated environment to identify and master pupillary examination
- The APS consists of a monitor (HP Zvr), 3D goggles and a stylus. The stylus replicates
 the experience of holding a handheld light used in eye exams. The goggles gives a 3dimensional representation of the image on the monitor and helps the image track the
 eye movement of the user.
- The APS has an interactive interface that simulates how medications and lighting affects
 the pupil. Eight pupillary conditions (normal, relative afferent pupillary defect (RAPD),
 Horner's, 3rd nerve palsy, Adie's pupil and physiologic anisocoria) can be simulated and
 confirmed using appropriate pharmacologic eye drops.

Methods

- 145 trainees (126 first-year medical students, 15 neurology and 4 ophthalmology residents) participated. All trainees reviewed an online power-point module, received a 15 minute demonstration and practiced pupillary examination in groups of 3 assigned to an expert faculty on the APS for 30 minutes.
- All trainees completed a Likert-type questionnaire (1 = not confident, 5 = very confident)
 before and after the session to assess confidence in performing pupillary examination.
- All trainees were objectively assessed for knowledge, comprehension, application and analysis using test mode on the APS..
- Statistical methods: Differences in pre-and post-training confidence was tested using

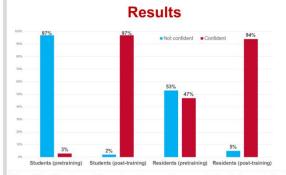


Figure 1. Participants confidence to perform pupillary examination before and after training with the Advanced Pupil simulator.

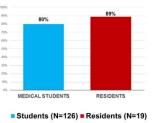


Figure 2. Proportion of participants who correctly demonstrated all steps of pupillary examination after training with the Advanced Pupil Simulator

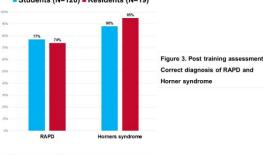


Figure 4. Post training assessment:
pharmacological confirmation of
Horner's syndrome



- 97% (122) students and 10 (52%) residents reported improved confidence in performing pupil examination after training with APS.
- 80% (101) students and 89% (17) residents were able to correctly list and demonstrate all steps in pupillary examination.
- 77% (97) students and 74% (14) residents correctly identified RAPD while 88% (111) students and 95% (18) residents correctly identified Horner's syndrome.
- Post training, students reported improved confidence in identification of all pupillary abnormalities (p=0.00), while residents reported improved confidence in diagnosing Adie pupil (p=0.00) and using pharmacologic agent to confirm anisocoria (p=0.00).

Conclusion

- Virtual-reality based practical training can shorten time to competency for critical medical examination techniques
- All trainees showed improved confidence in pupillary examination after using the APS.

Grant support



Results

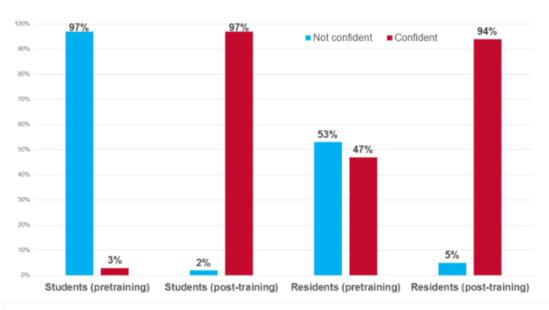


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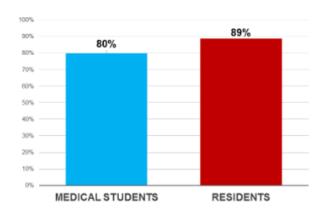


Figure 2. Proportion of participants who correctly demonstrated all steps of pupillary examination after training with the Advanced Pupil Simulator

Students (N=126) ■ Residents (N=19)



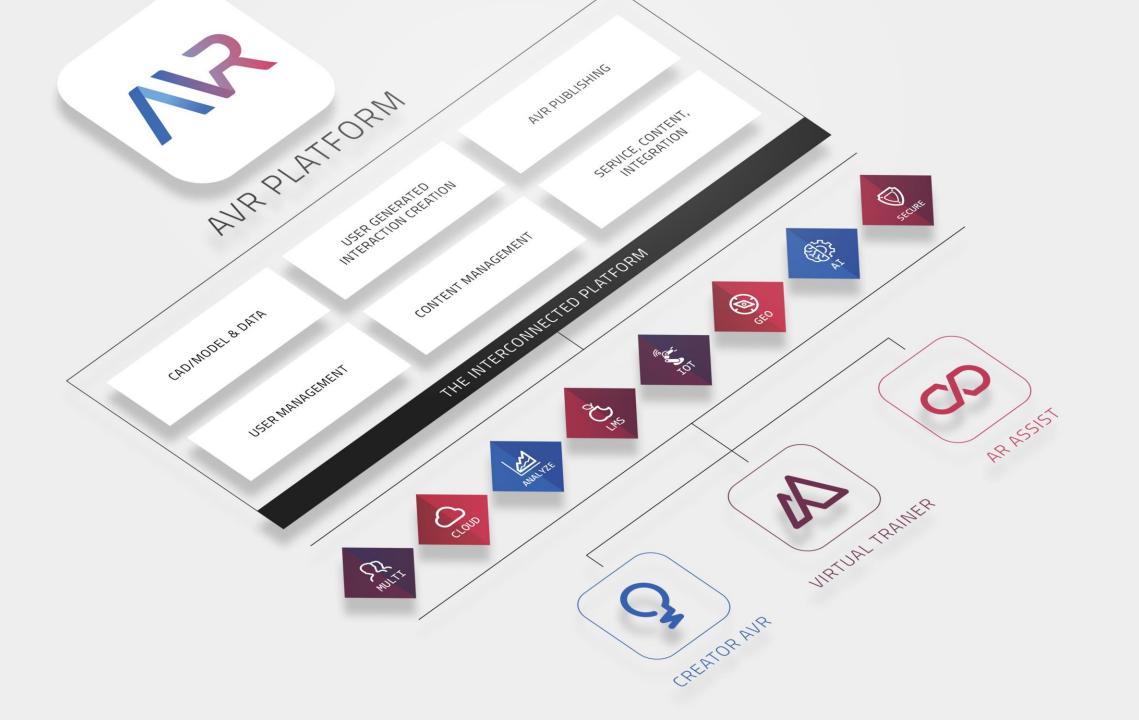
28% of Higher Education institutions (>26,000) have engaged in some level of VR deployment.

82% have not yet moved beyond the pilot stages

*2018 VR/AR IN RESEARCH AND EDUCATION SURVEY CONDUCTED BY INTERNET2

The AVR Platform





Learn

Train

Perform







CREATOR AVR

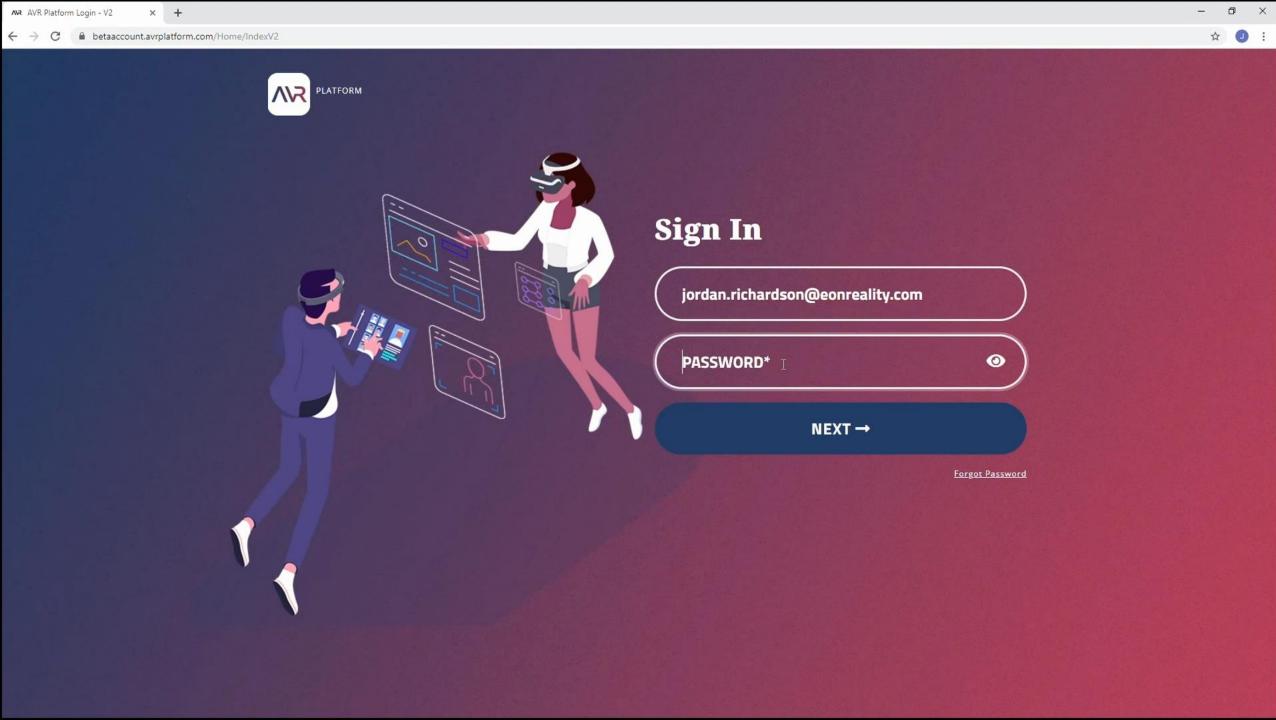
VIRTUAL TRAINER

AR ASSIST

Onboarding Familiarization Pre-training Sales Training

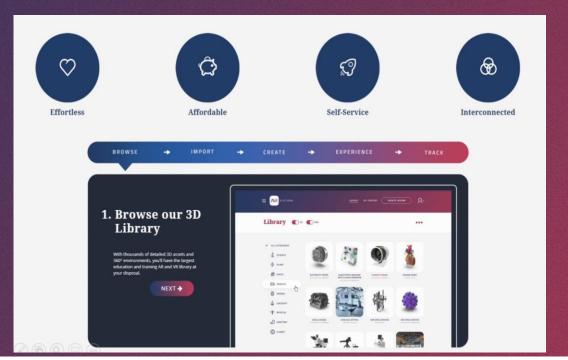
Procedure Practice Remote Training Virtual Certification

AR Assisted MRO
Remote Expert Assistance
Real Time Data Display



AVR PLATFORM – Comprehensive AVR Platform to Develop, Run, Manage, Access, Store, Host & Distr. AVR

- Effortless
- Affordable
- Self service
- Interconnected VR AR Mobile
- Access to 870,000 3D assets



VAULT - Vast Catalog of Augmented and Virtual Reality **Applications** Advanced Complete Application Addresses Specific Needs Supports advanced AVR Systems Certified by Academic Customers Marketplace with Revenue opportunities Search Most Viewed VR Automotive Configurato

https://www.eonreality.com/press-releases/eon-reality-vault-announcment/

https://betaaccount.avrplatform.com/Home/IndexV2

EASI Platform

Effortless

New Easy-To-Use User Experience On Desktop And Mobile

Affordable

- 870,000 New 3D Assets Integrated With The Platform,
- New AVR Application Vault

Self-Service

- New First Time User Experience,
- New 360 Content Creation,
- New CAD Cloud Conversion To AVR Portal

Interconnected

New Virtual Trainer Interconnected Product Features

End To End Solution For AVR Knowledge Transfer

Vault

- Complete AVR applications that address specific needs and support advanced systems
- \$67MUSD worth of content

Marketplace

Partner Developed Applications

- Partners and customers developed applications for the AVR platform - uploaded on the Marketplace and secure passive revenue
- OR outsourced applications to EON partners for example Moldova or India
- OR use VR Academy resources in centers

AVR Platform

- Effortless
- Affordable
- Self service
- Interconnected
- 870,000 assets

Top Down Bottom Up Approach

Advancing AVR Education & R&D

Eon Reality Education

ACADEMIC EXPERTS DRIVE INNOVATION IN EDUCATION

EON Reality Education is a non-profit focused on advancing the cause of Augmented and Virtual Reality (AVR) education and research.







Led By Professor Bertil Andersson

Who **reformed teaching** through introduction of **educational technology** and **collaboration with Eon Reality** at Nanyang Technological University

2007 -2011 PROVOST 2011-2017 PRESIDENT



Eon Reality Education Advisory Board Members



Bertil Andersson Chairman Former President of NTU



Ihron Rensburg Vice Chairman Former President of University of Johannesburg



Jenny Higham Principal of St George's University of London



Montserrat Gomendio Deputy Director of the Directorate for Education Education, Culture and Skills, OECD



Jose Ignacio Wert Former Minister of and Sports, Spain



Jan Carlstedt Senior Advisor - Medicine, NTU



Peter Looker Head of Learning, Teaching & Pedagogy, NTU



Chee Yeow Meng Interim Dean, College of Science, NTU



José Escamilla De Los Santos Education Innovation Director. Tecnológico de Monterrey

AVR Adoption

EON Academic Customers & Partners

































































35% Increase in Test Scores

Students Remember Longer And Increase Test Scores 86% of Students in the VR Classroom **improved their Test** Results

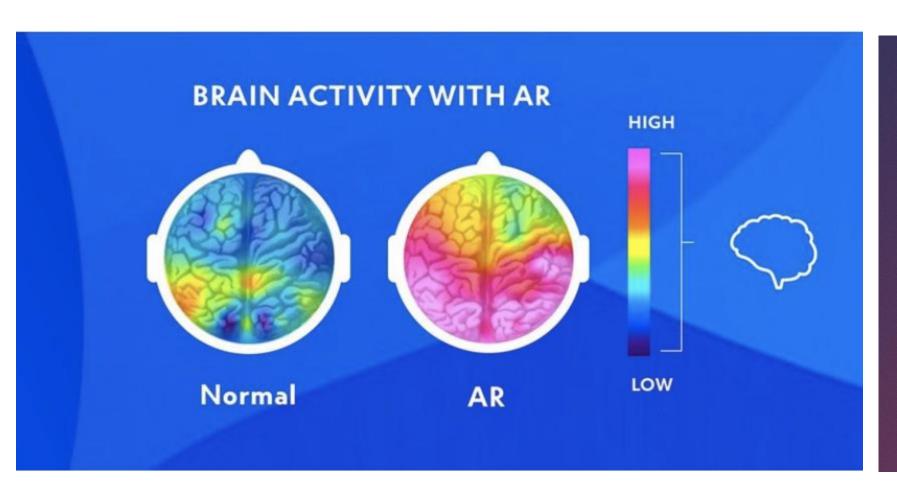
Attention levels doubled (92% vs 46%) Test Scores increased with 35%

BBC Published study

"Students can see how things function. Instead of learning about the heart statically they can see it in a solid way, literally see blood passing through the valves, see exchange of oxygen, rotate it, tilt it and zoom in," Said Prof Bamford.



70% Increase in Memory Encoding

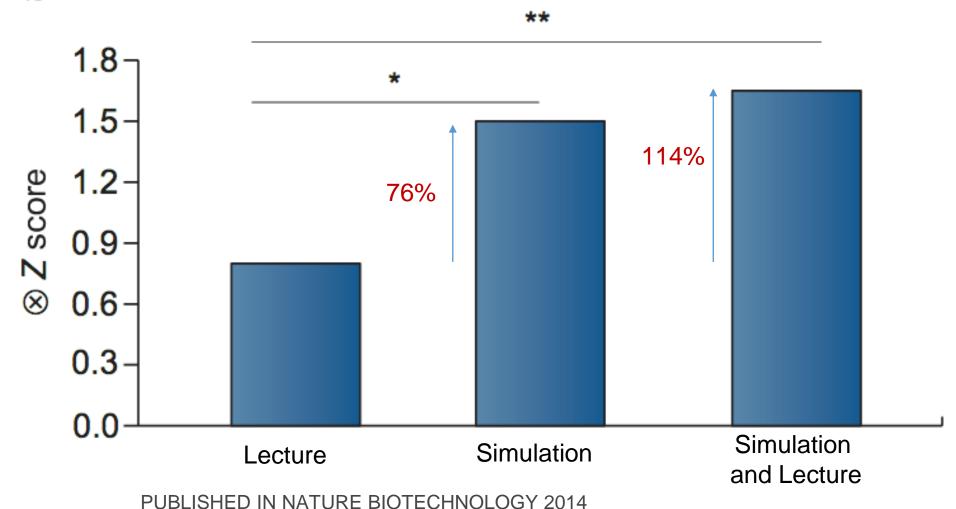


AR delivered almost double (1.9 times) the levels of visual attention compared to their non-AR equivalent.

What they found was that memory encoding was **70% higher** in the AR tasks compared to the non-AR tasks.

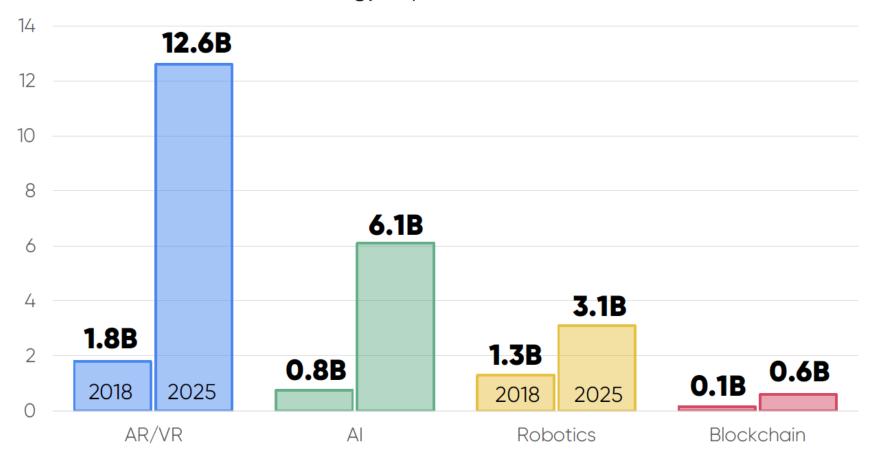


Improving Biotech Education Through Gamified Laboratory Simulations b



AR/VR Will Dominate Advanced EdTech Spending

Advanced Education Technology Expenditure 2018-2025, USD Billions



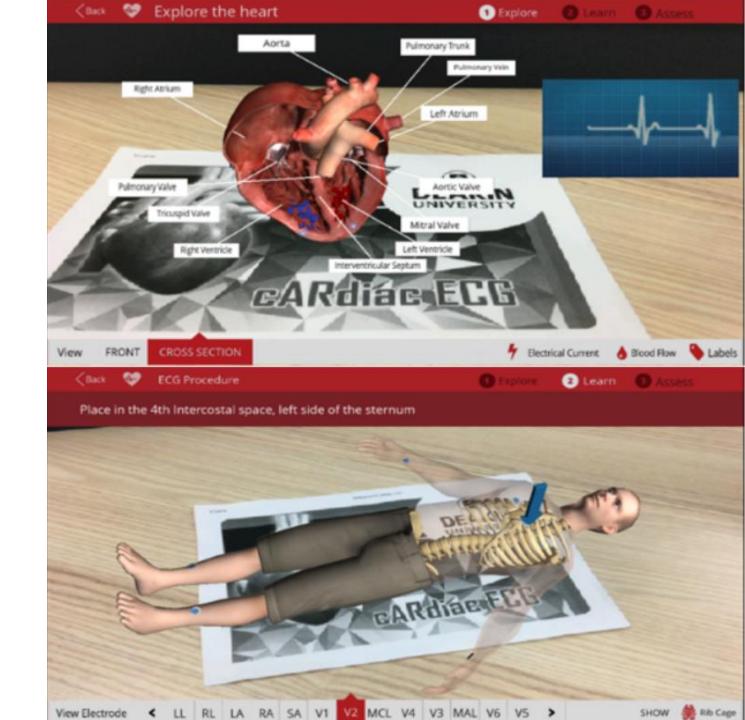
Source: HolonIQ, Smart Estimates™ January 2019

Healthcare Use Cases

Examples VR Learning

Cardiac ECG

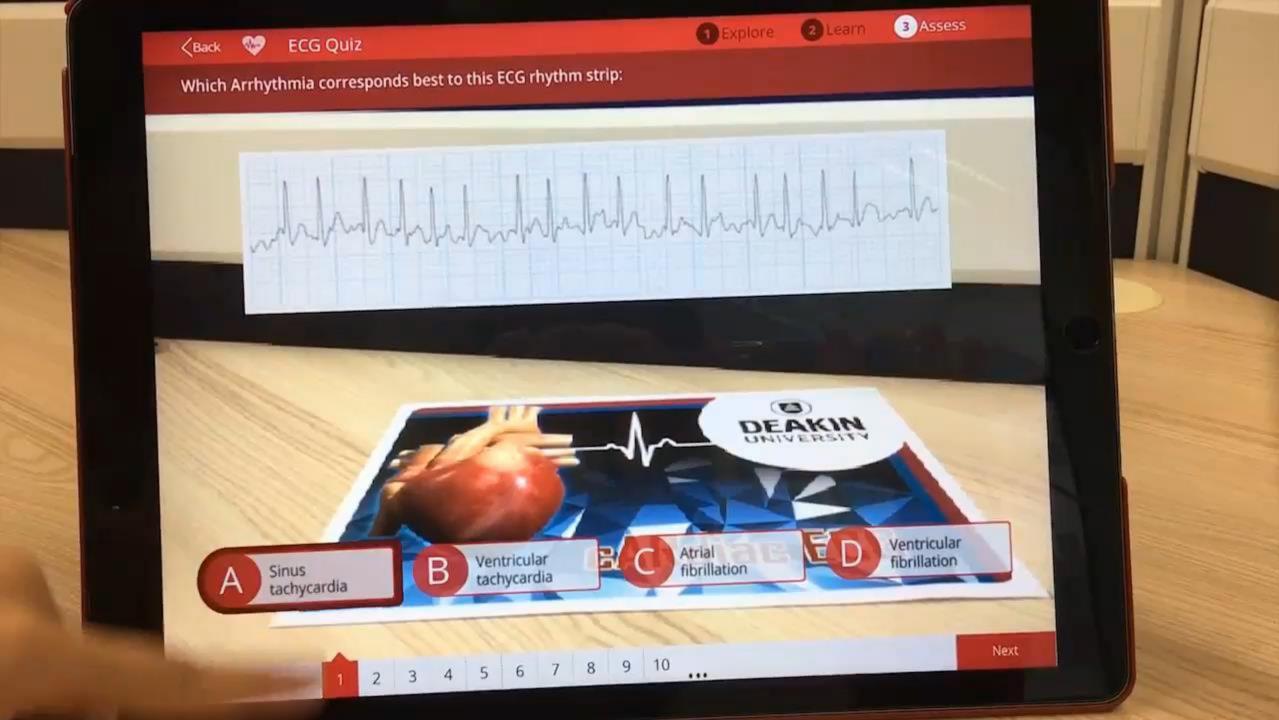
- Deakin University School of Medicine An AR module developed for the School of Medicine as part of a larger Deakin AR Project.
- This module has 3 modes: Explore, Learn and Assess.
- The Explore and Learn modes showcase a **realistic** heart model with Electrocardiograms matching various scenarios of the beating heart.
- While the **Assess mode** enables students to take on **quizzes and submit their results to their lecturers.**













Incorporating cARdiac ECG into the teaching on ECG helped me to learn this material in a new way



cARdiac ECG contributed to my understanding in a way that would not have been possible by attending a lecture or reading a textbook



I would like similar applications to be implemented into other topics/ teaching



cARdiac ECG was easy to use and understand



I found the cARdiac ECG app motivated me to learn more about the ECG



l would like to use cARdiac ECG again

NHS

 Mobile Applications for the National Health Service in United Kingdom



TENSION PNEUMOTHORAX

Skin

Nerve NHS – Chest Emergencies

o View in AR

Lymphatics

Digestive System

Reproductive

Cardiopulmonary

Layer 1

Layer 2



Normal



Affected



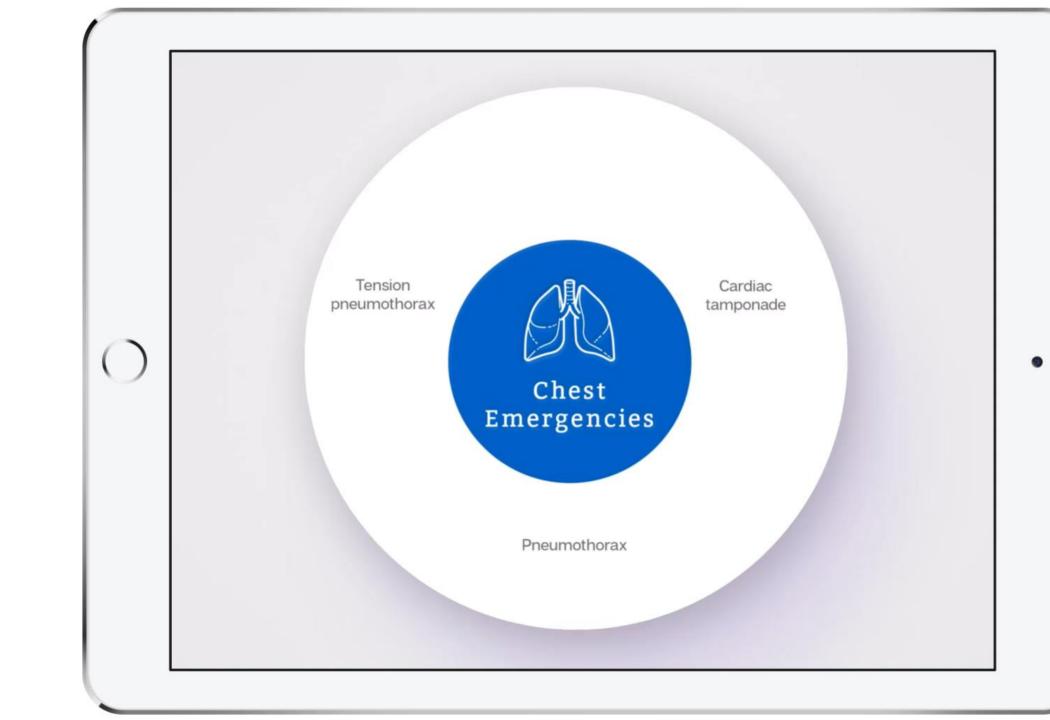
Layer Up



Layer Down















64%



Layers

Skin

Skeleton

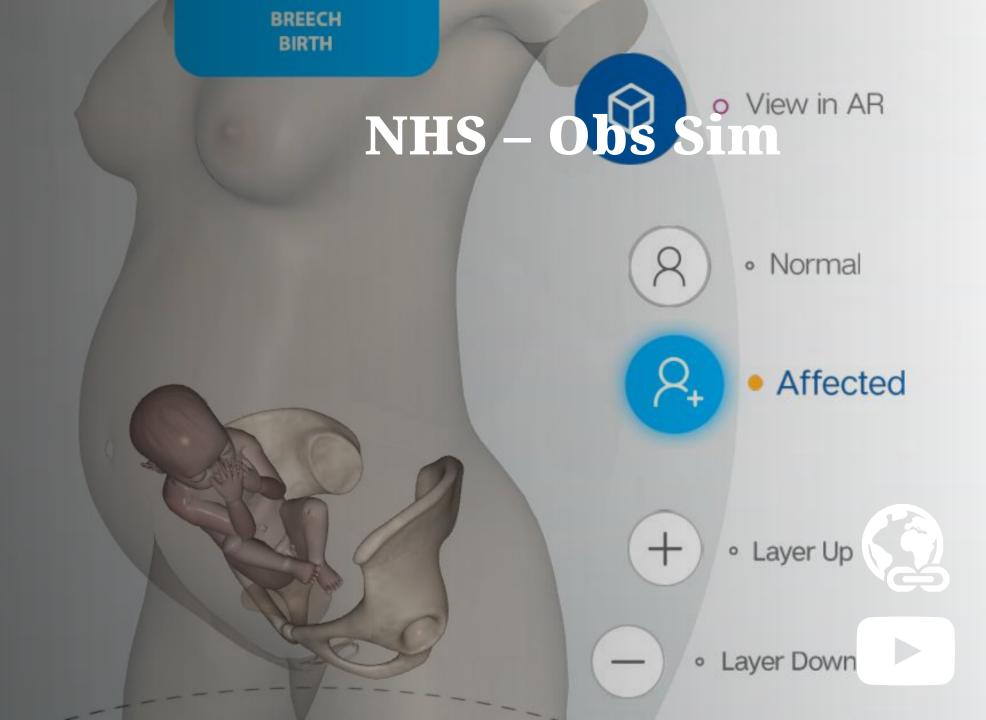
Abdominal Organs

Reproductive Organs

Amnion

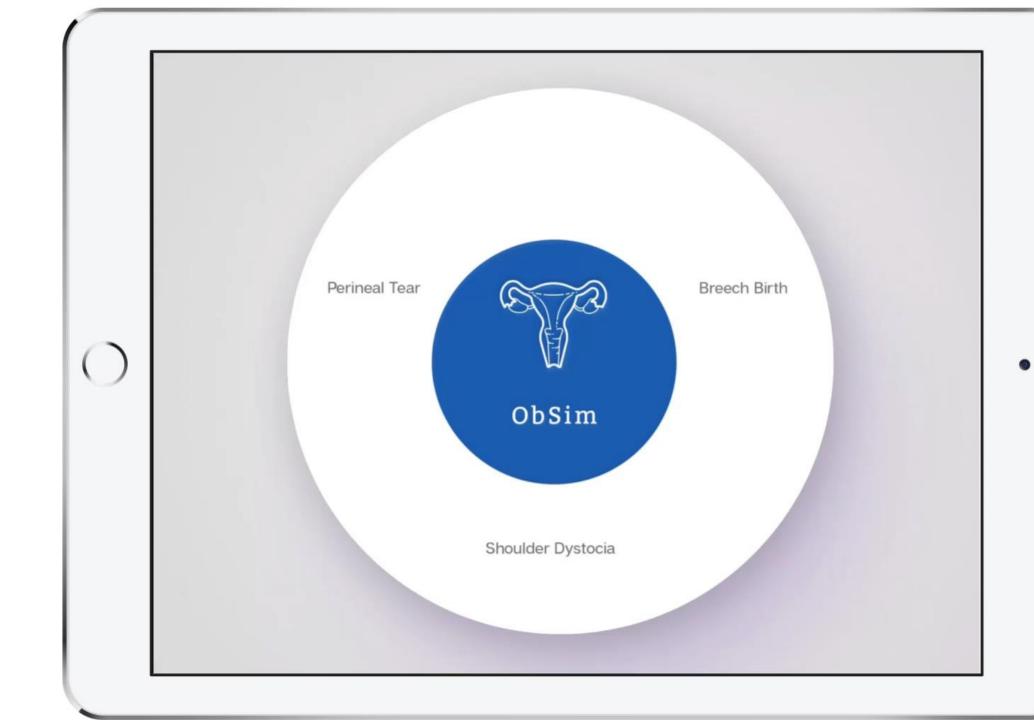
Foetus

Breech









Babeş-Bolyai University Create A Virtual Reality Application To Assess And Modify Cognitive Biases

- EON Reality, Inc., the world leader in Augmented and Virtual Reality based knowledge transfer for industry and education, and the Department of Clinical Psychology and Psychotherapy from Babeş-Bolyai University, in Cluj-Napoca, Romania, released application of a Virtual Reality based application for the assessment and modification of cognitive biases for promoting mental health, as part of the joint project "VR-Mind Regulation."
- Researchers and psychologists have regarded cognitive bias modification (CBM) interventions as a promising new approach in the treatment of mental health problems.
- CBM interventions work by changing the automatic ways in which patients with depression, anxiety and other psychological problems, process the information coming from the environment.
- However, most of the CBM procedures up until now do not accurately approximate the real-world, are not interactive, and do not immerse the patients in the experience. These features reduce the efficacy of the intervention as well as the motivation of the patients to practice with these new treatments.



"The integration between immersive virtual-reality and the advances in clinical cognitive sciences will change the future of how mental health treatments are delivered, making them more efficacious/effective, more accessible and more appealing to the patients." said Prof. Daniel David, Ph. D., coordinator of the UBB STAR Institute. "After it has been tested, we expect to have this application used by patients that have the required technology at home to use it as a tool, part of their treatment, under the guidance of a psychotherapist, monitoring their progress. We also expect that many research groups working on CBM to switch from computer-based applications, to immersive, VR-based ones, such as the application we are developing in the "VR-Mind Regulation" project."

VR application target all three types of biases, attention, memory and interpretation, both for measurement and treatment.

- To overcome these limitations, EON Reality and Babeş-Bolyai University's (UBB) STAR Institute have teamed up to develop a new Virtual Reality (VR) application that can deliver CBM interventions in an immersive environment using an ecological and interactive interface, delivered via the latest generation of VR headsets.
- The VR application target all three types of biases, attention, memory and interpretation, both for measurement and treatment.
- Mental health treatment delivered through Virtual Reality makes treatment more accessible and more appealing to patients
- The application integrates **gamification and customization features**, which will increase the adherence of the patients and their satisfaction with the intervention protocol.
- The application is also developed to keep a close record of user's behavior, which will make it a powerful research tool.



"The collaboration between Babeş-Bolyai University and EON Reality is extremely powerful as it combines the deep subject-matter expertise of the Department of Clinical Psychology and Psychotherapy and the advanced capabilities of EON Reality in Augmented and Virtual Reality applications and platform development and implementation. We are delighted to make together Virtual Reality have a positive impact in psychotherapy." said Mats Johansson, President of EON Reality.

Examples VR Healthcare Simulators

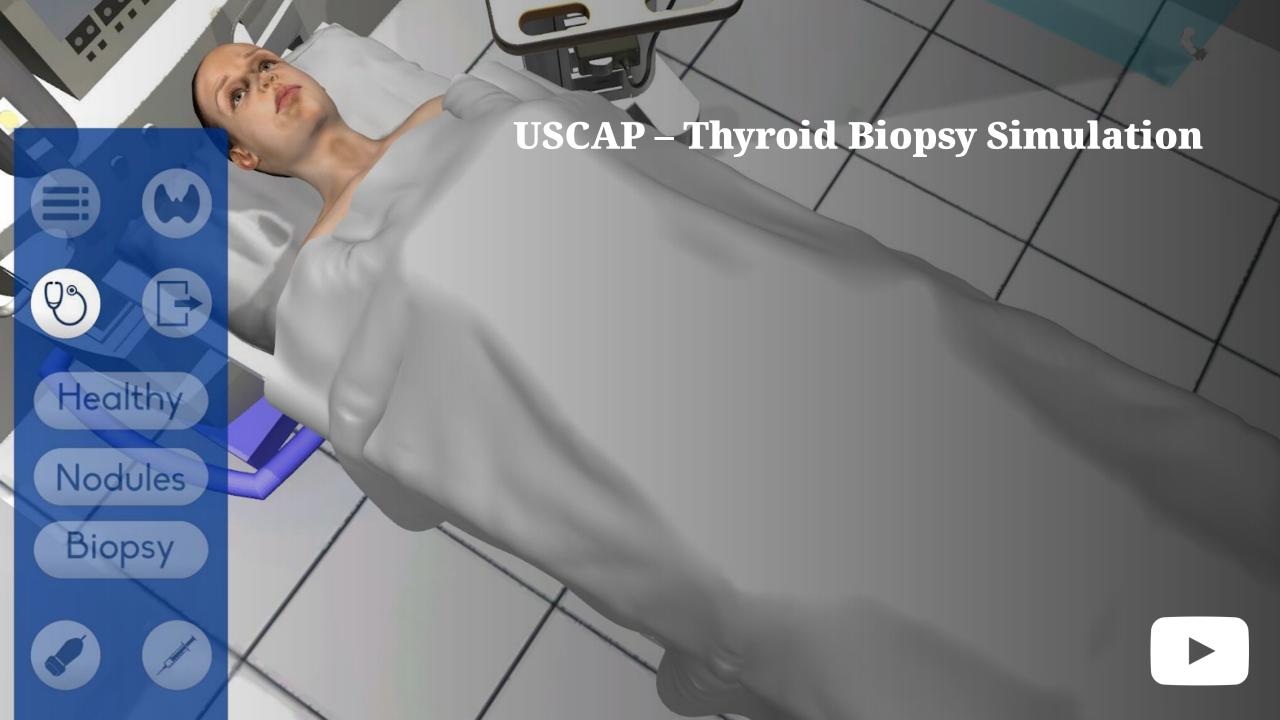
USCAP

- Mobile application for the US and Canadian Academy of Pathologists
- They teaches first year medical students how to conduct a thyroid biopsy.









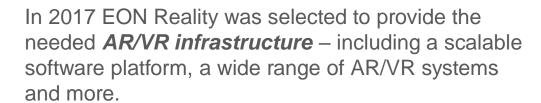
Examples VR Lab





AVR For Healthcare

In 2015 NTU launched a 5 year, **\$75 million** project in TEL (Technology Enhanced Learning) to further enhance its strength in the face of global competition. Read more **here**.



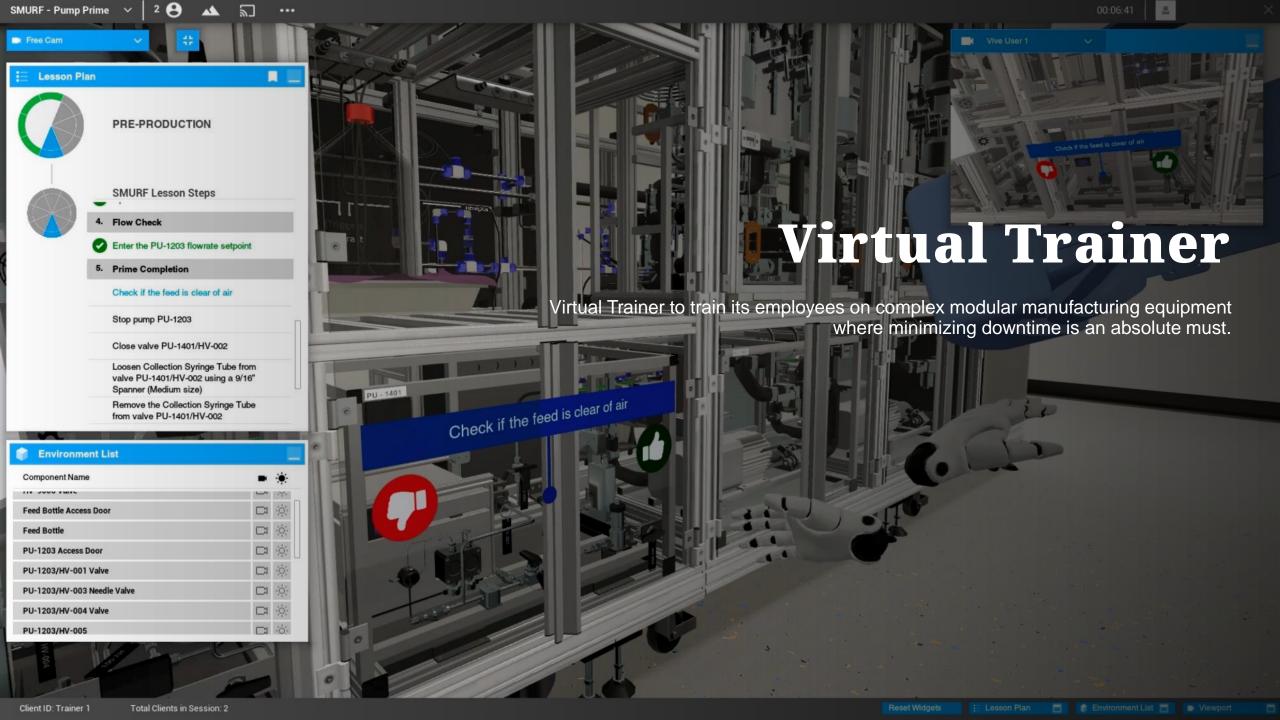
The use of AR and VR in education enables a "*flipped classroom*' solution for millennial generation:

- On campus; Virtual Labs for Engineering, Physics, Social Sciences and more
- Off campus; students experiencing AVR contents on their own devices





Examples AVR Pharmaceutical Production Training & MRO



Example AVR Patient Care Communication

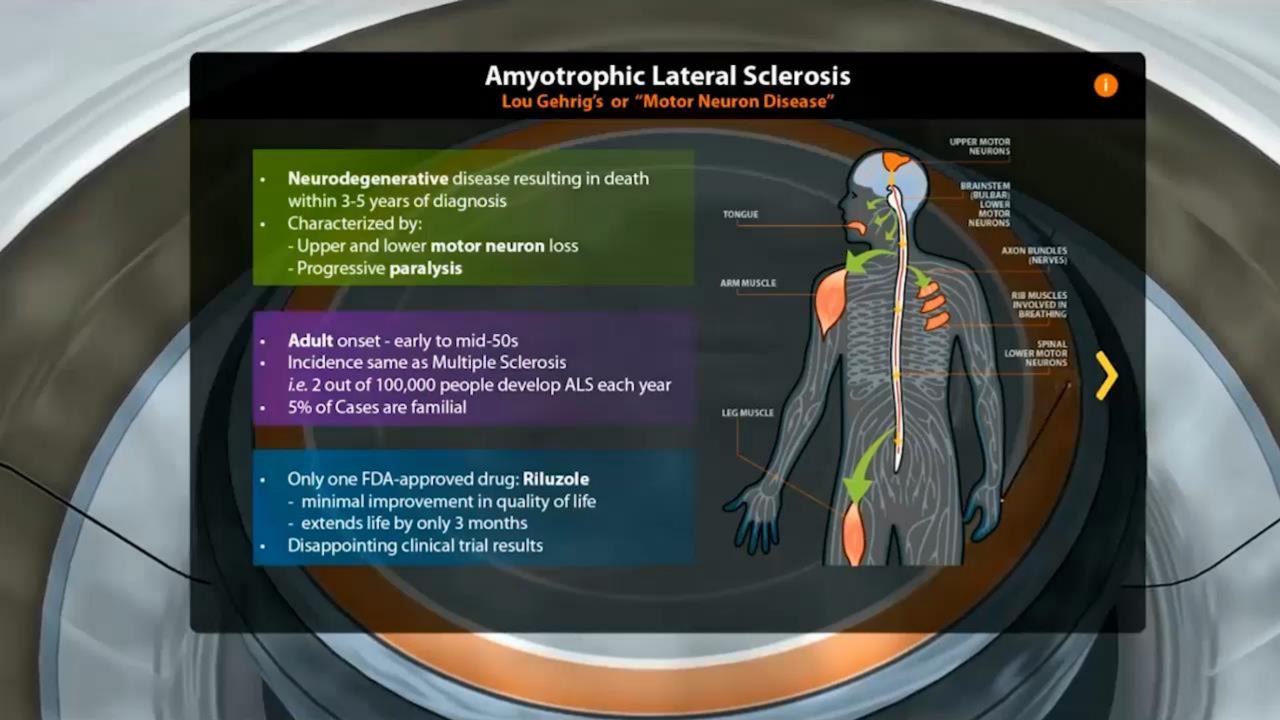


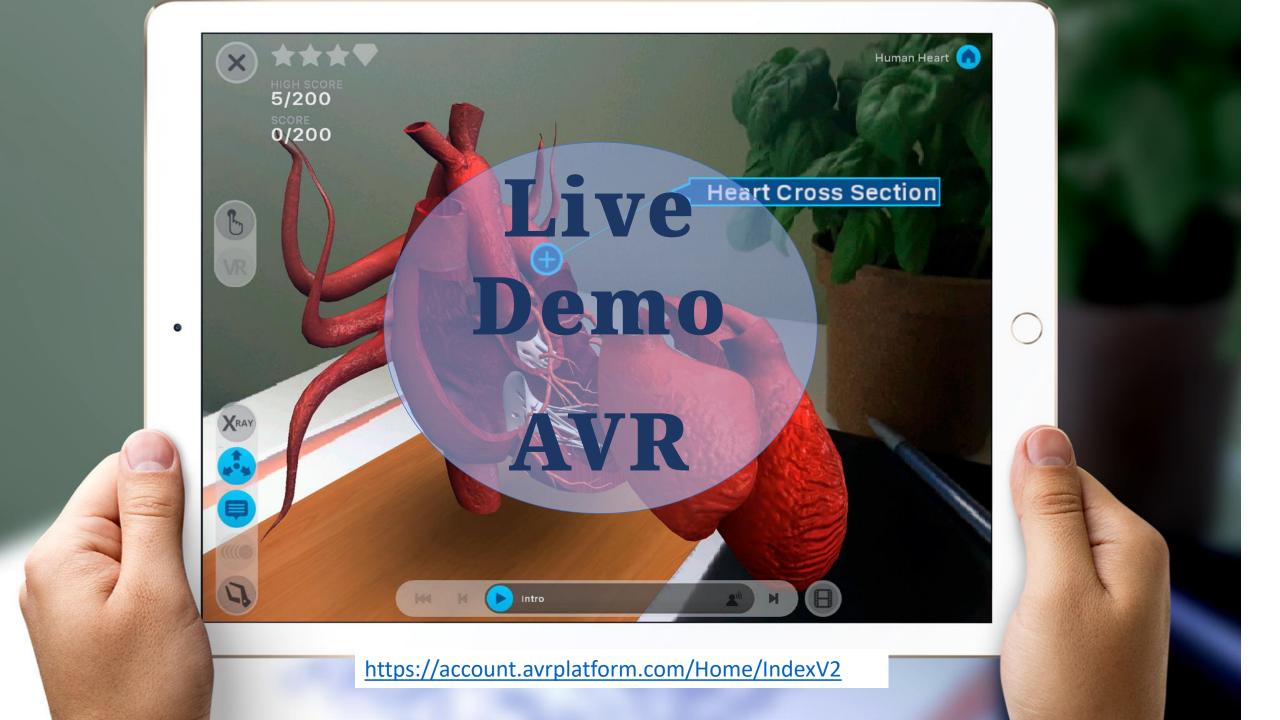
EON Reality developed an AVR application for the Neural Pathways Discovery Performance Unit in Singapore, to help visitors visualize their medical vision for combatting Amyotrophic Lateral Sclerosis (ALS).

The Virtual simulation begins with a healthy person and shows the progression of ALS as they take ill.

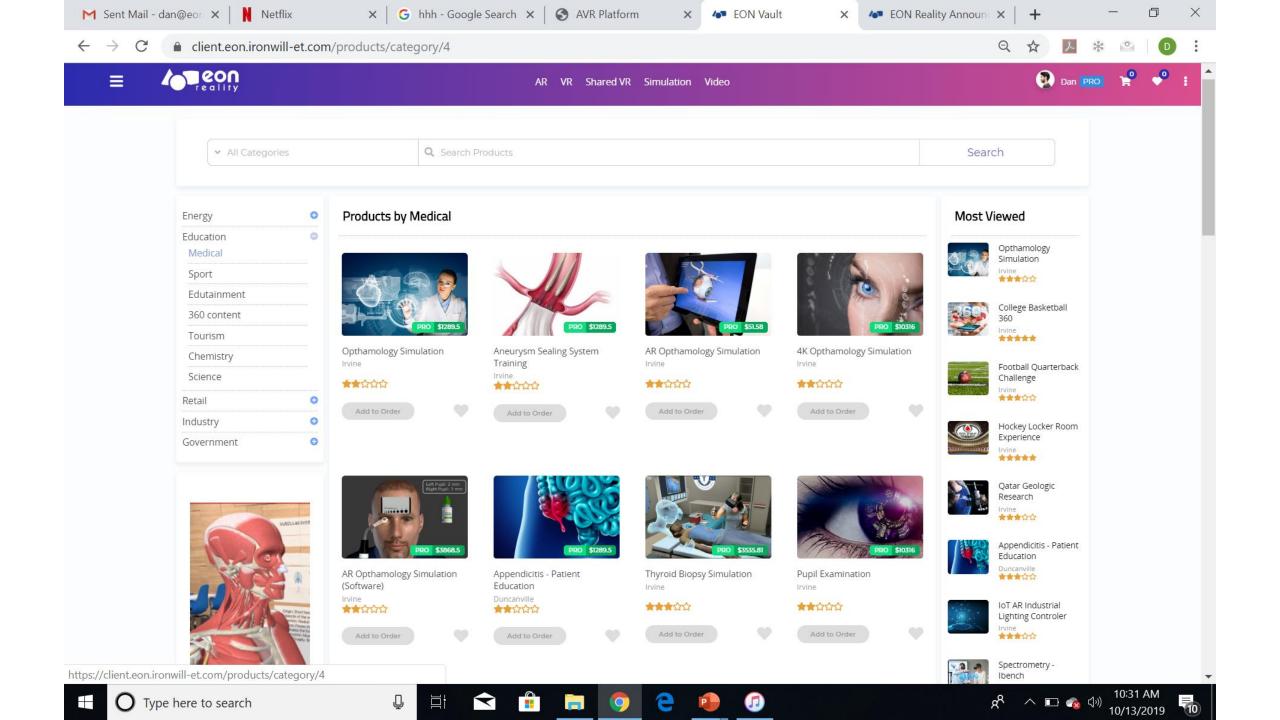
Users are also able to see how GSK proposes to stop the disease in the future.

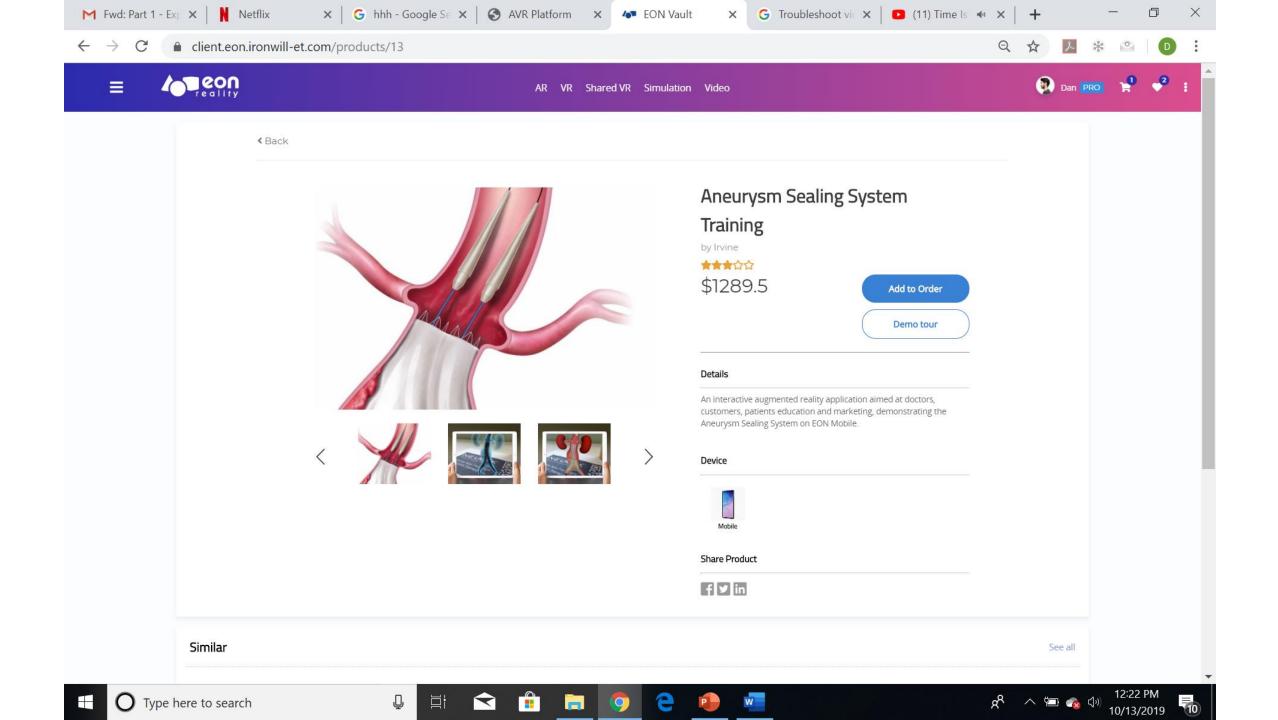
> The disease may cause astrocytes to release toxins which in turn cause motor neurons to degenerate. It may also develop harmful proteins within the muscle, thus causing the axon to disconnect from the muscle. All this lends to loss of impulses sent to the muscle fibers. When muscles do not receive the messages that they require to function, they begin to atrophy.

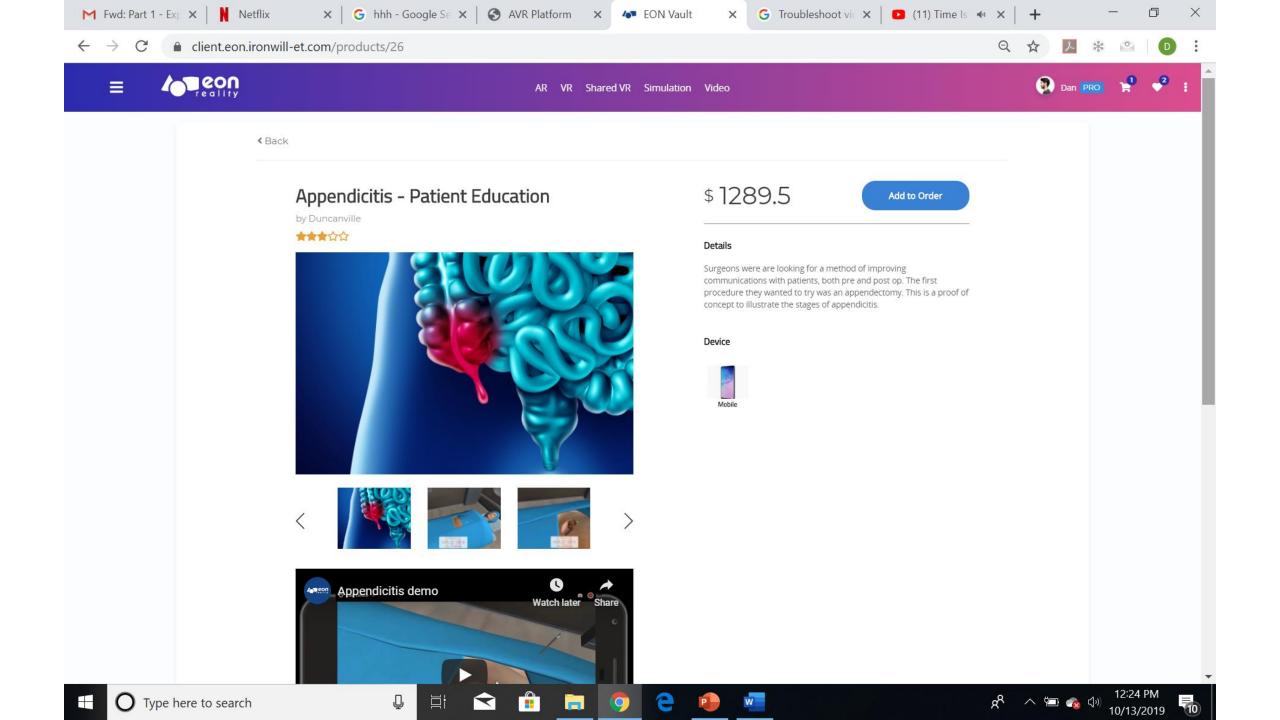


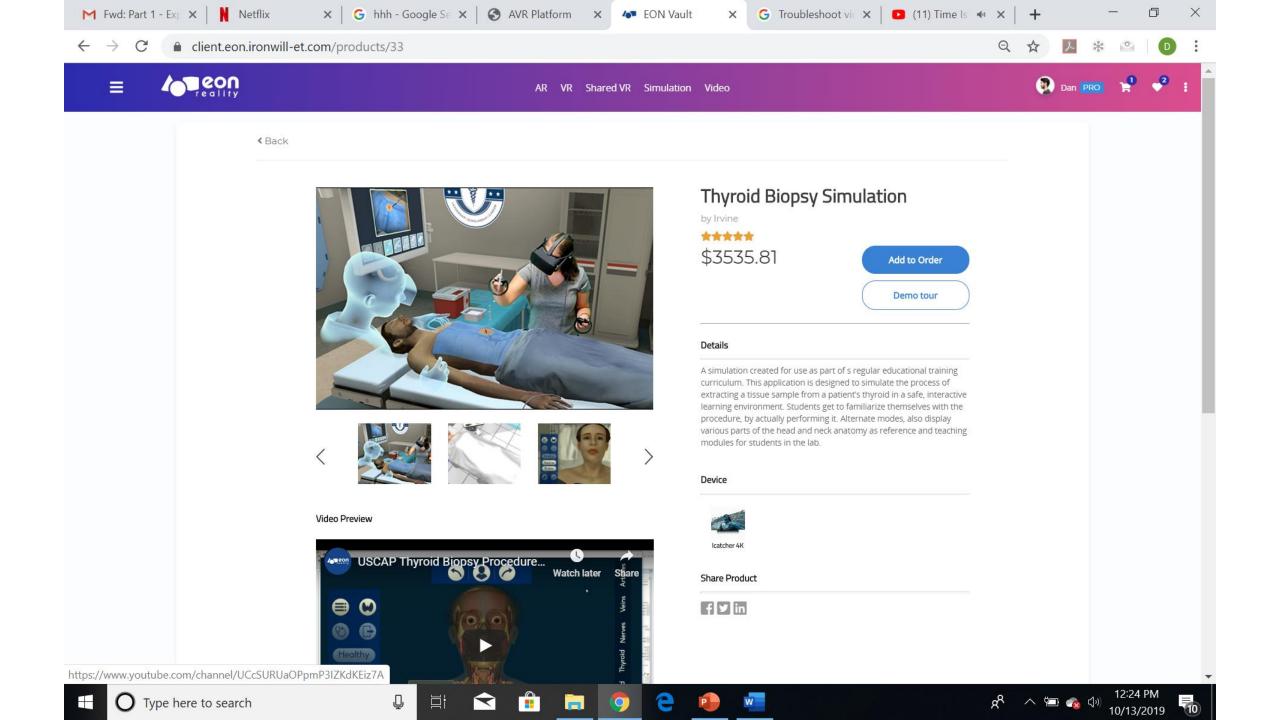


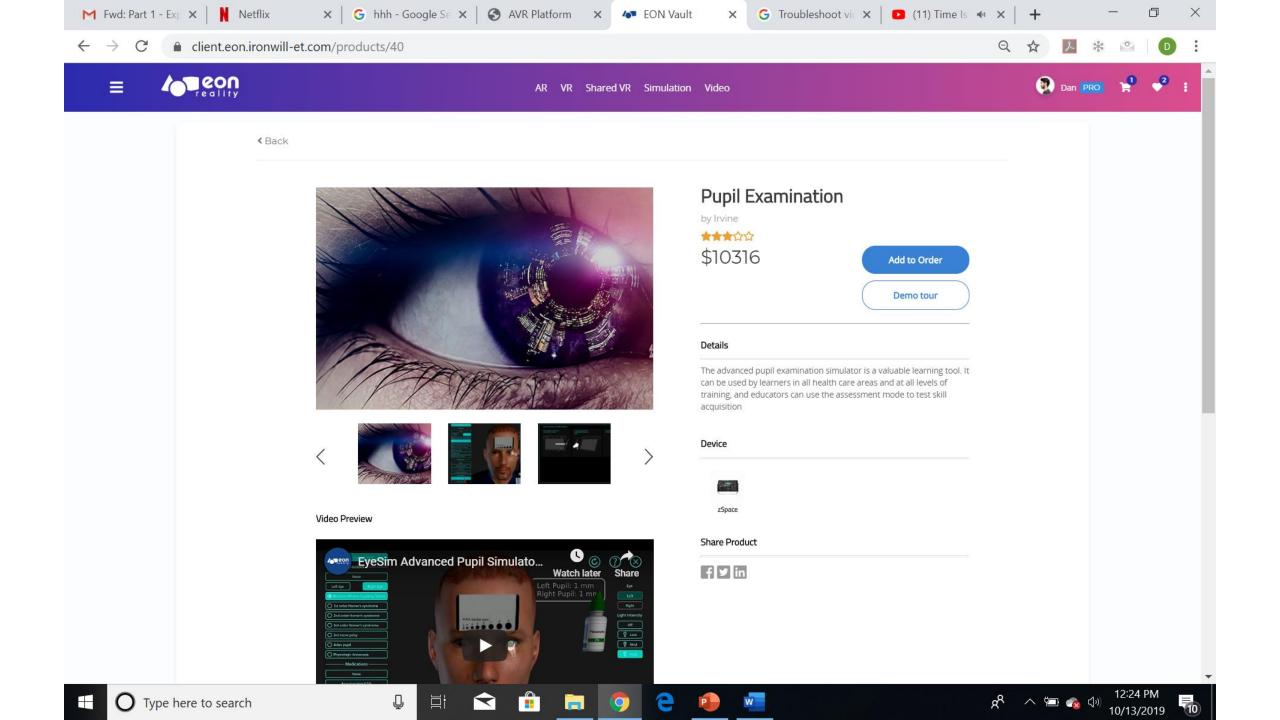
Medical Vault

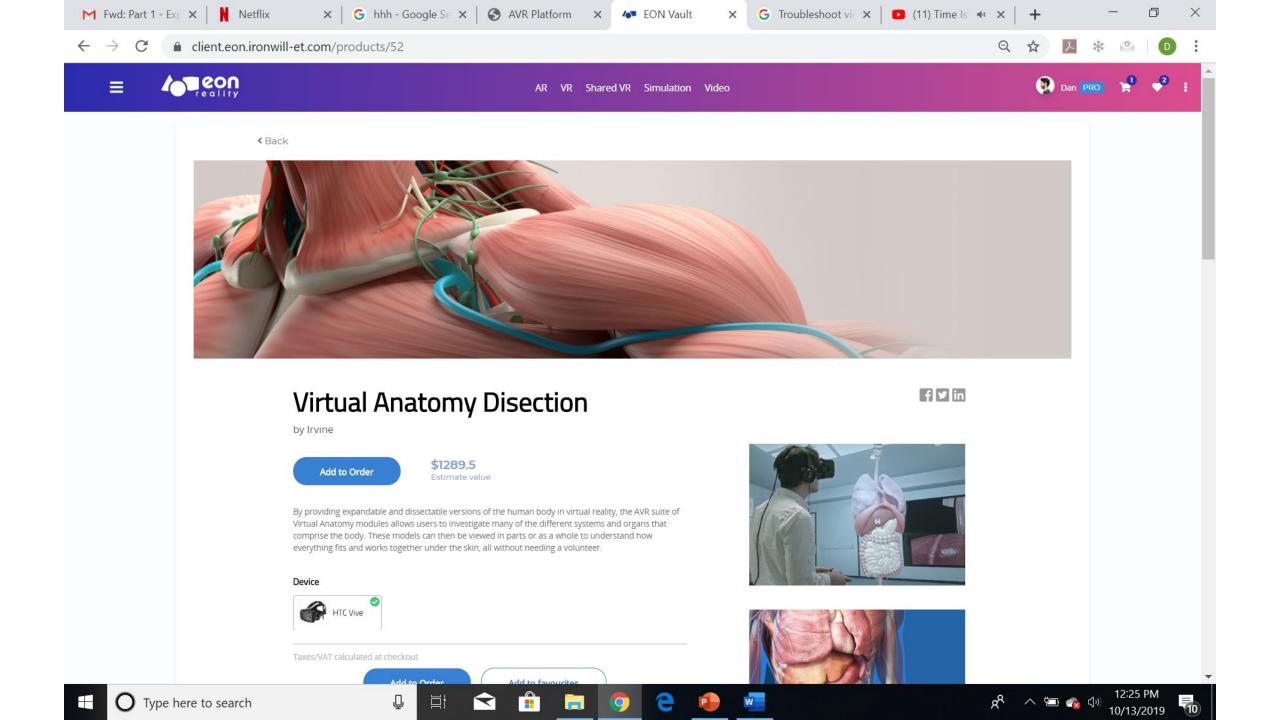


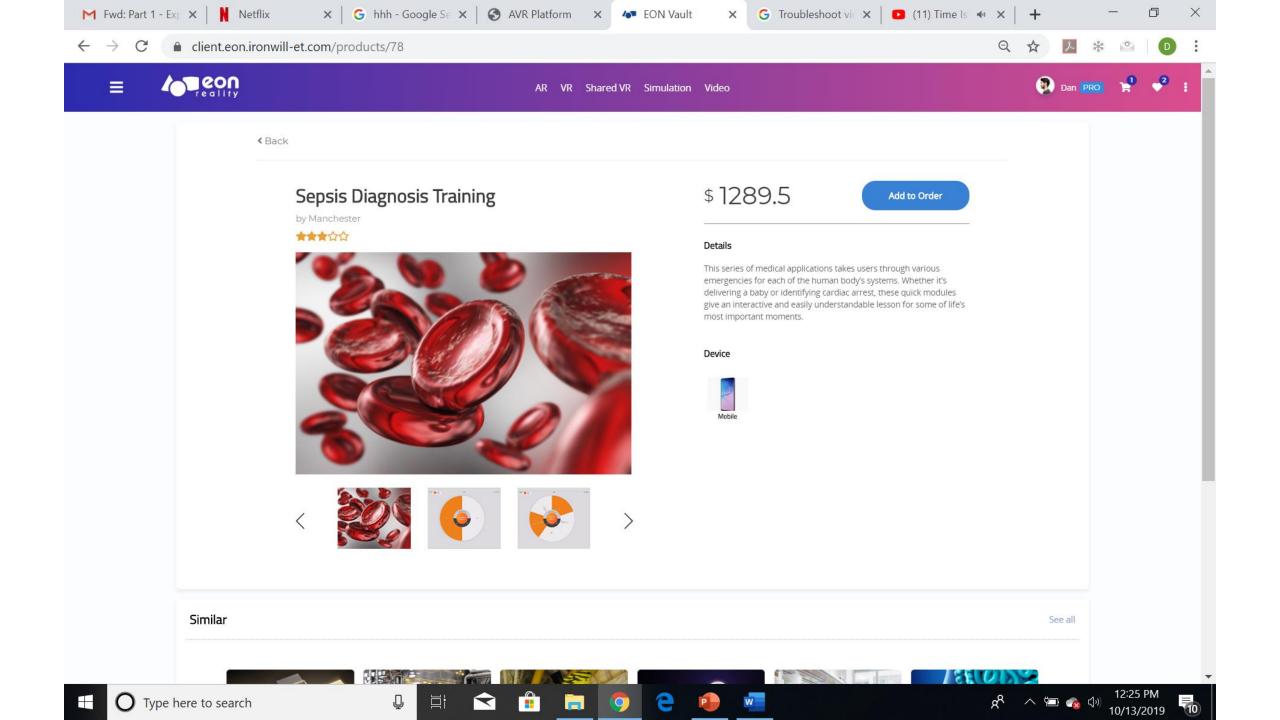


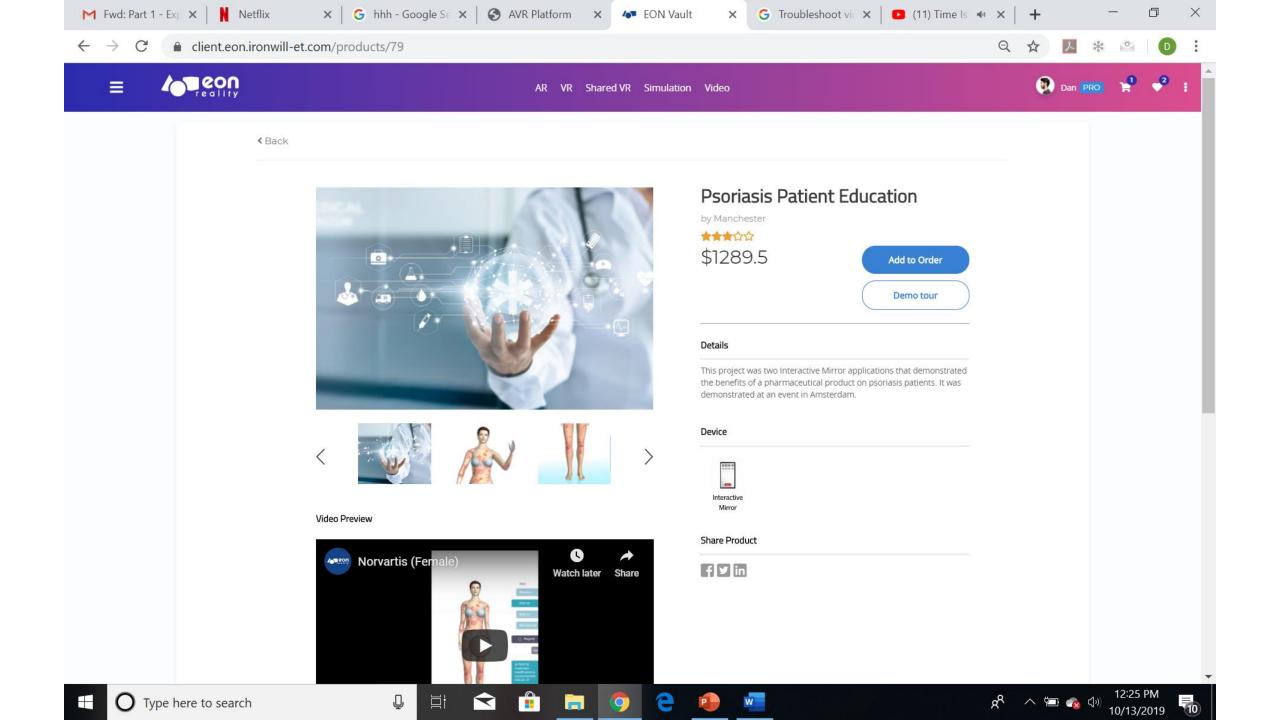


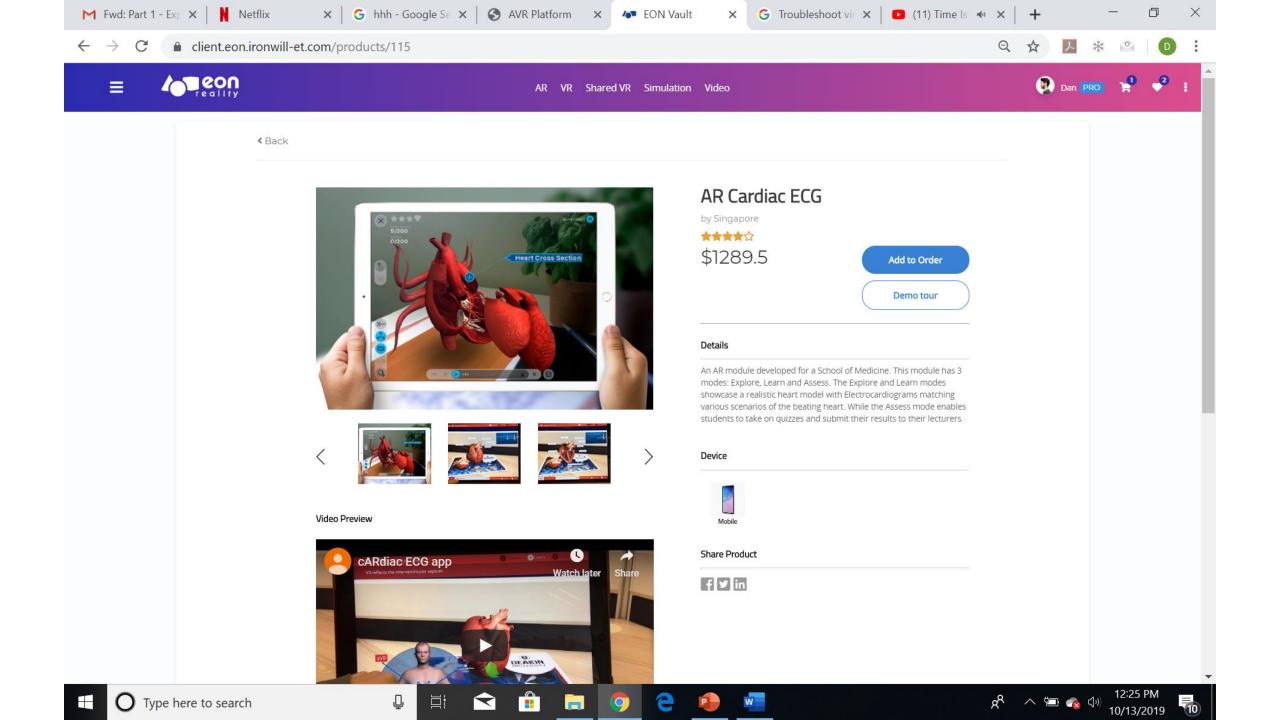


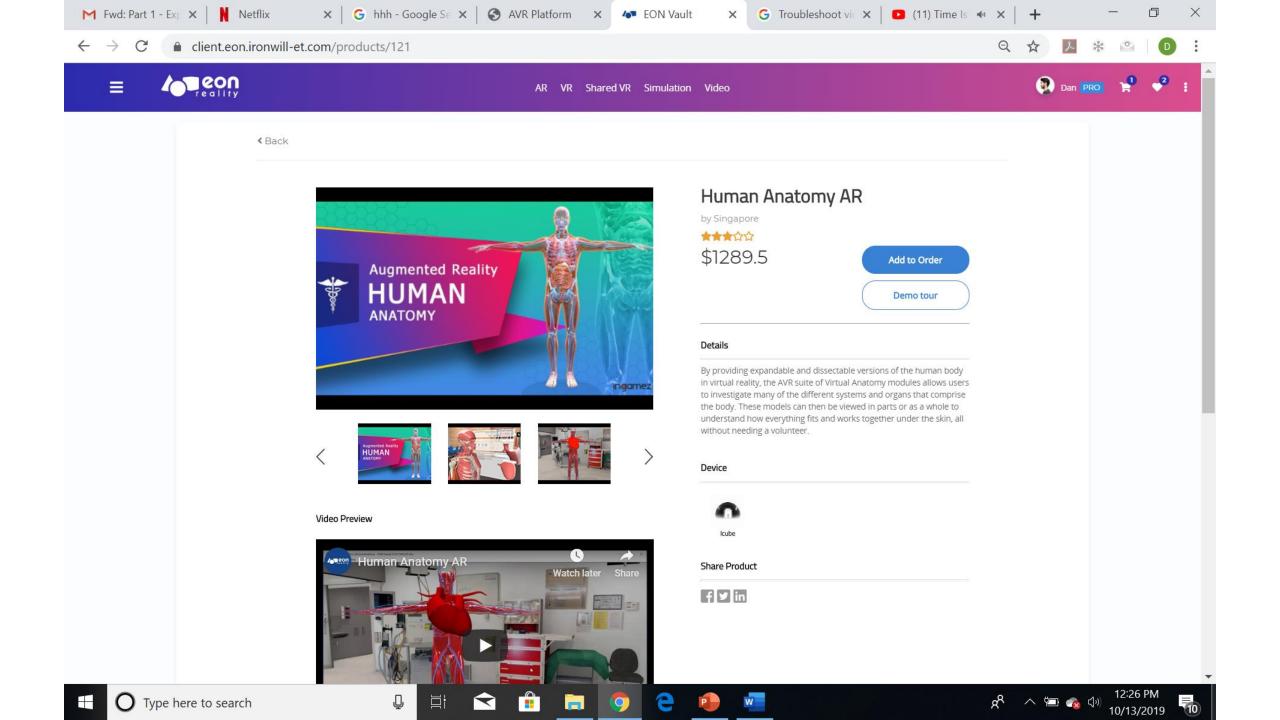


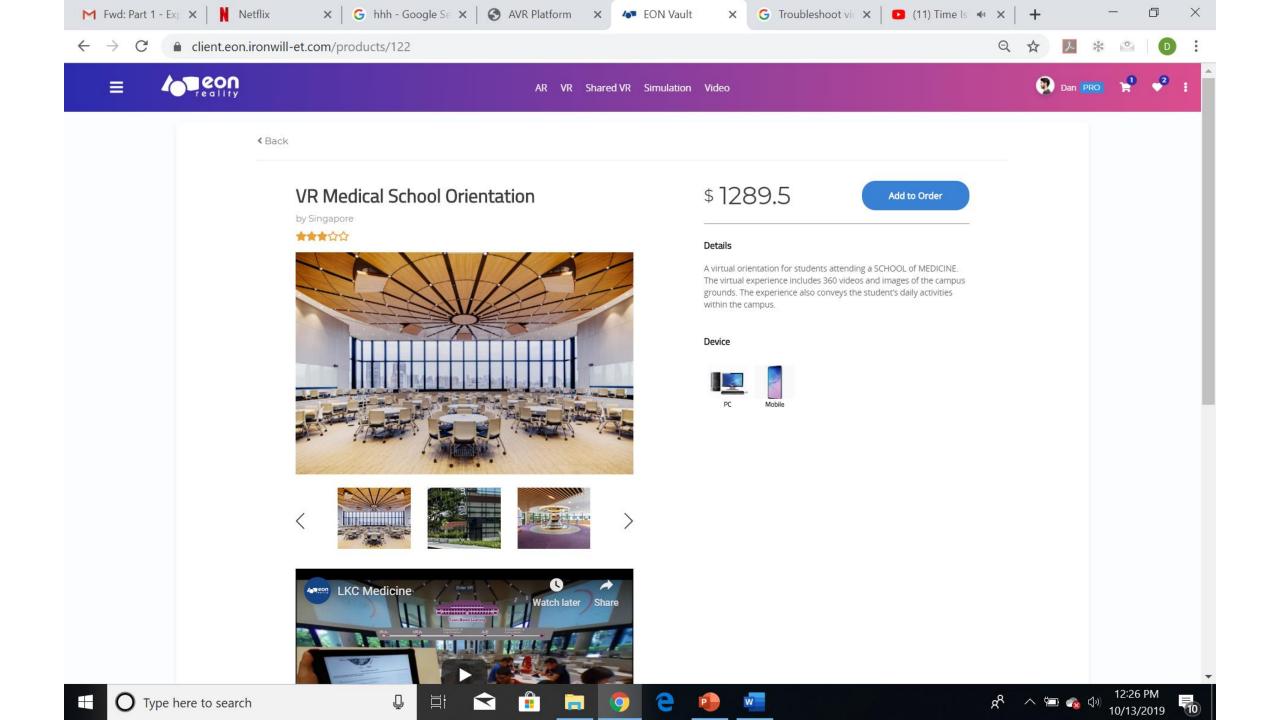


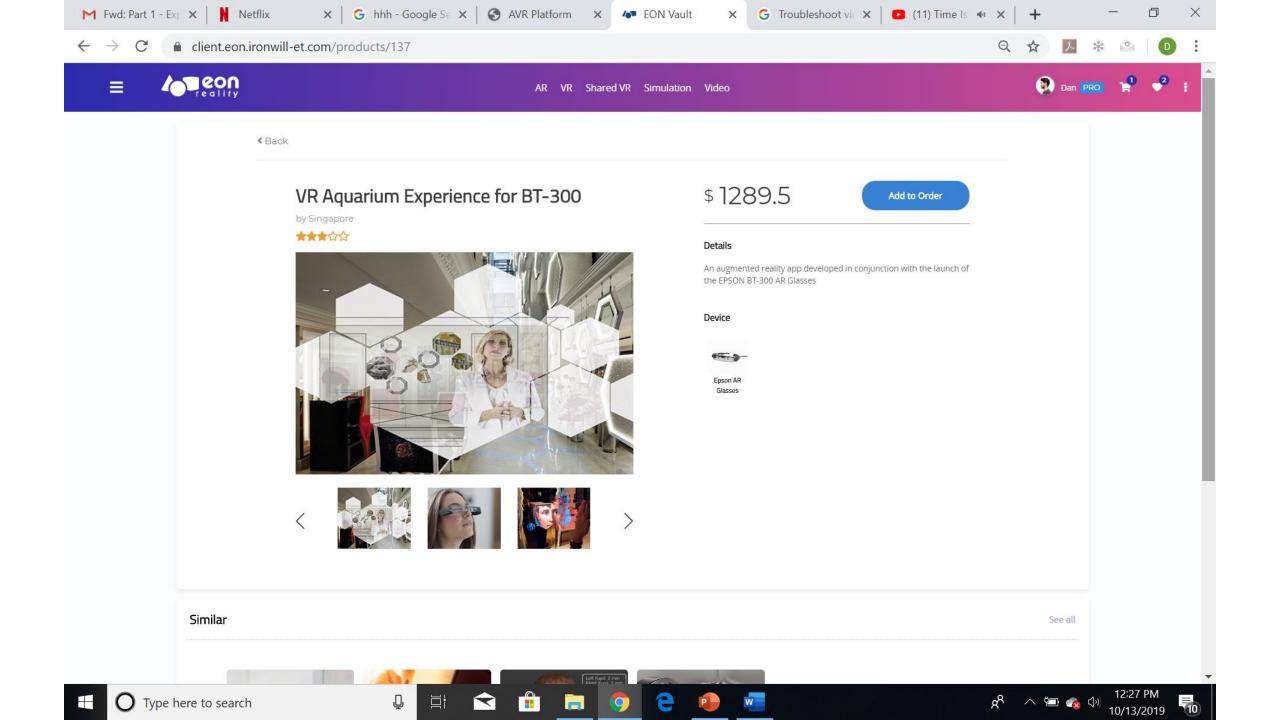


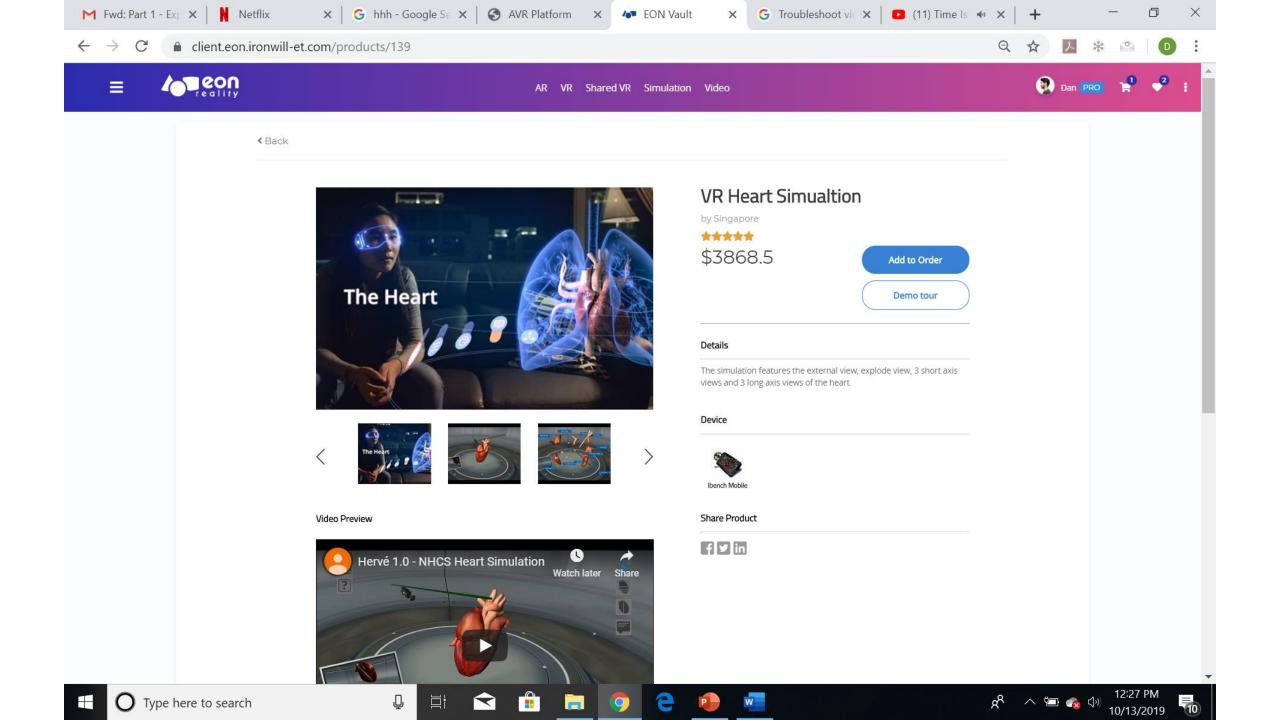


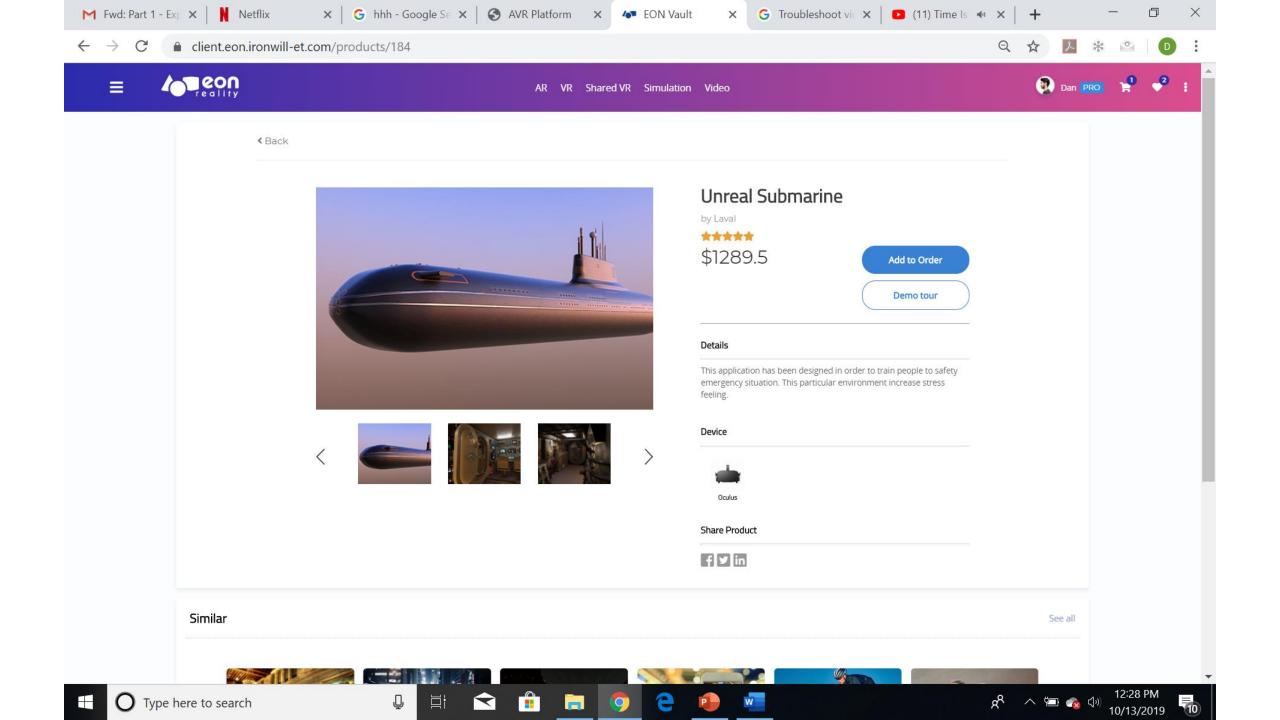


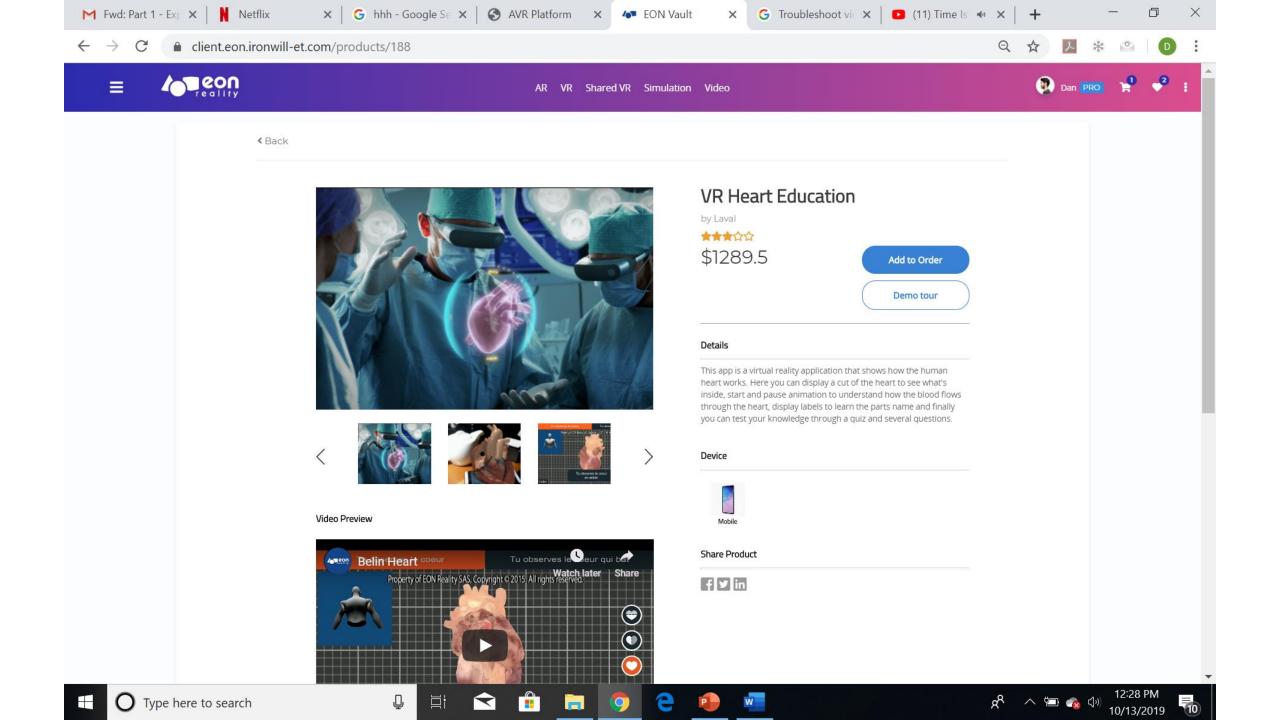


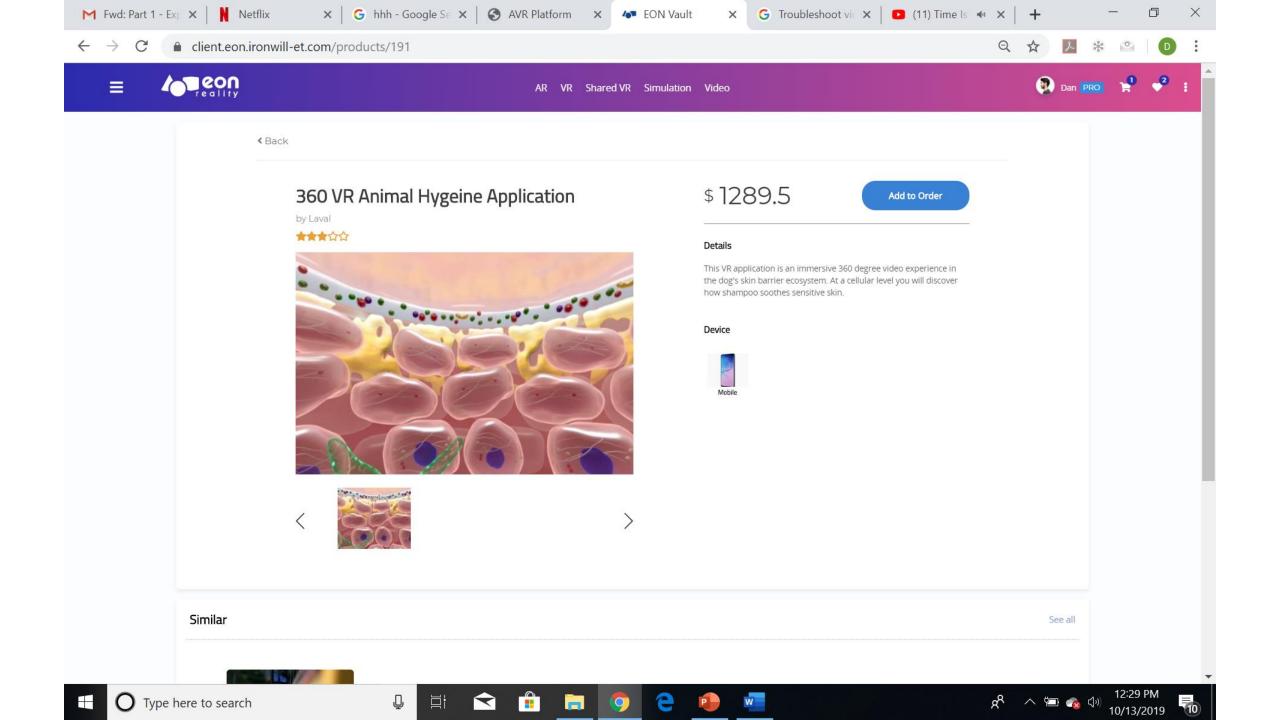


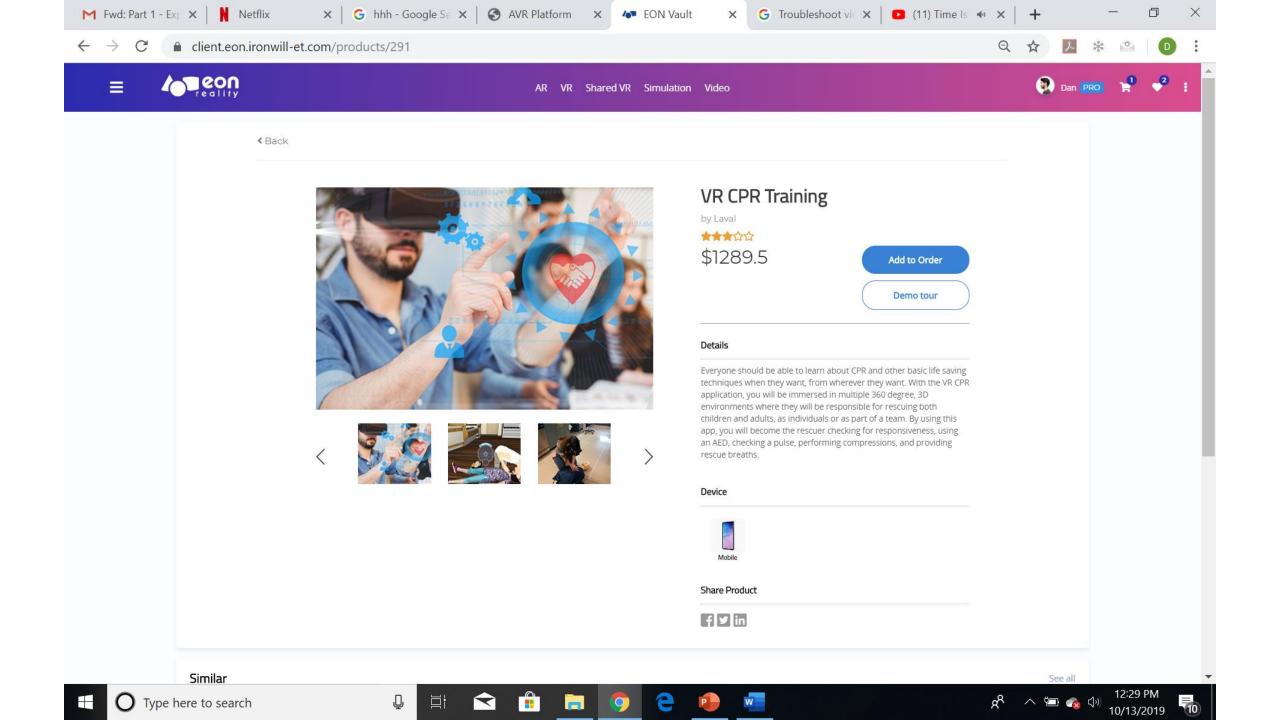


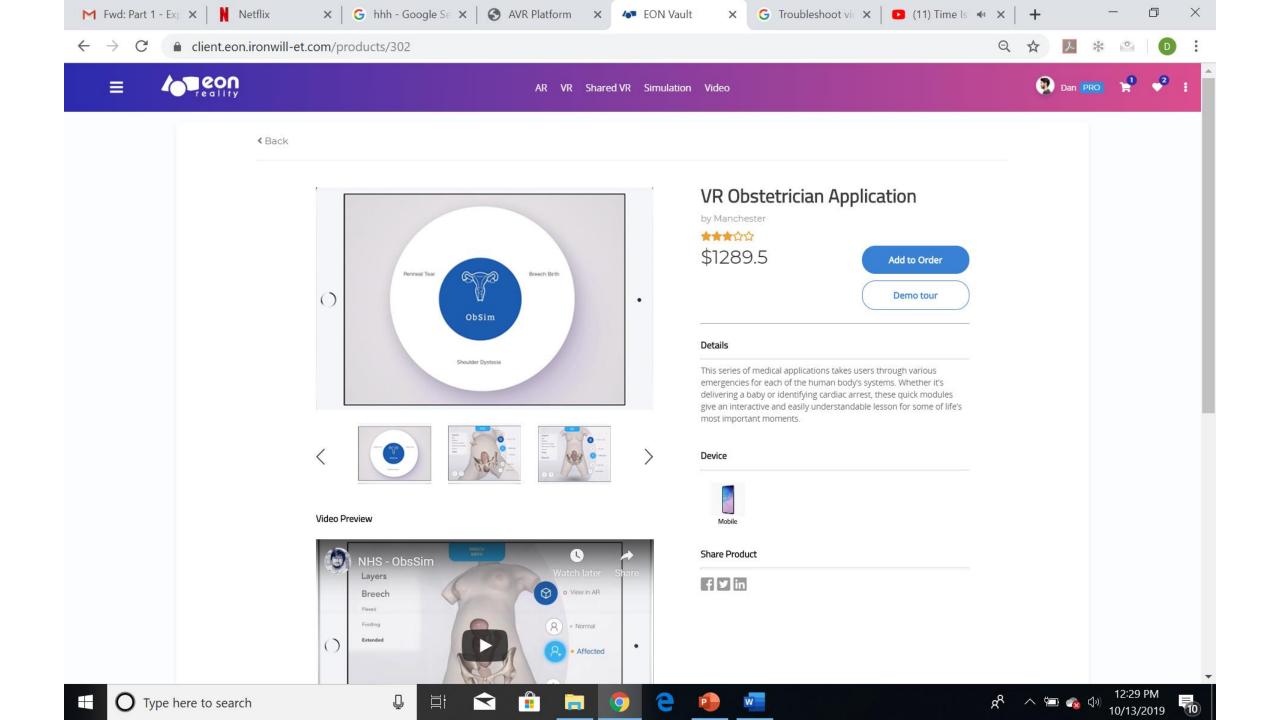


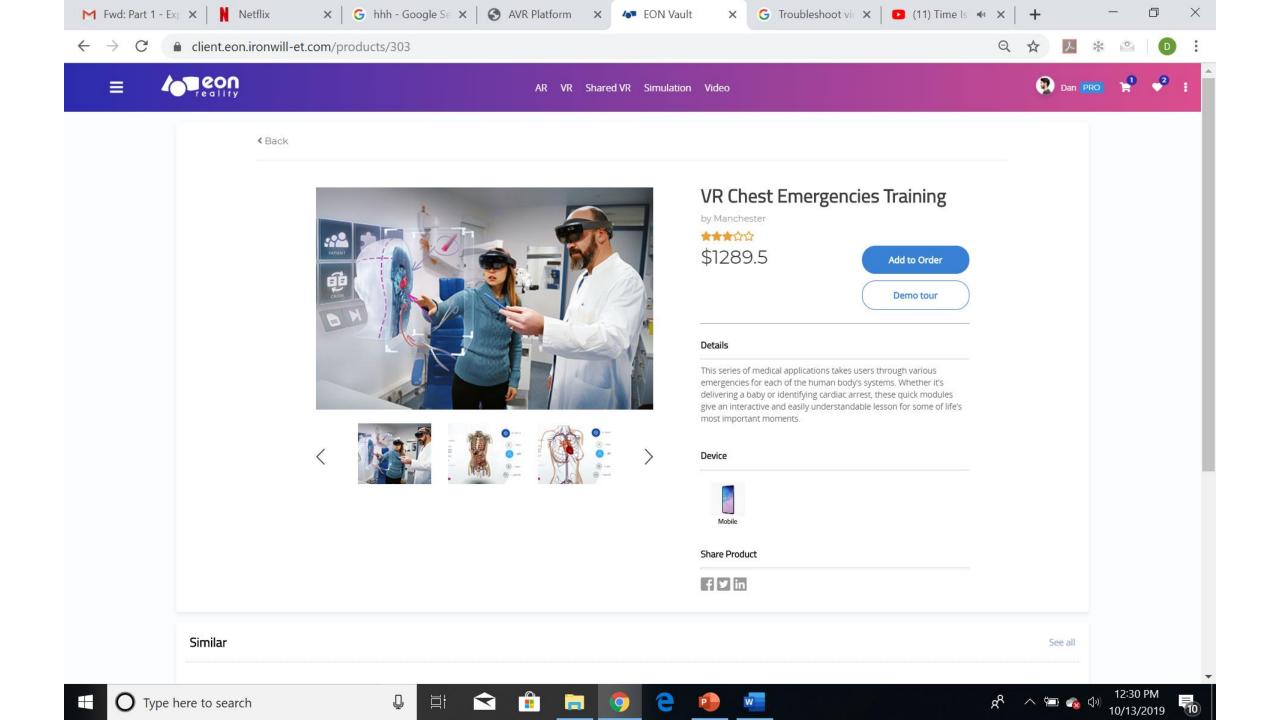








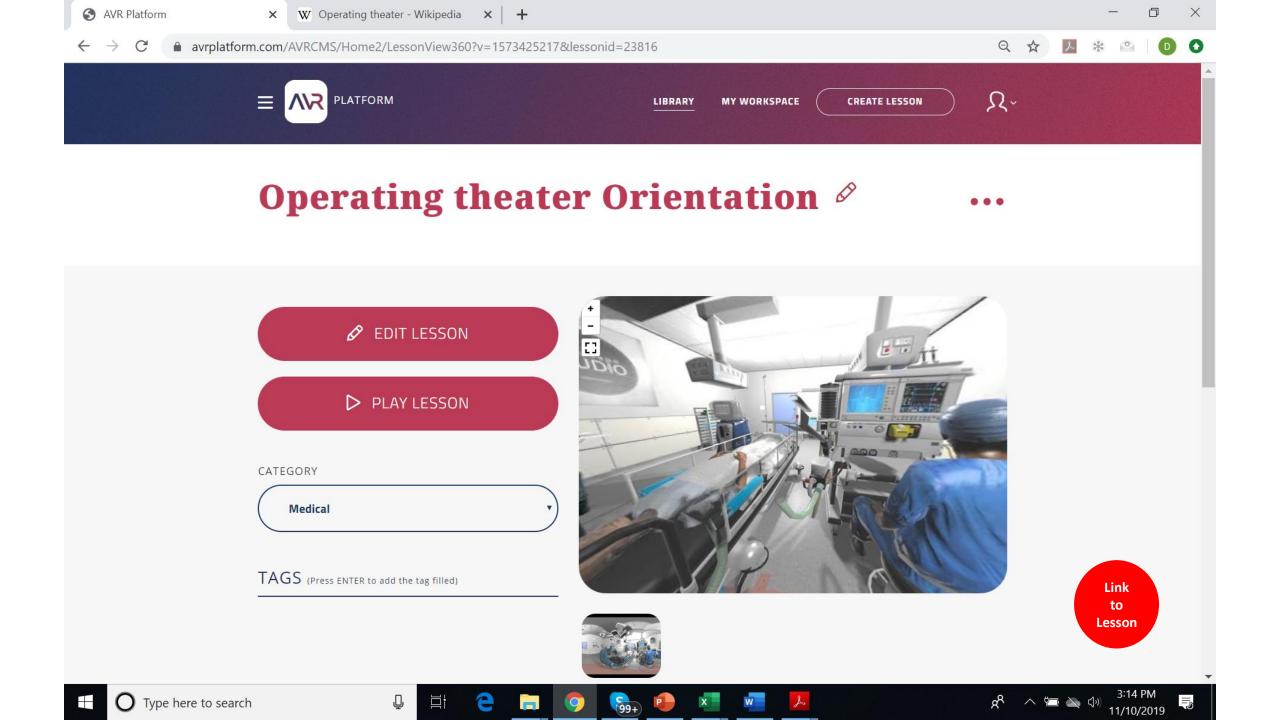


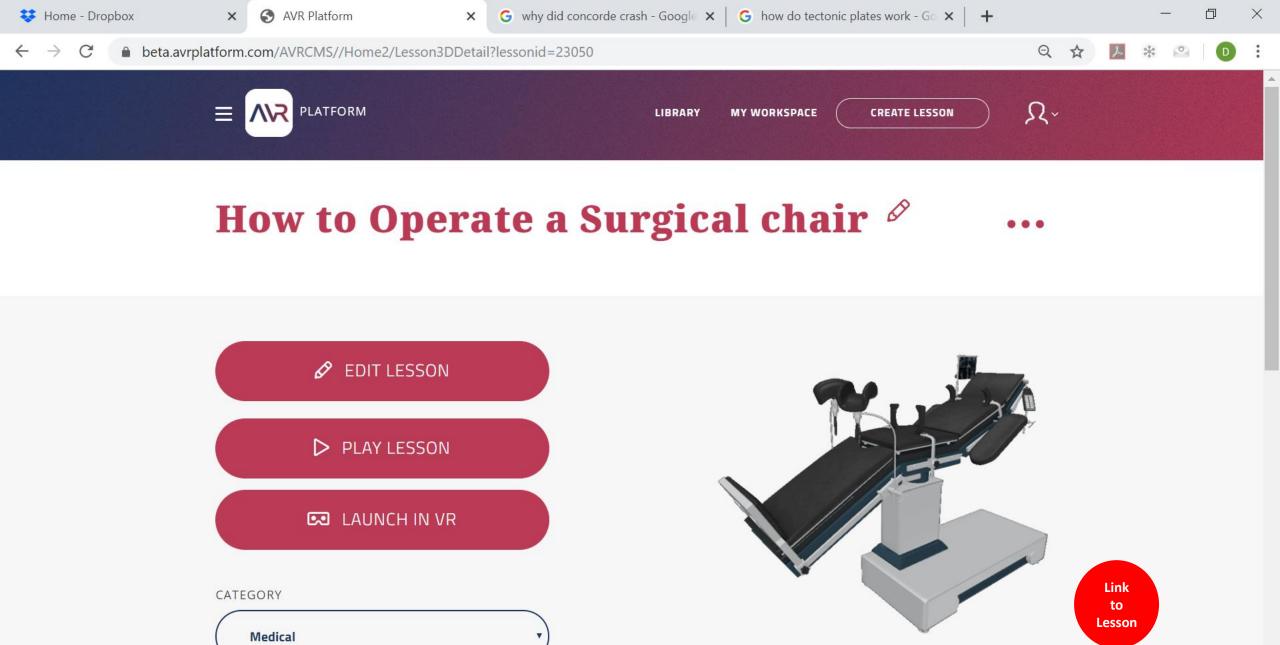


AVR Platform

Examples Technical Vocational Training Lessons

Nursing & Health care sector Lessons





















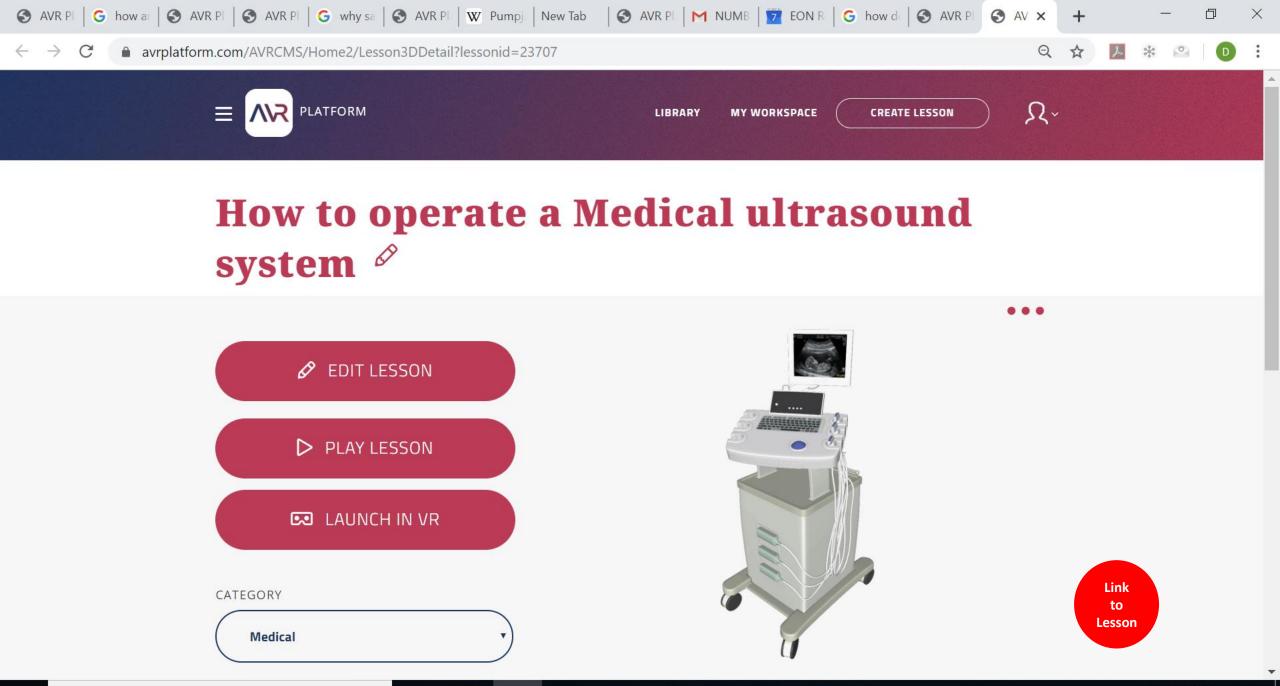






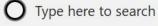




















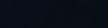










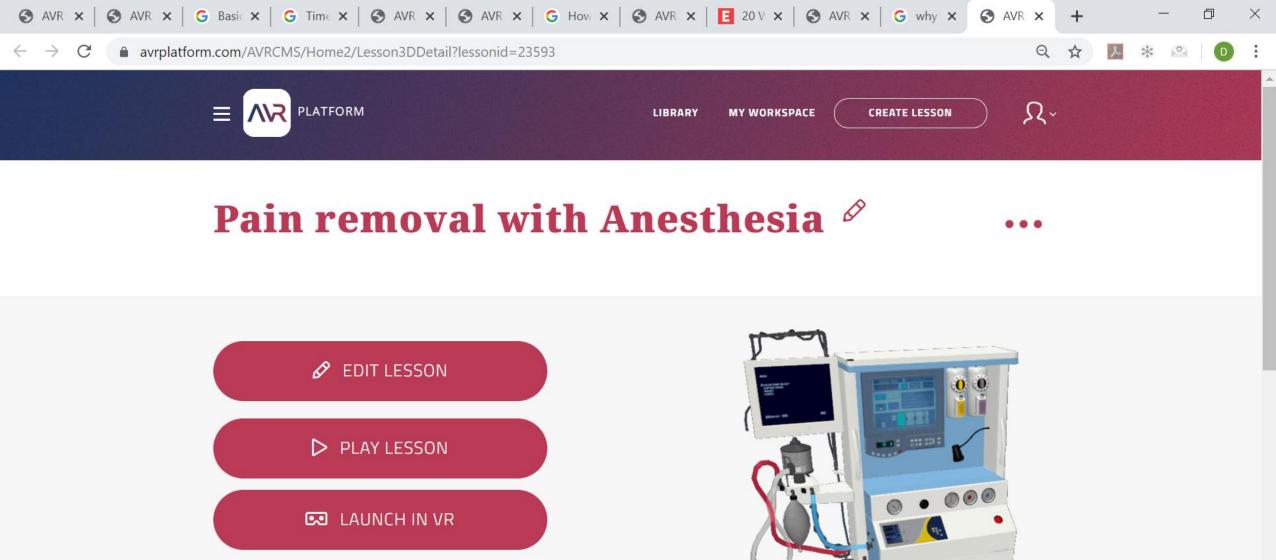


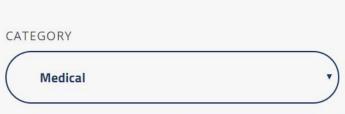














Link to Lesson



















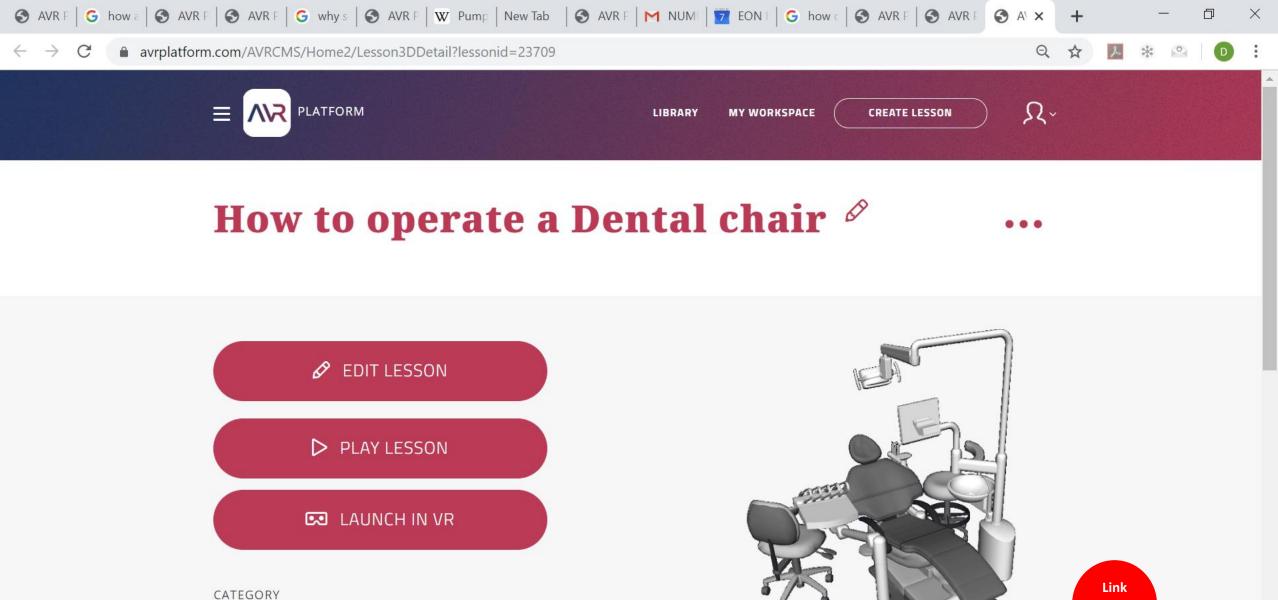




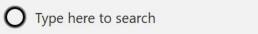












Medical













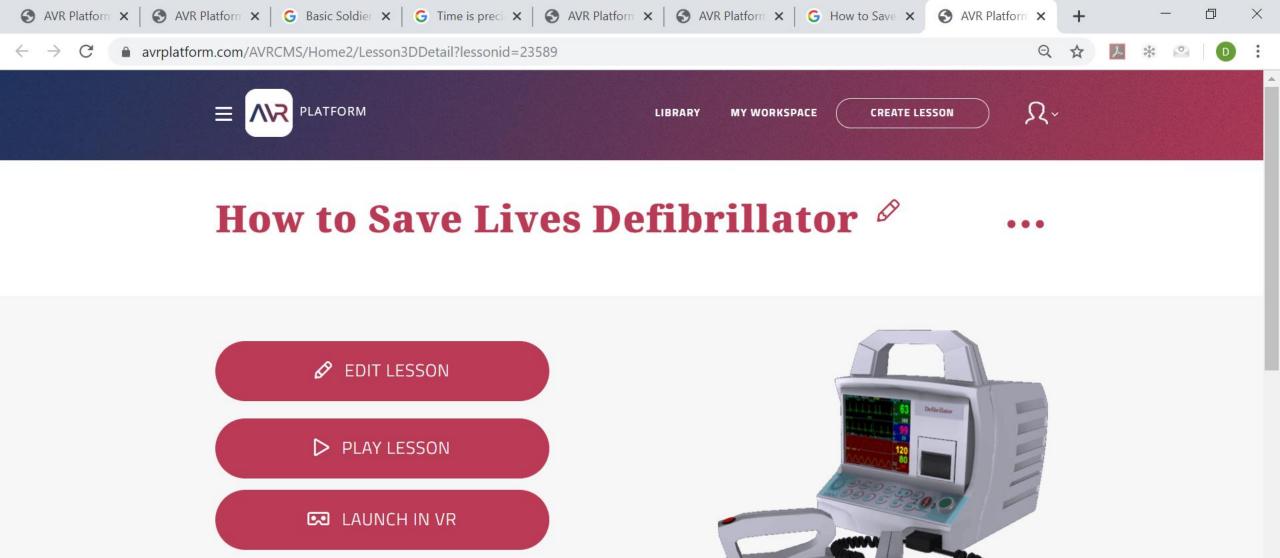












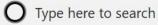


























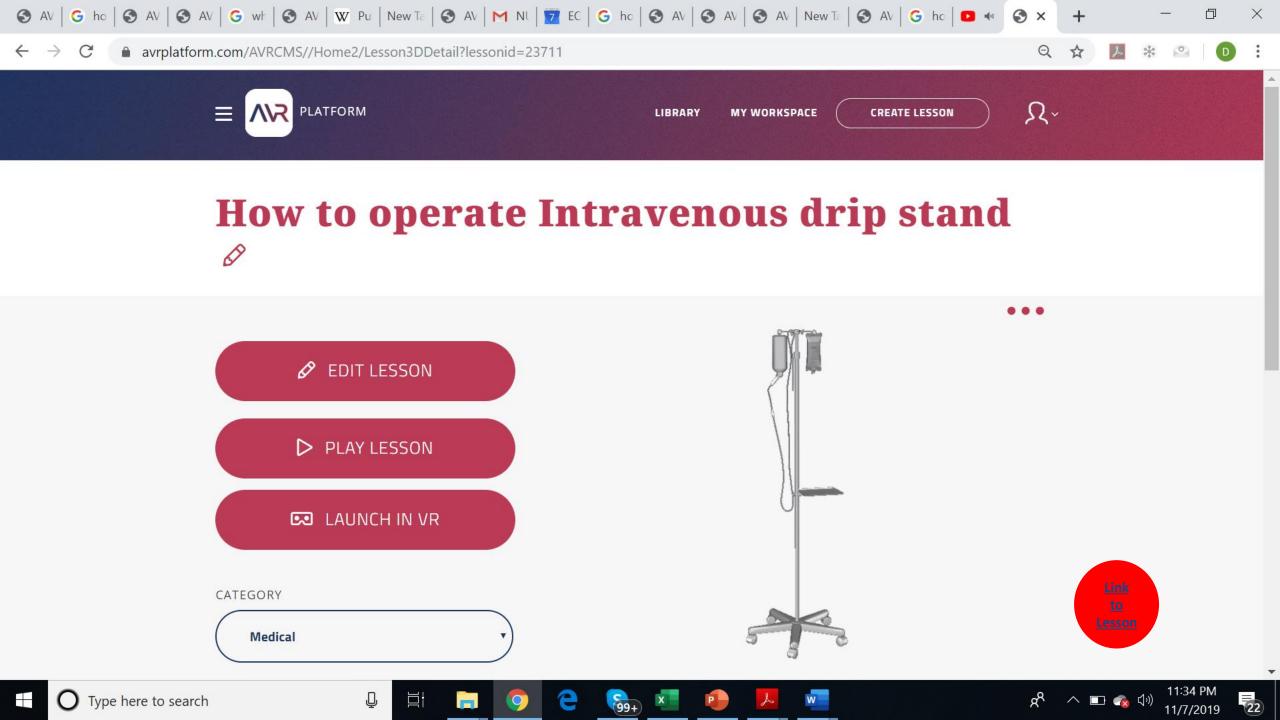


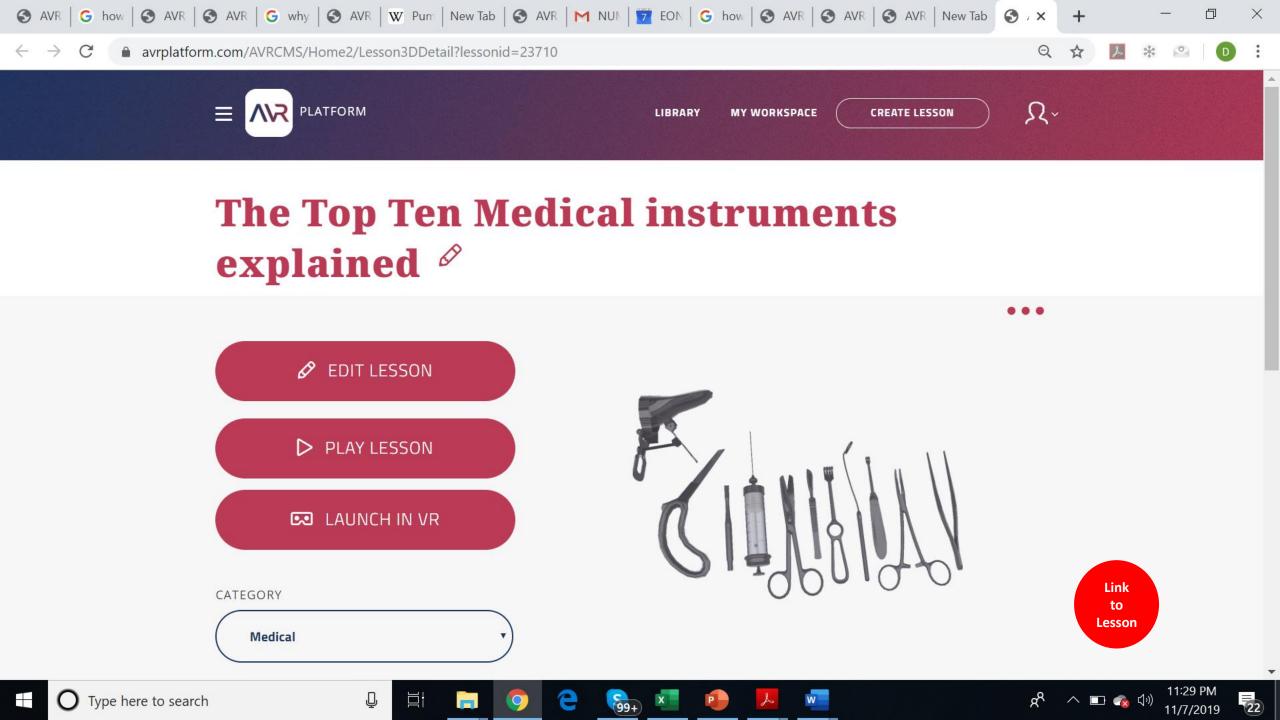




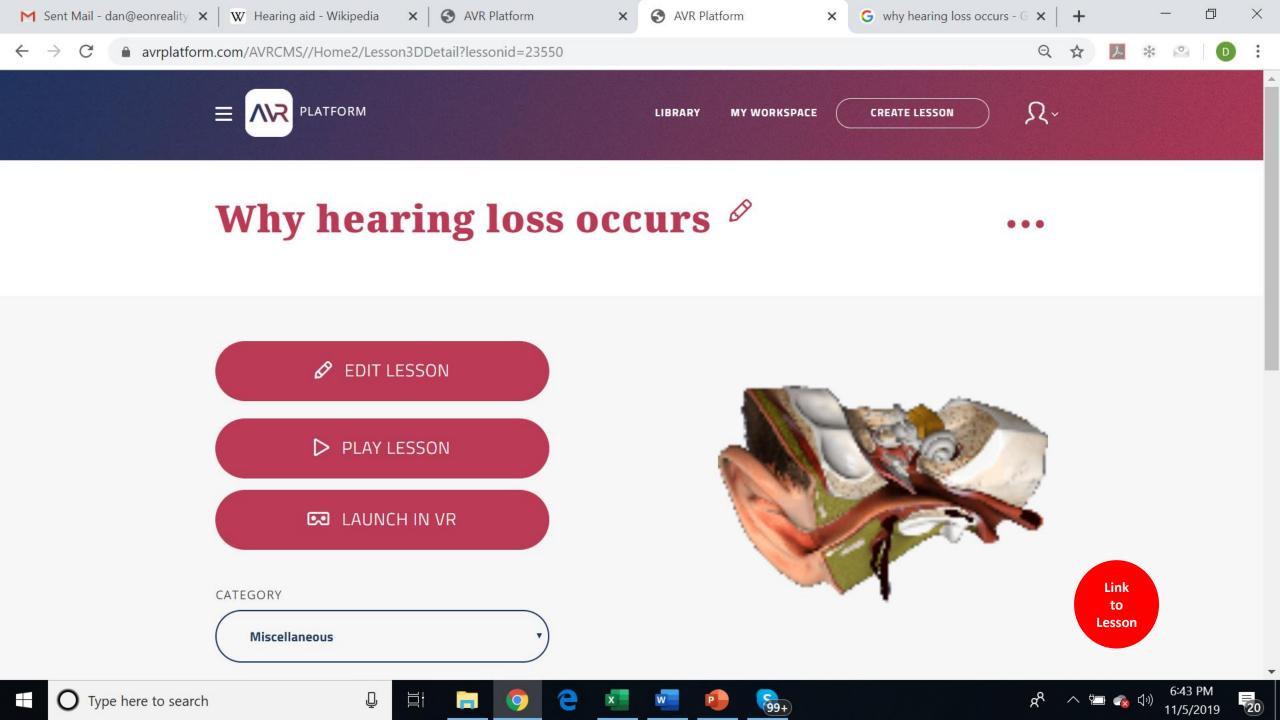


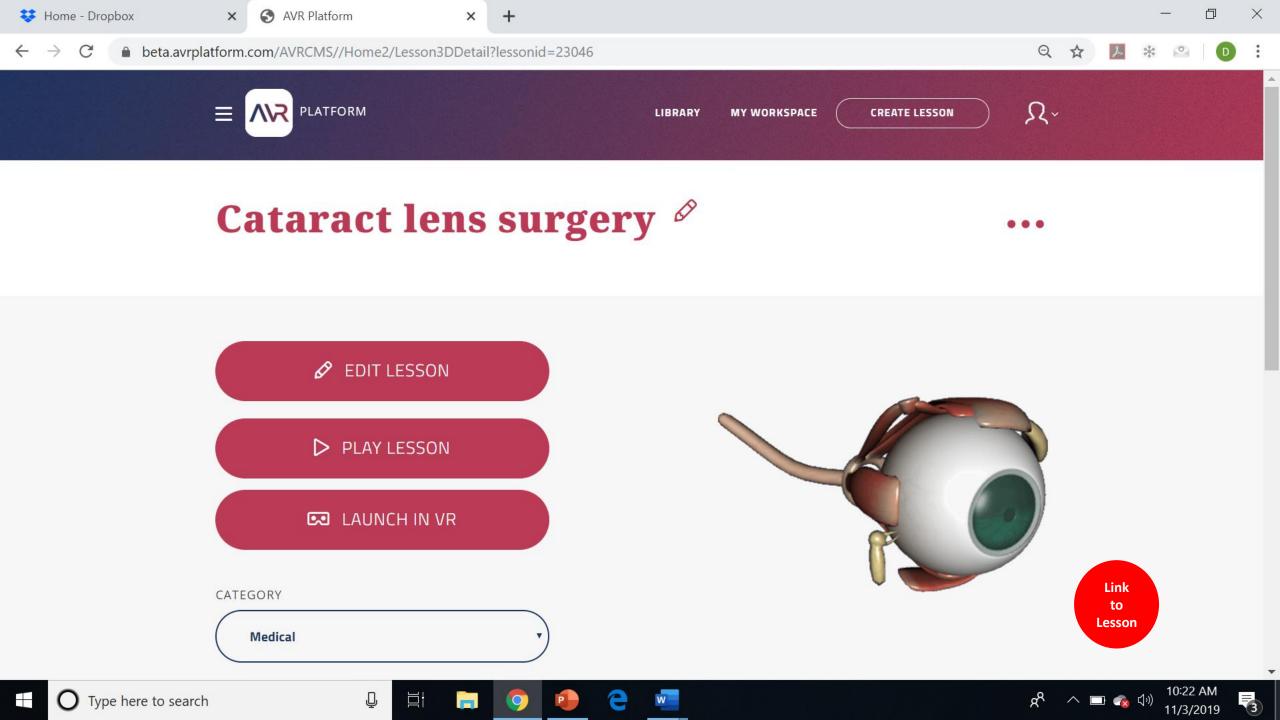




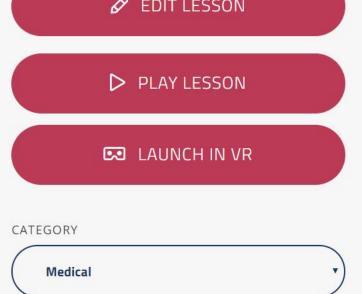


Medicine Health Sciences Lessons











Link to Lesson

















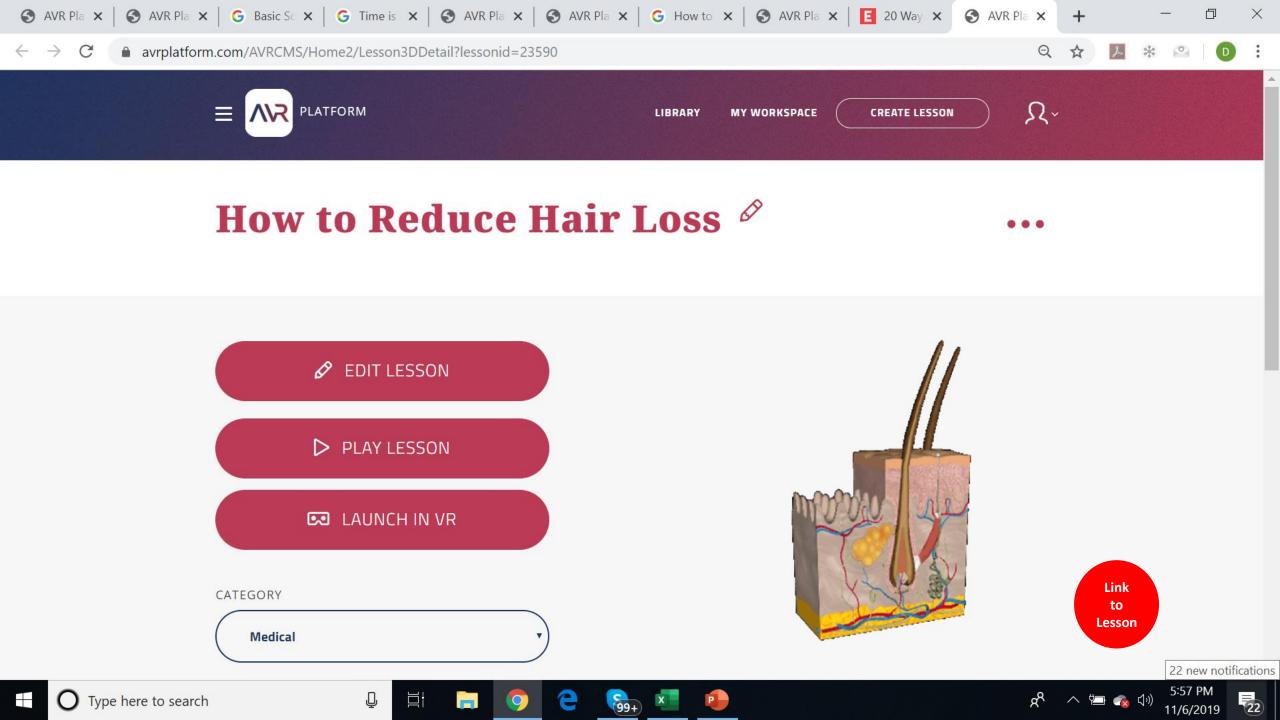


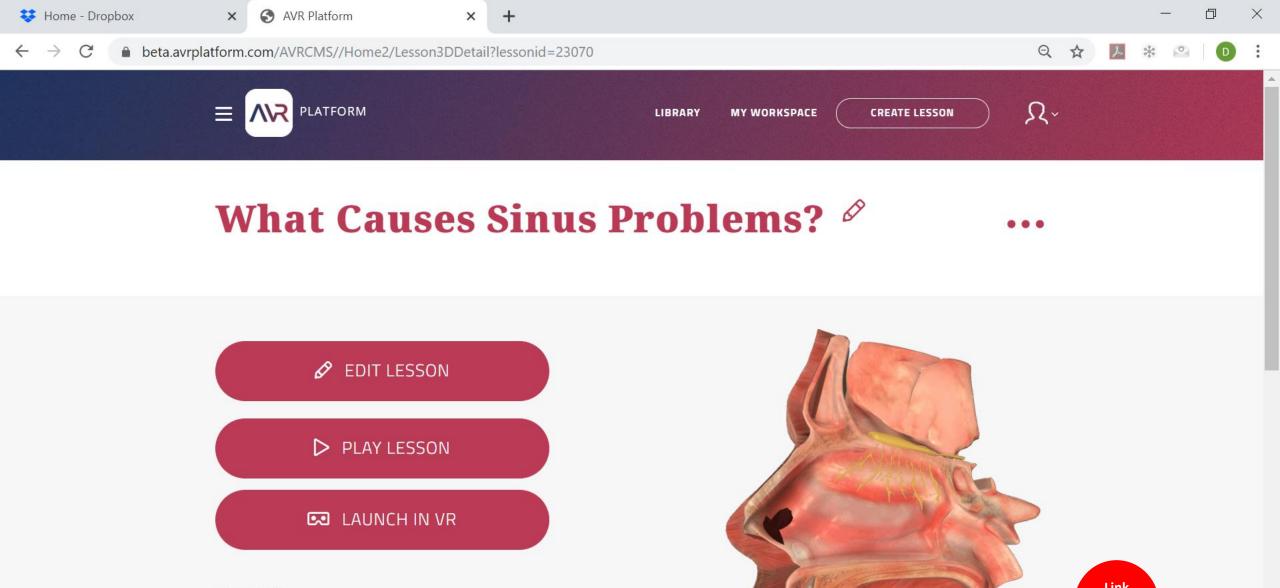


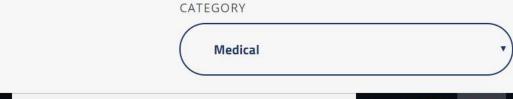






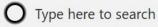






















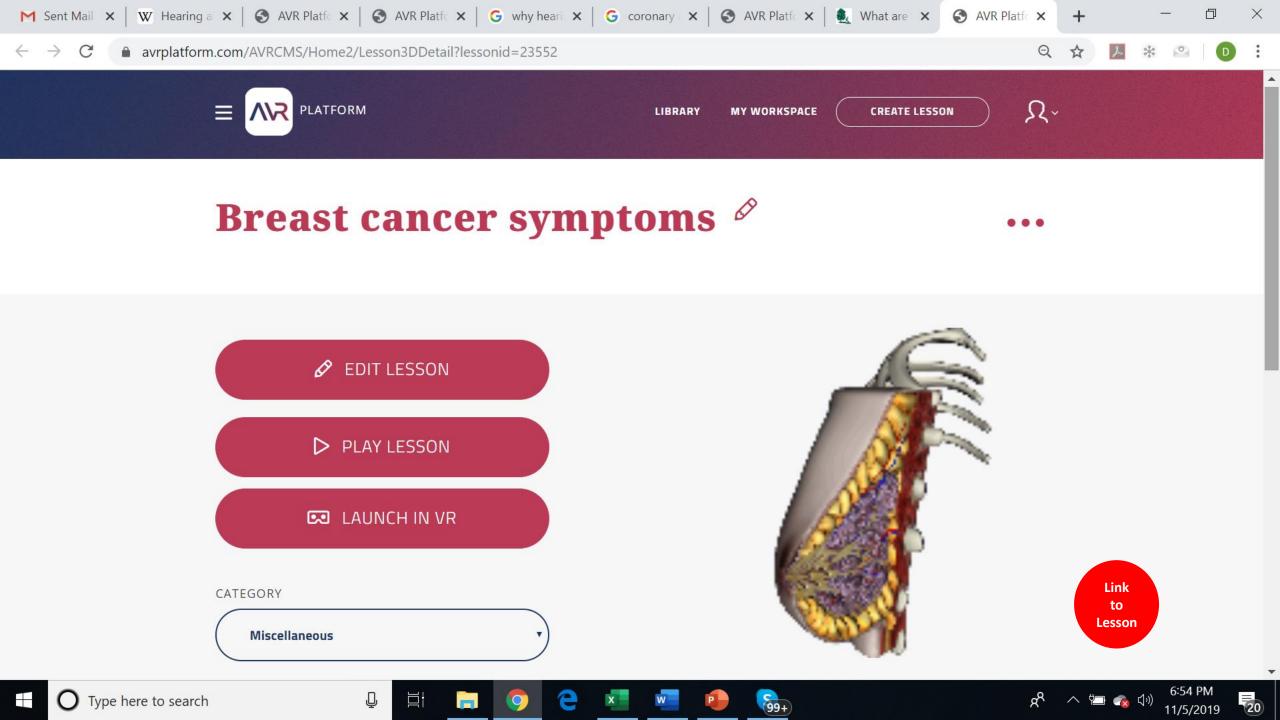


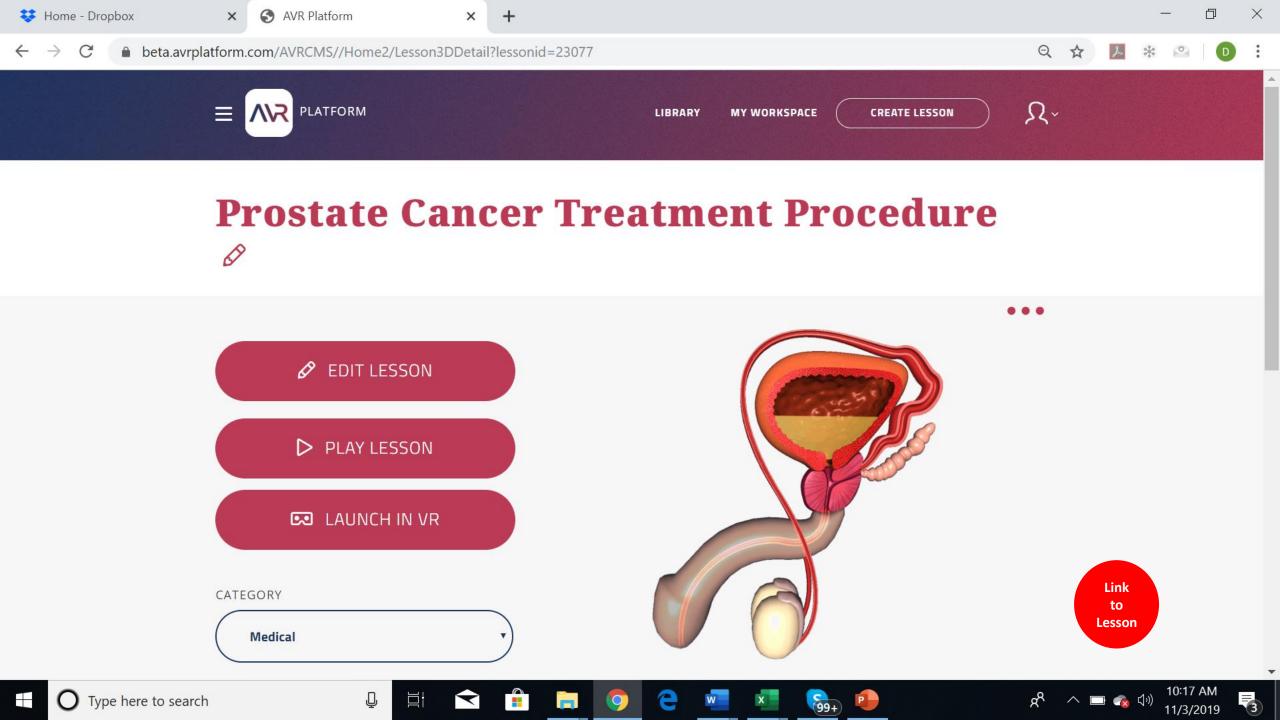


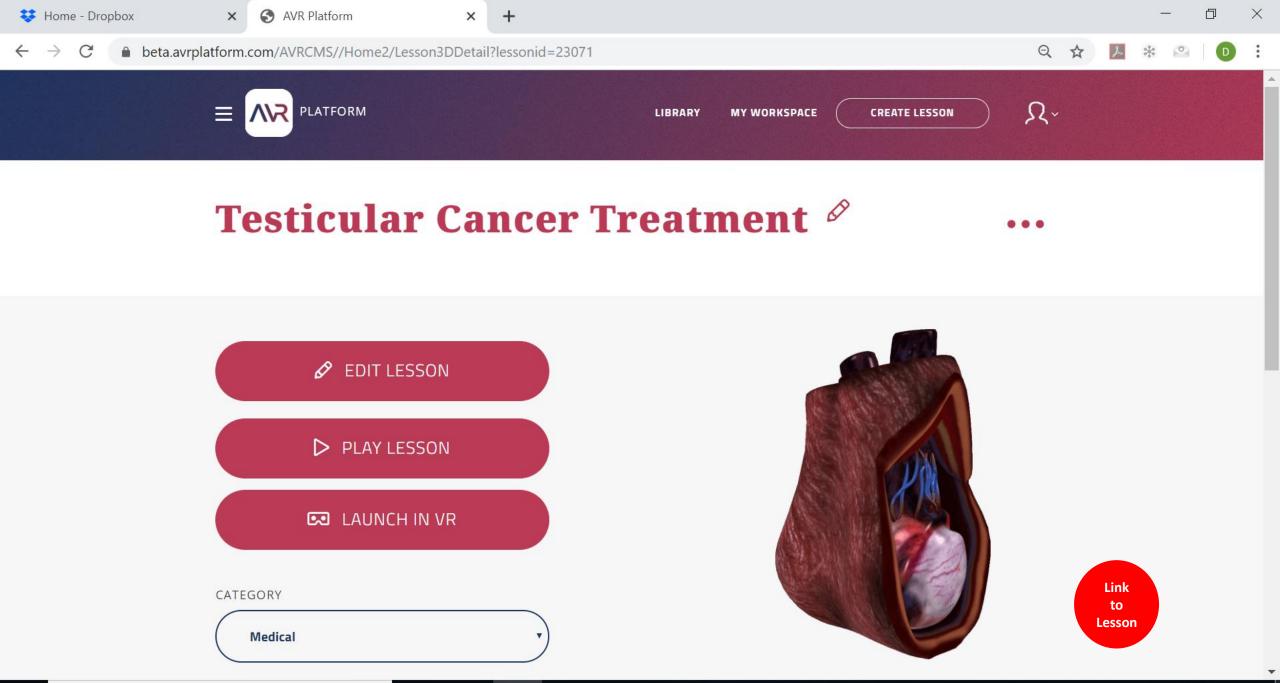




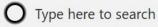
























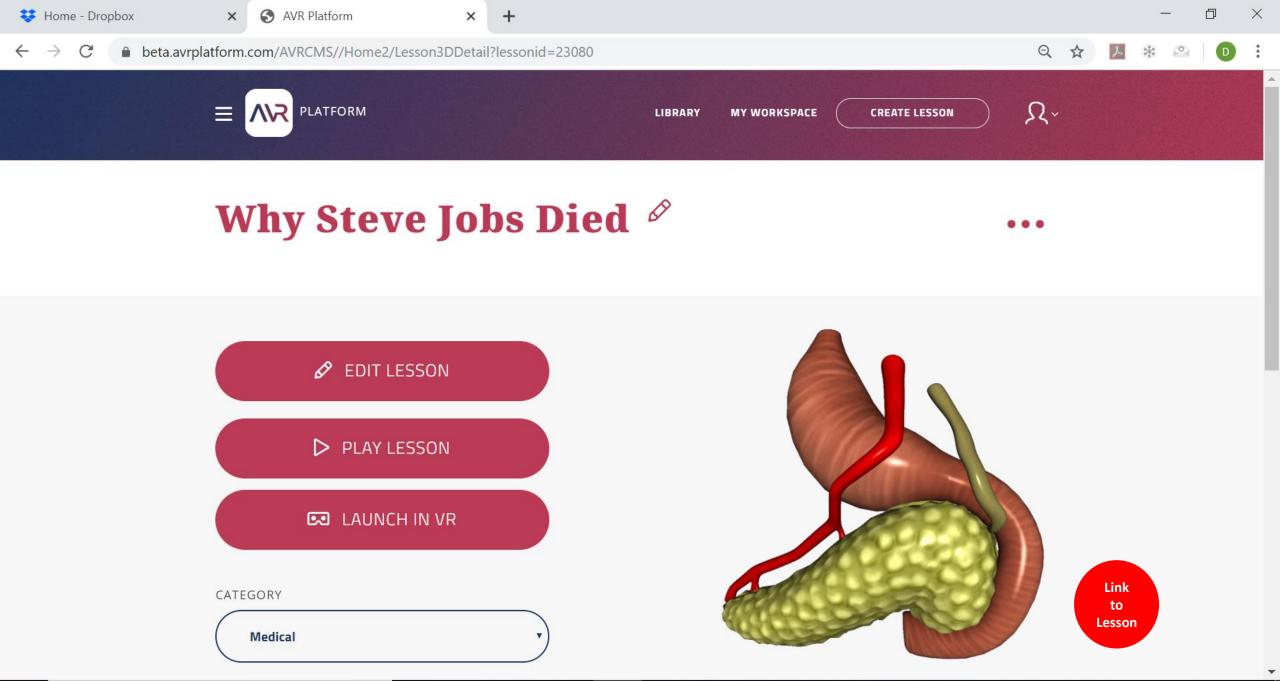




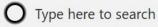






























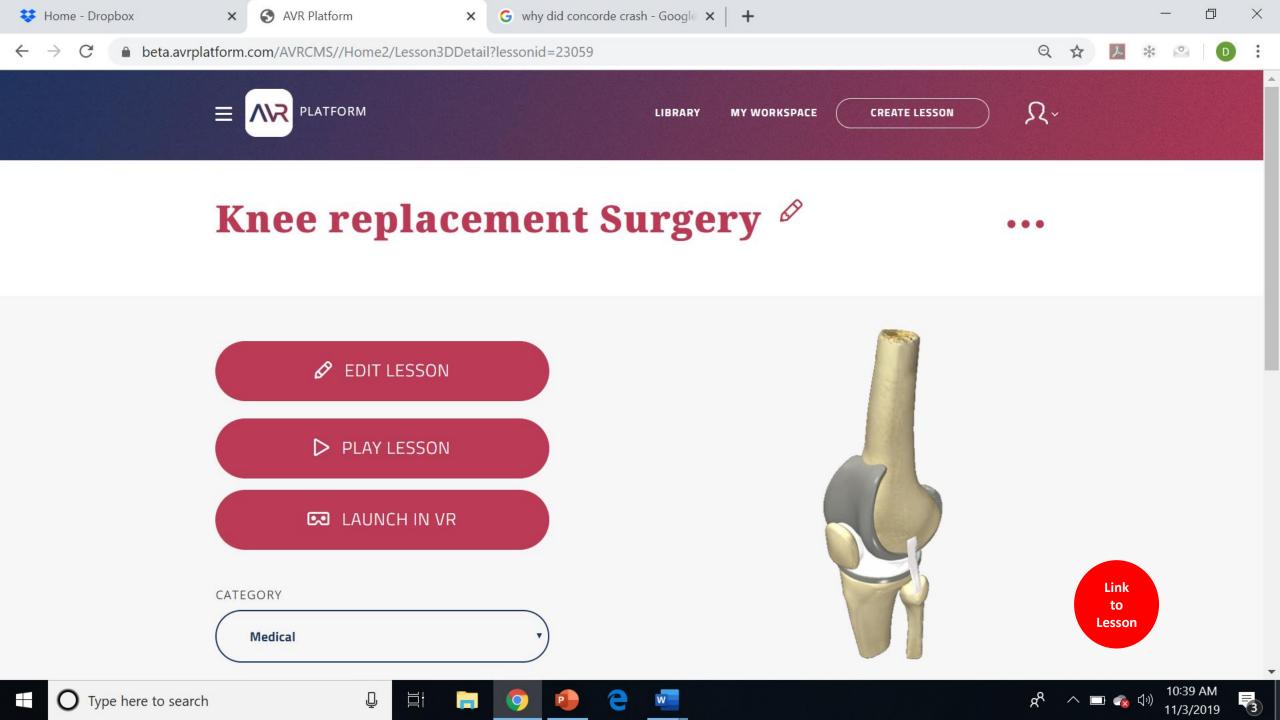


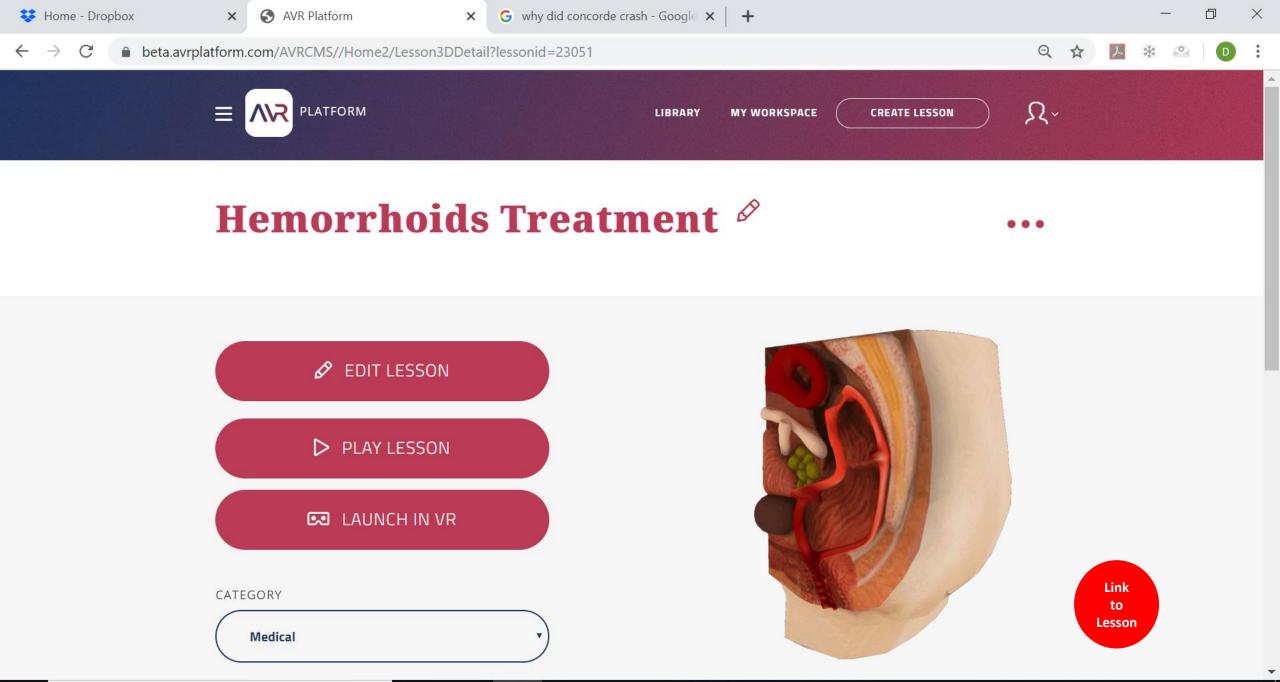




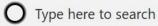






















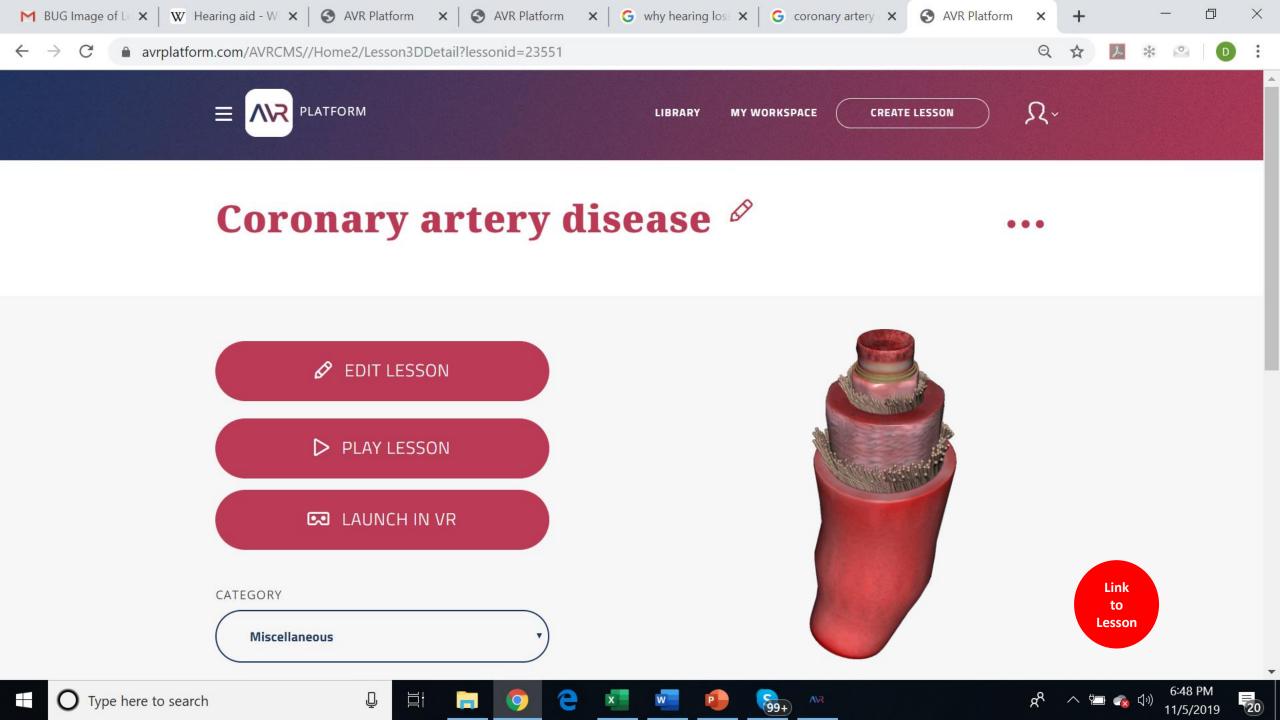




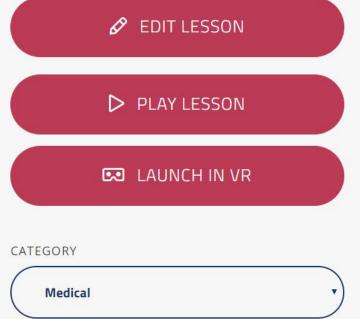


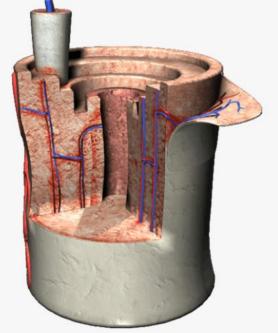
































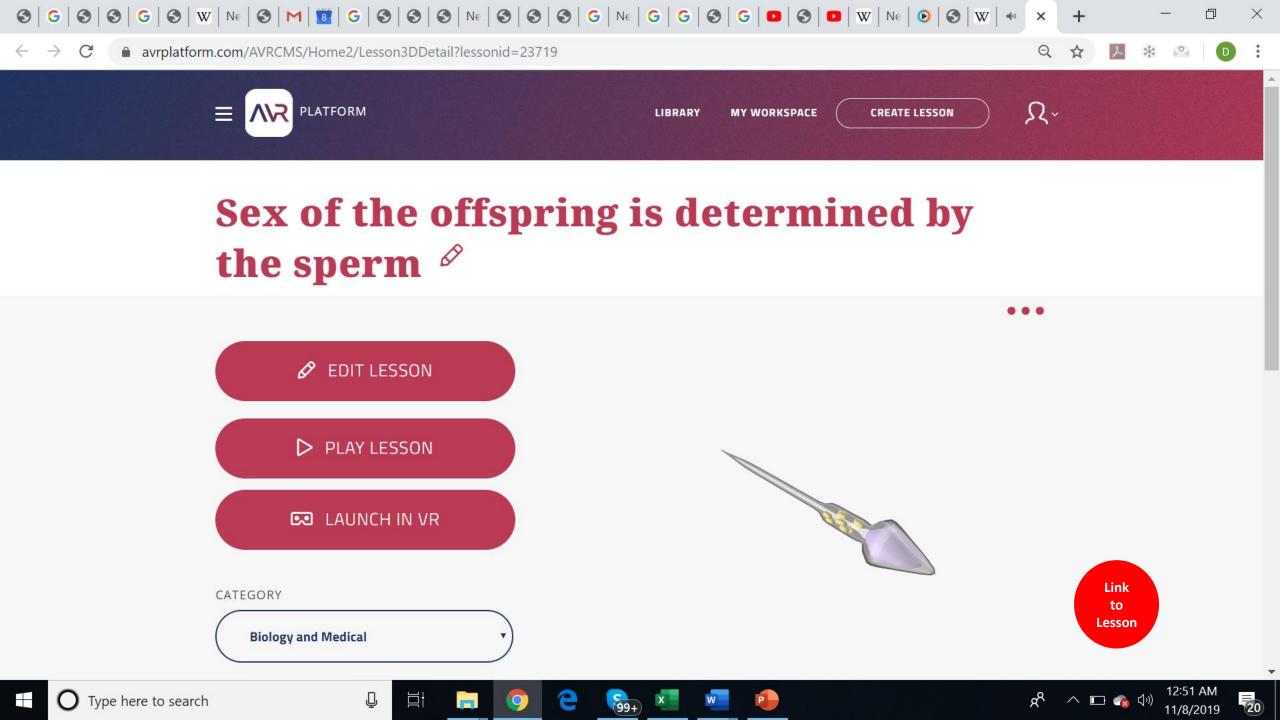






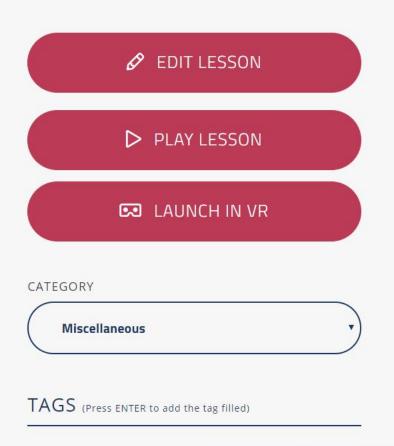


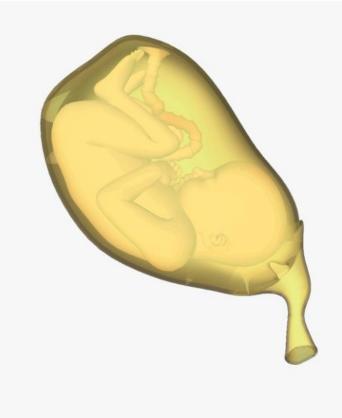






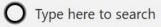
Is Fetus a Baby?

























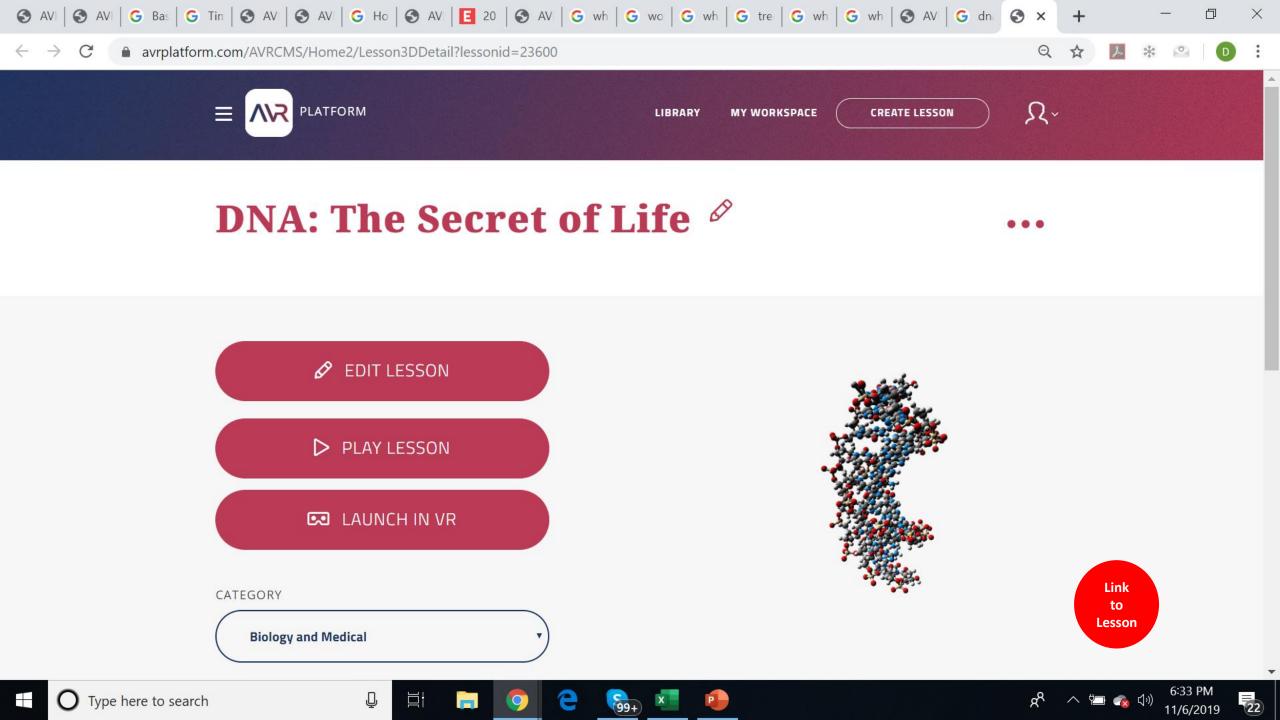


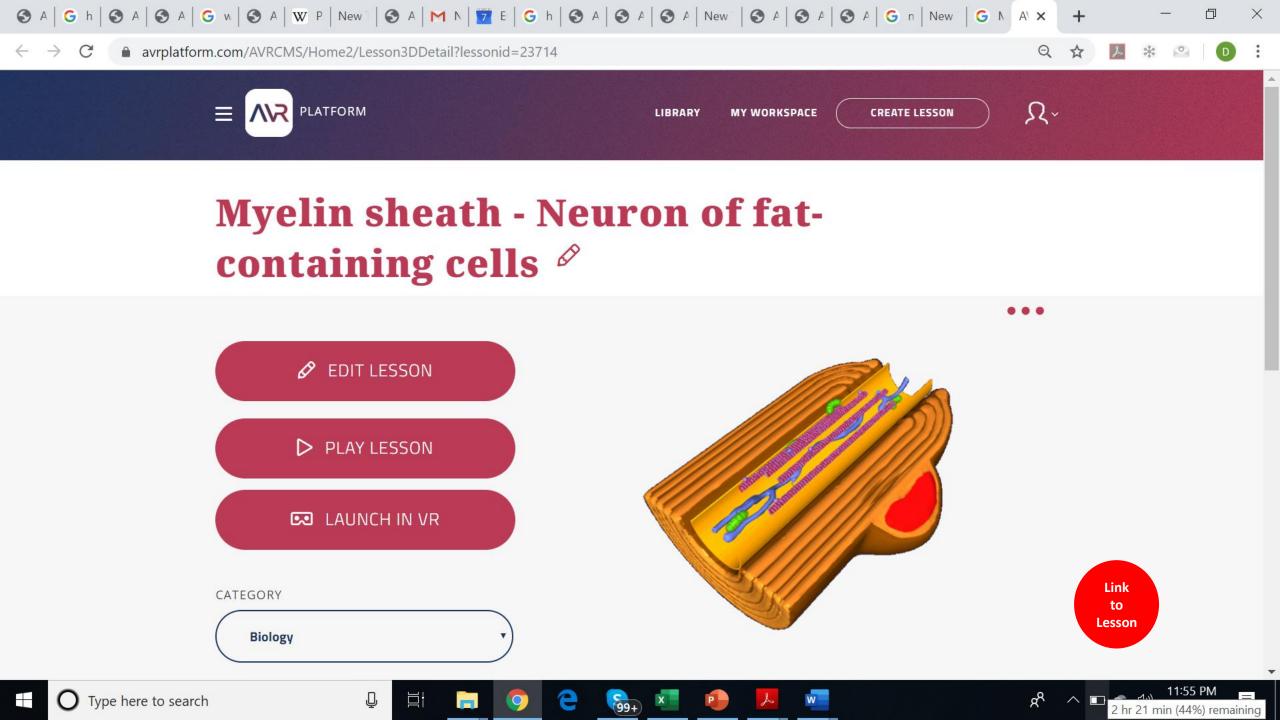


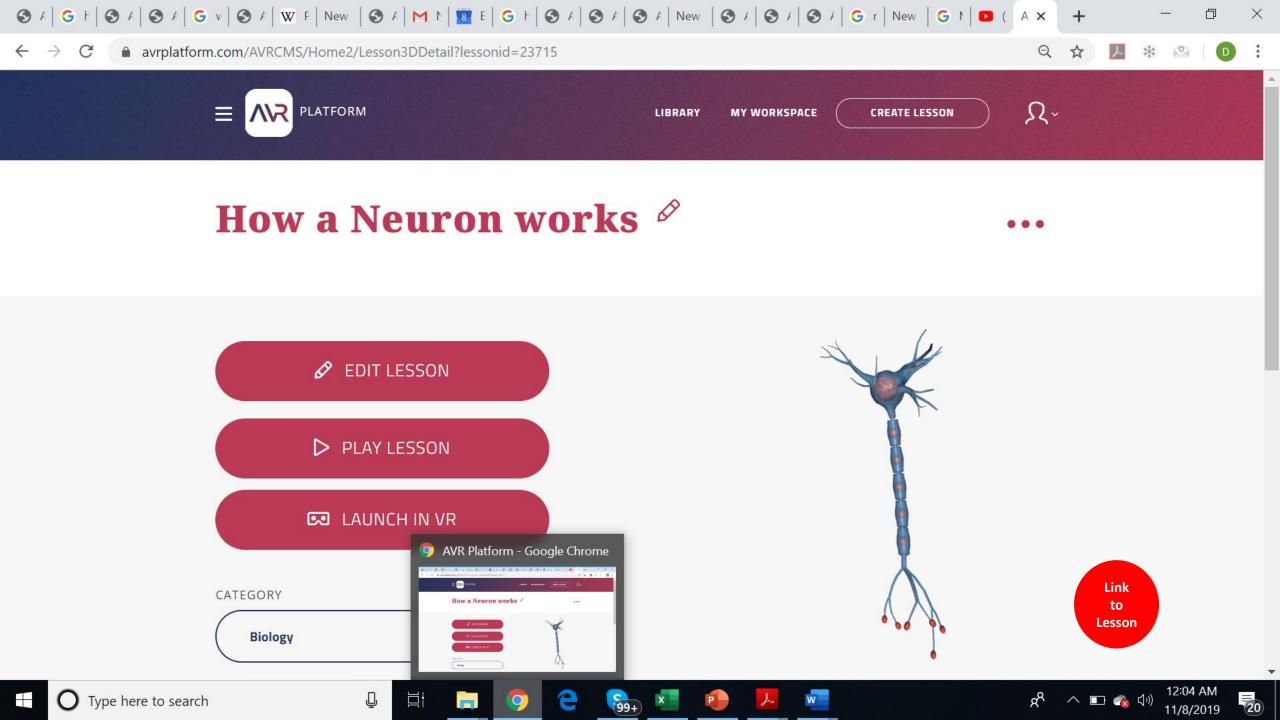




Microbiology Lessons

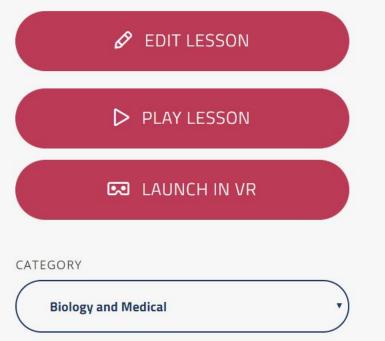


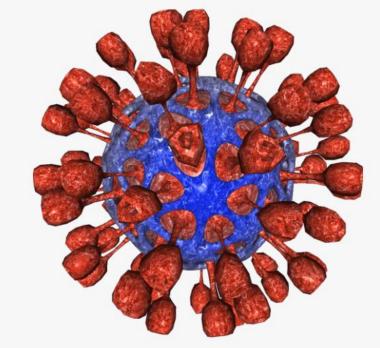


































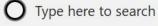




























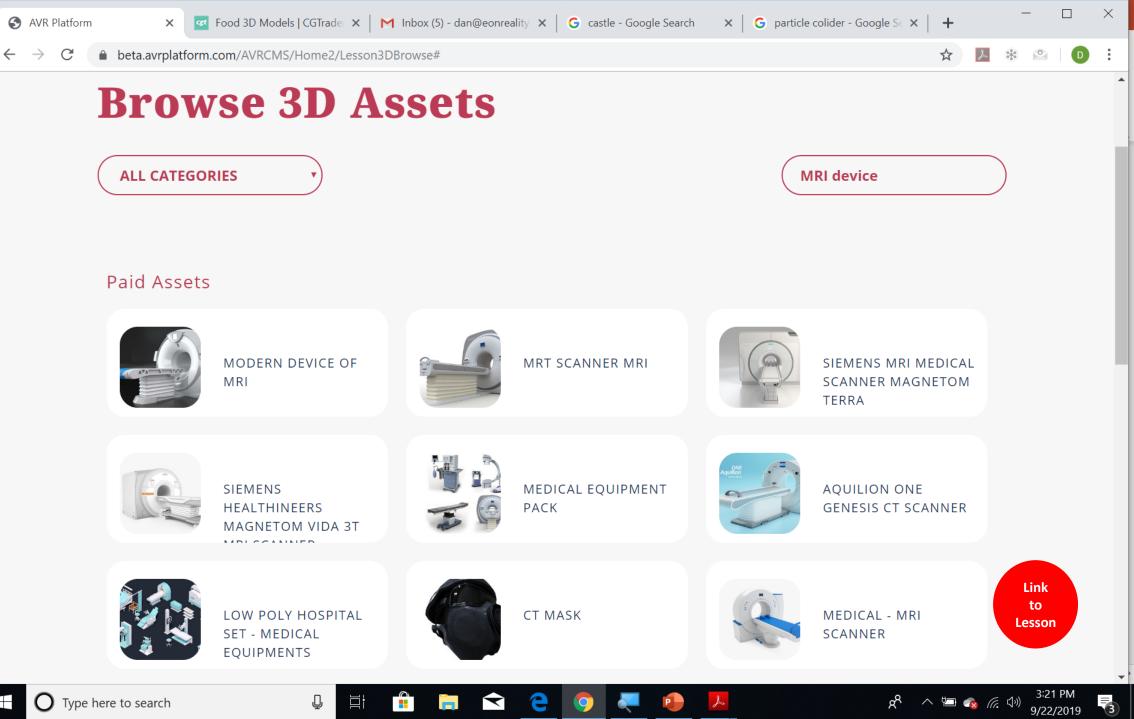


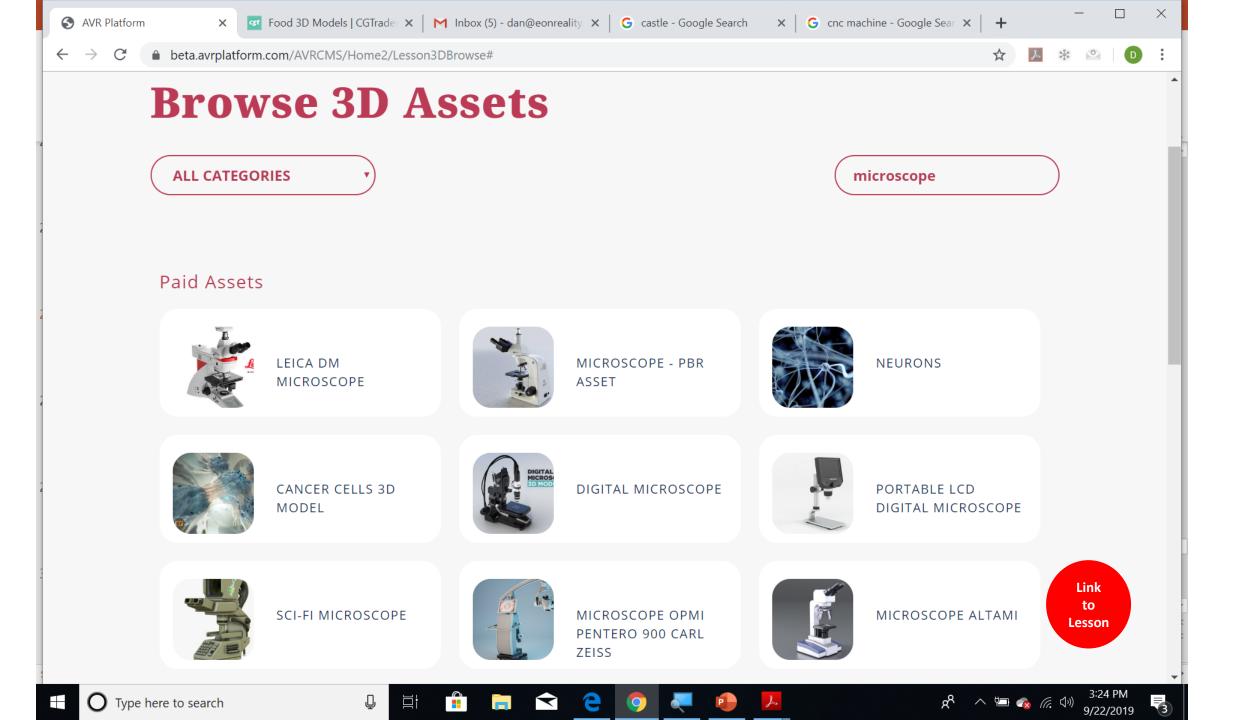


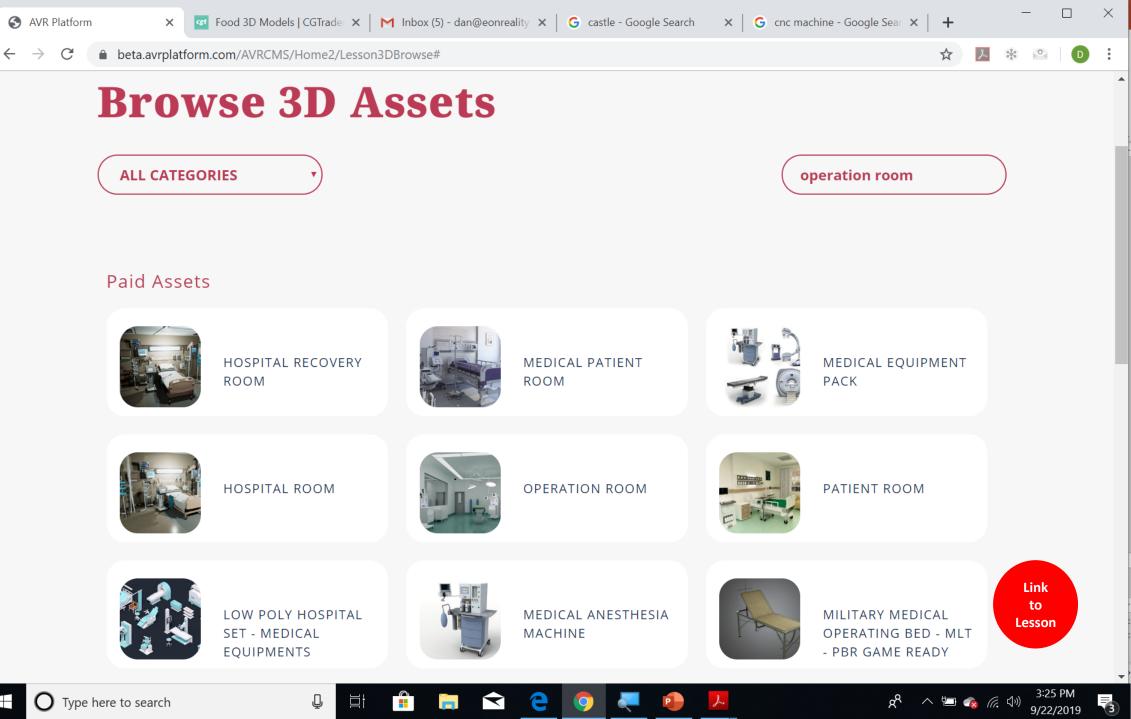


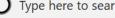


870,000 3D Assets























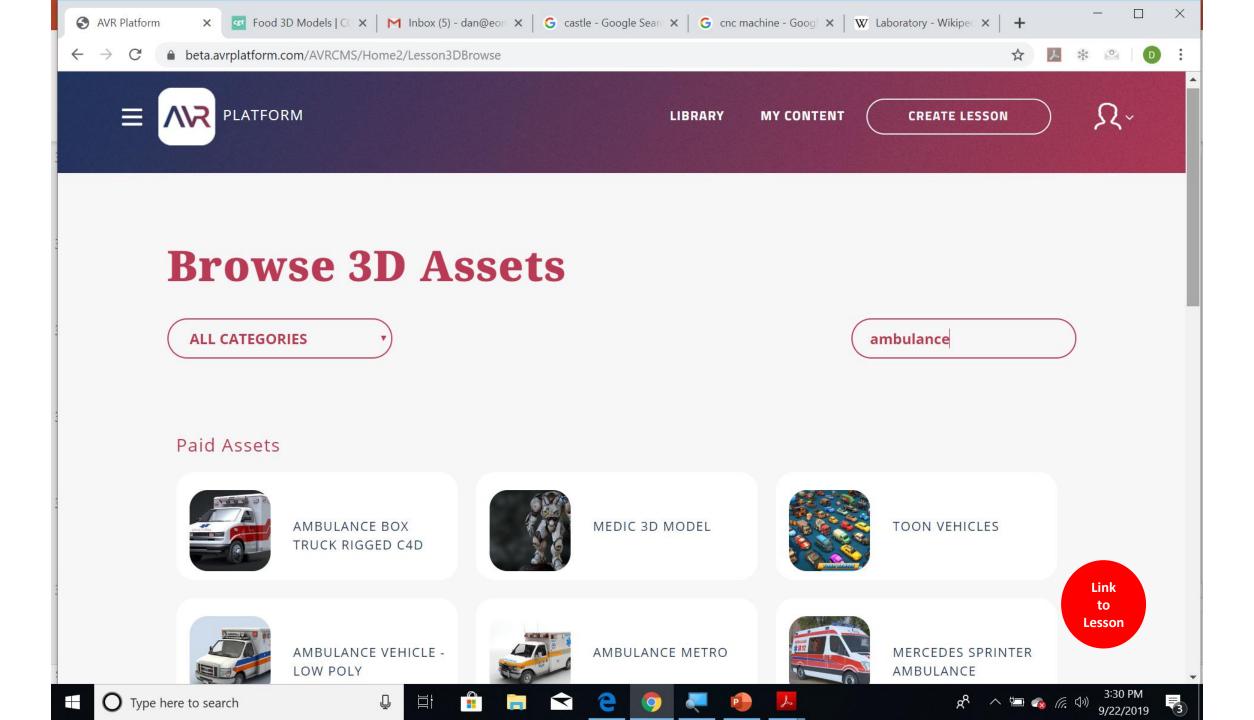


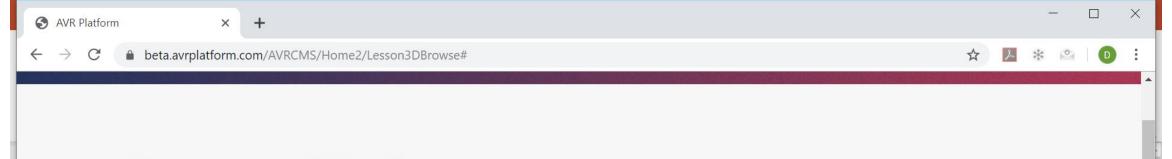












Browse 3D Assets

ALL CATEGORIES

Medical equipment

Paid Assets



STOMATOLOGIC EQUIPMENT



EPPENDORF - CENTRIFUGE 5425



MEDICAL EQUIPMENT PACK



VARIAN EDGE RADIOSURGERY SYSTEM SCANNER

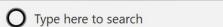


LOW POLY HOSPITAL SET - MEDICAL EQUIPMENTS



LAB EQUIPMENT SET 2



















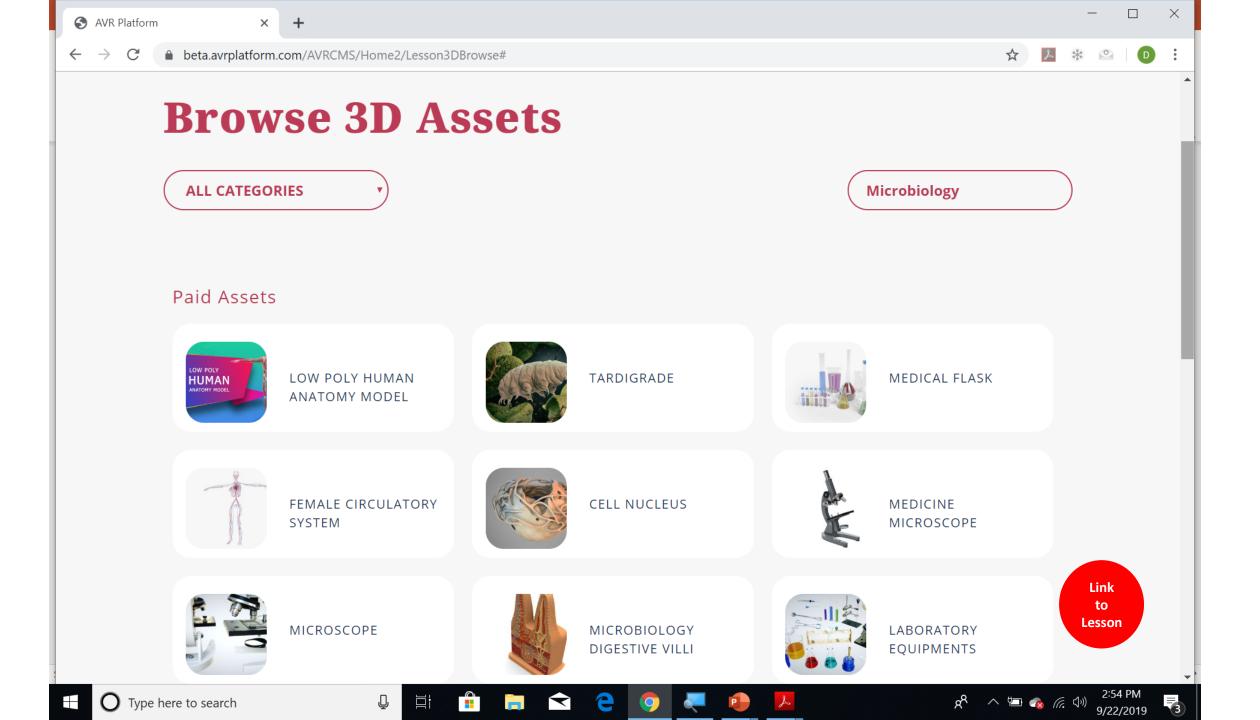


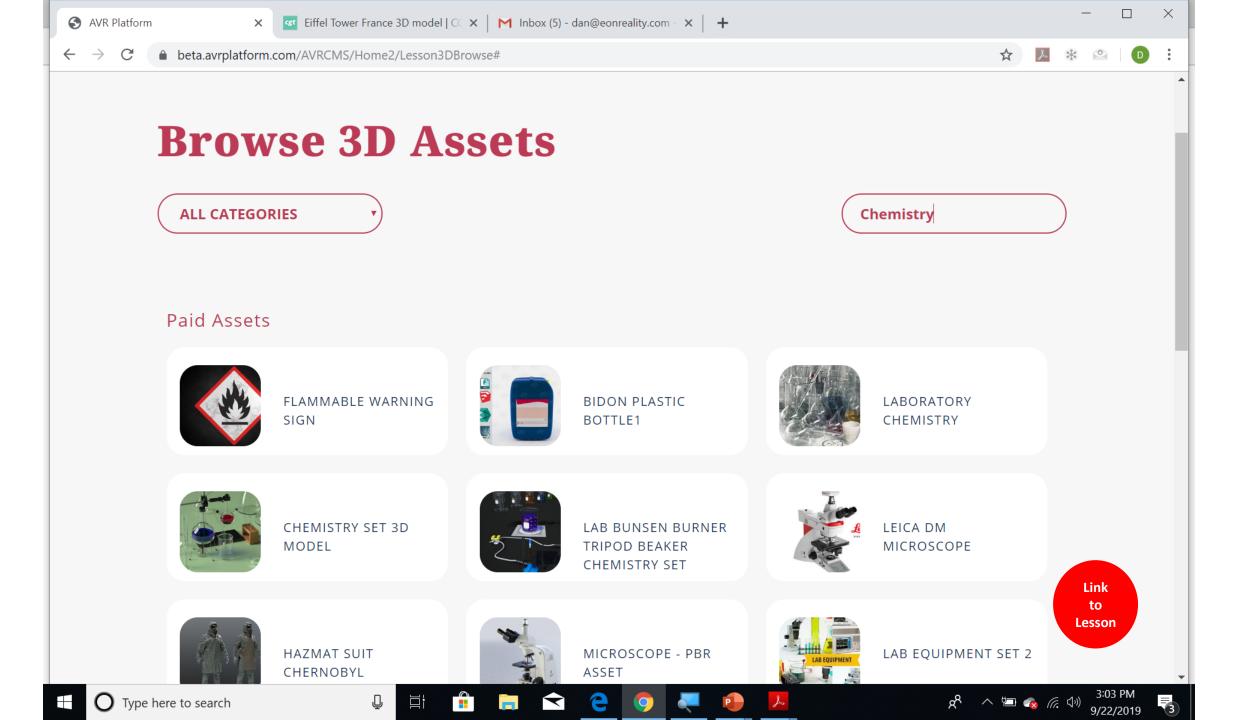


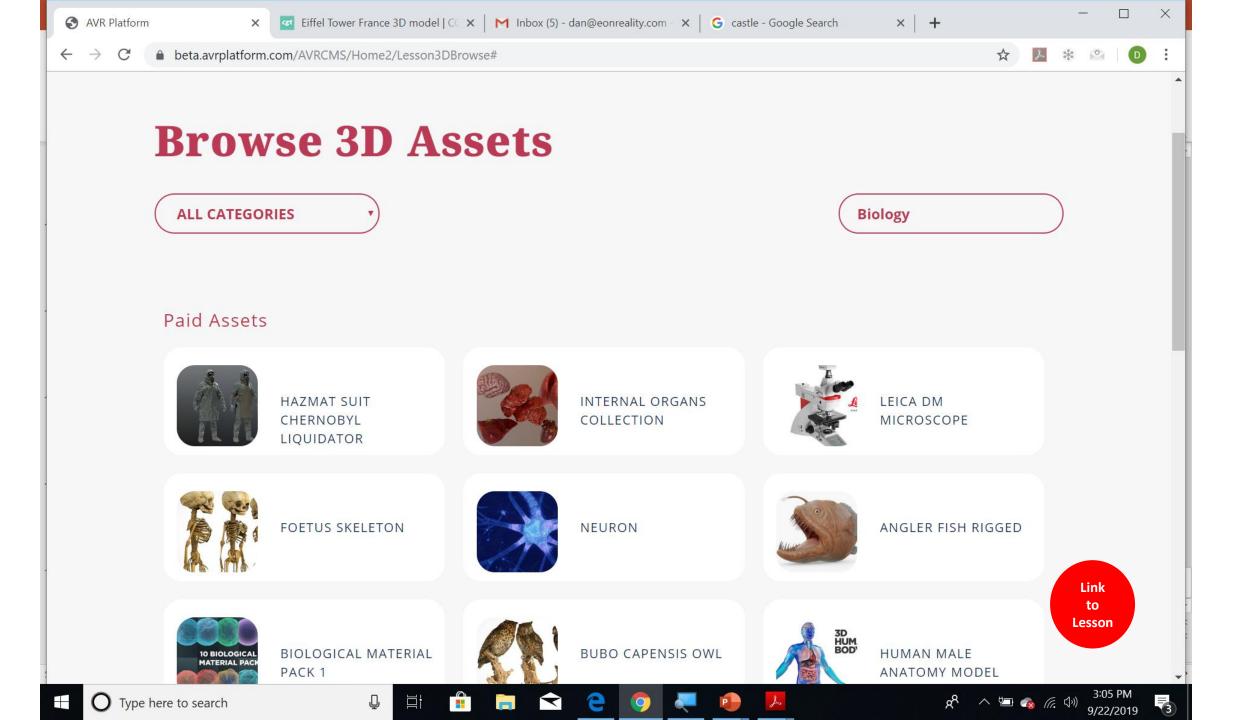


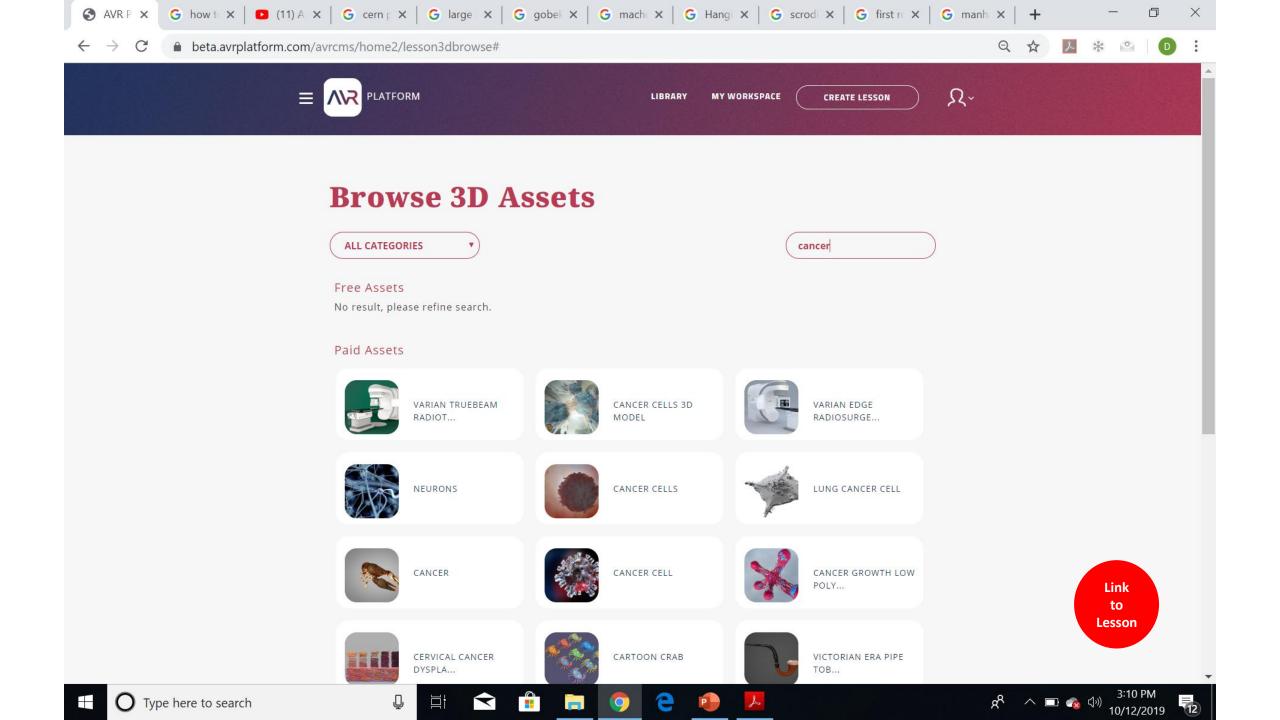


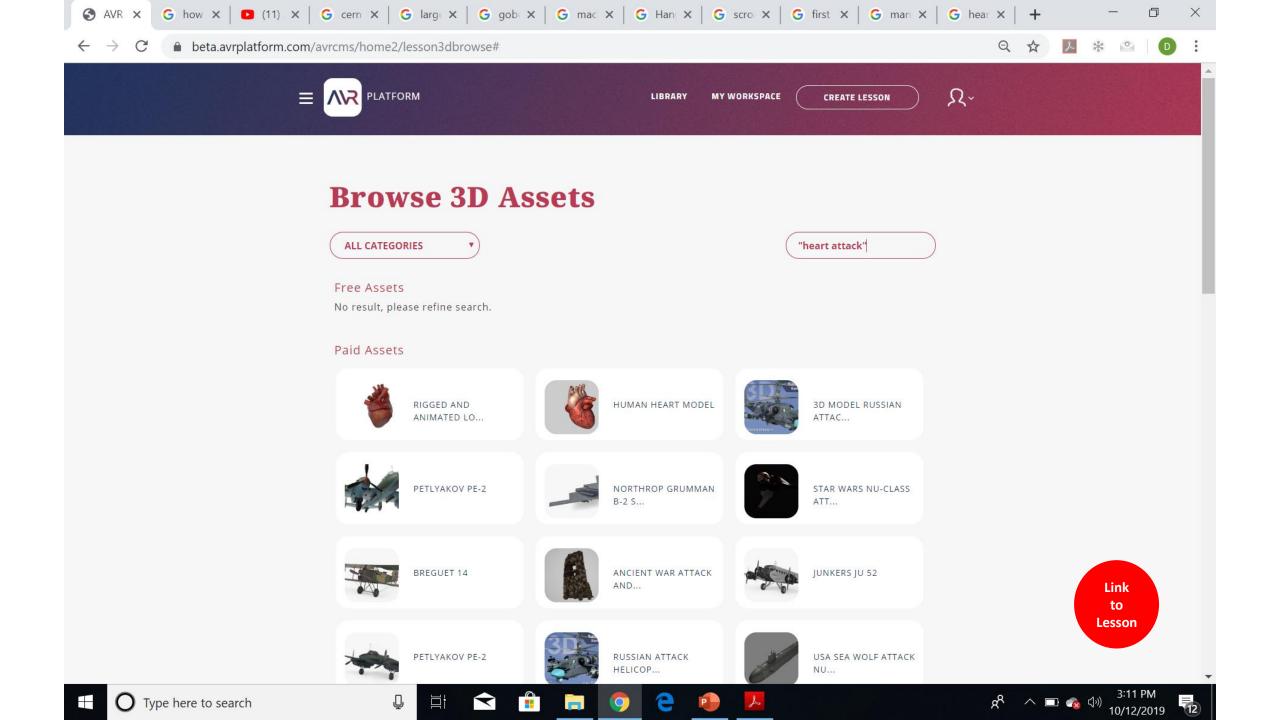


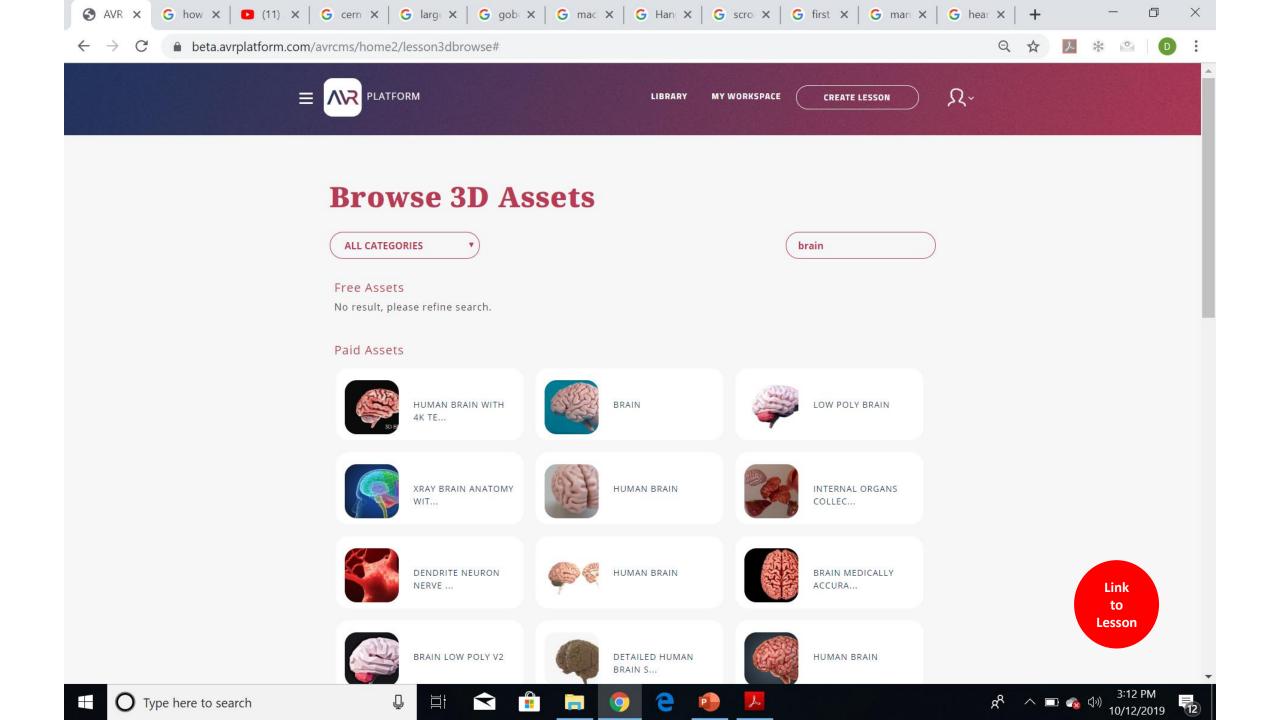


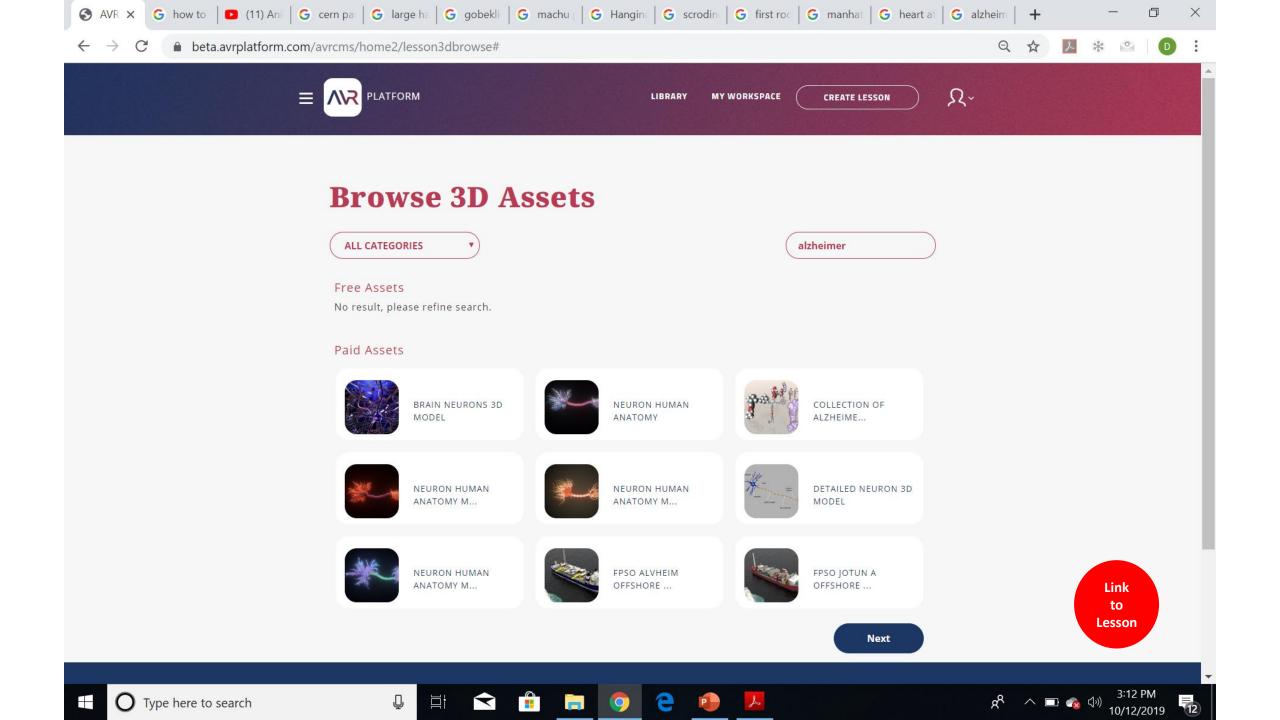


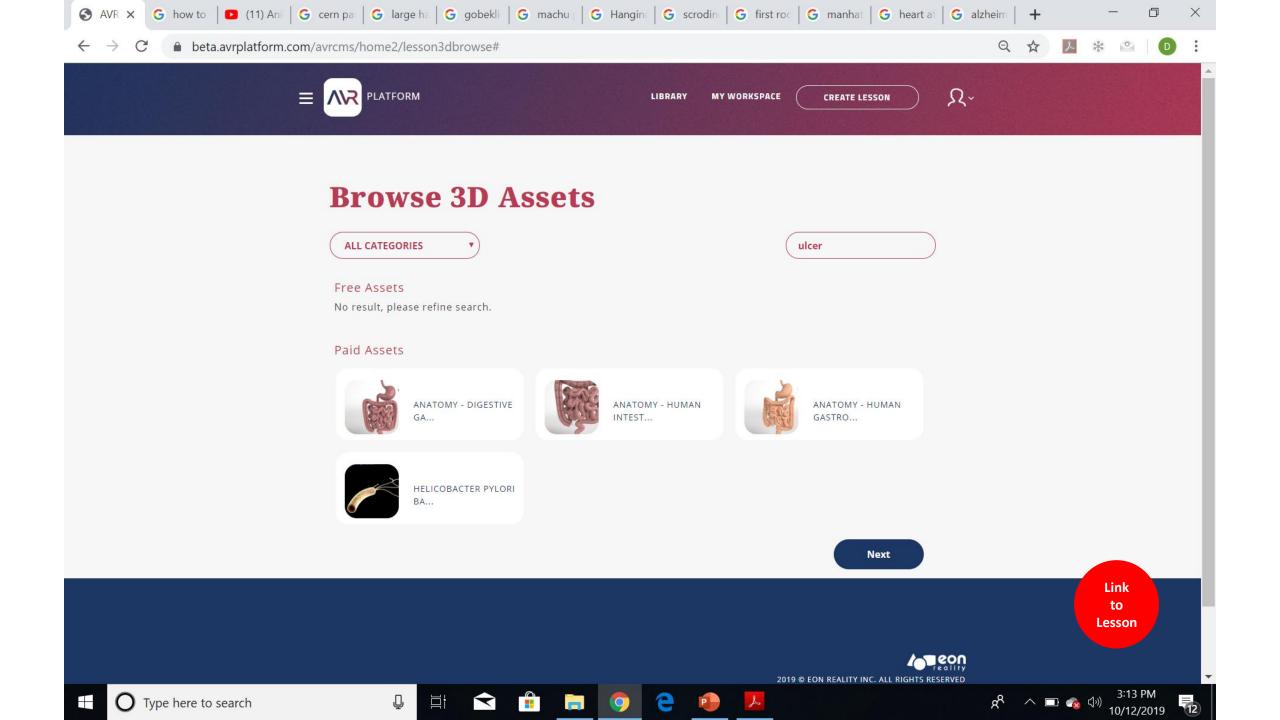


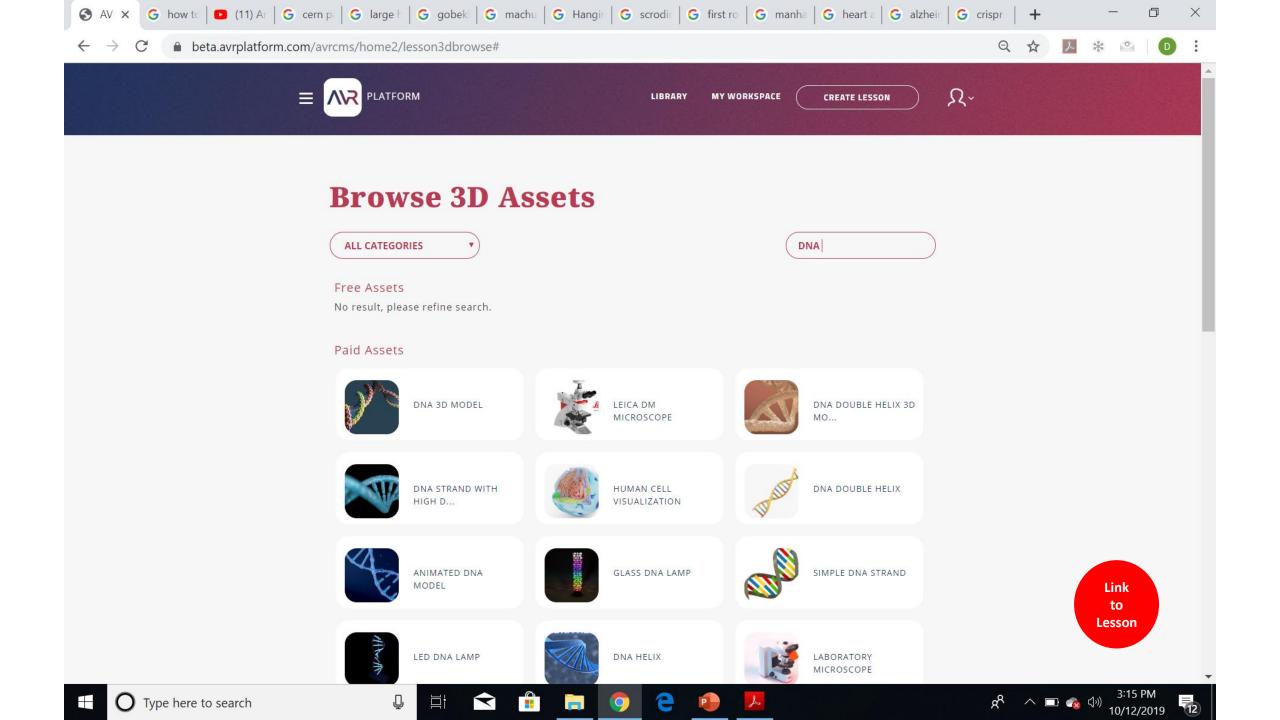


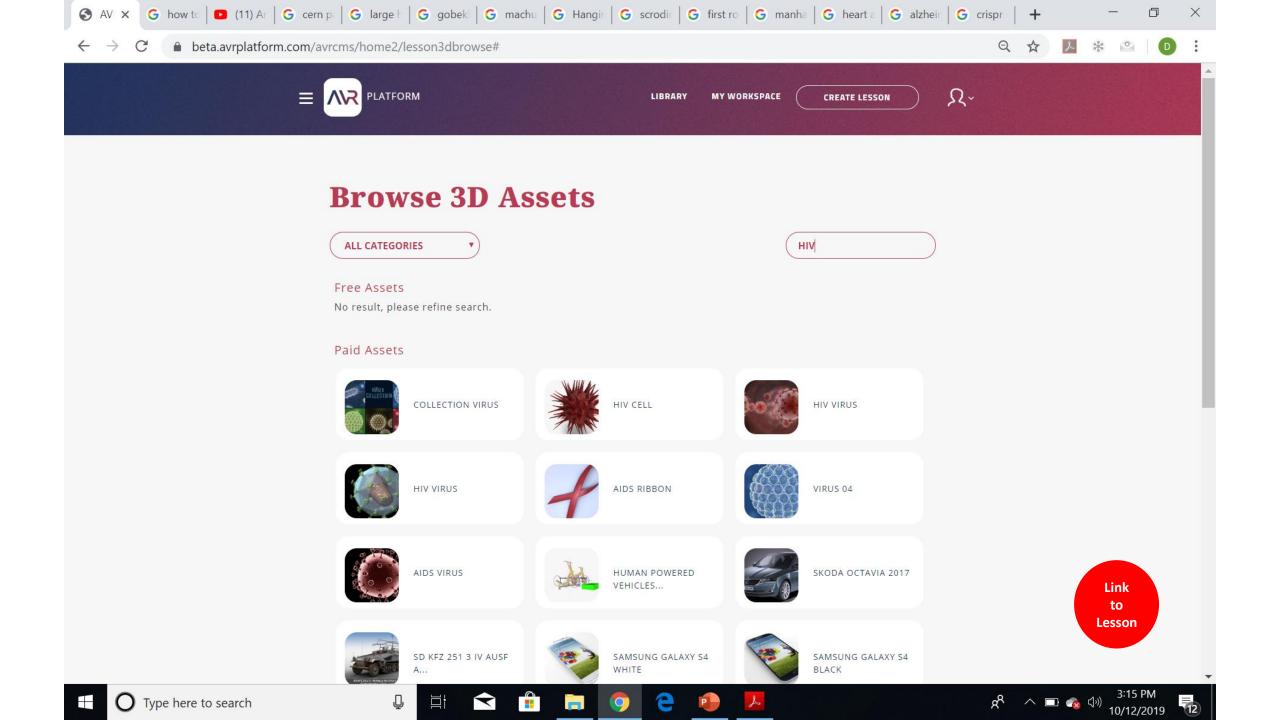


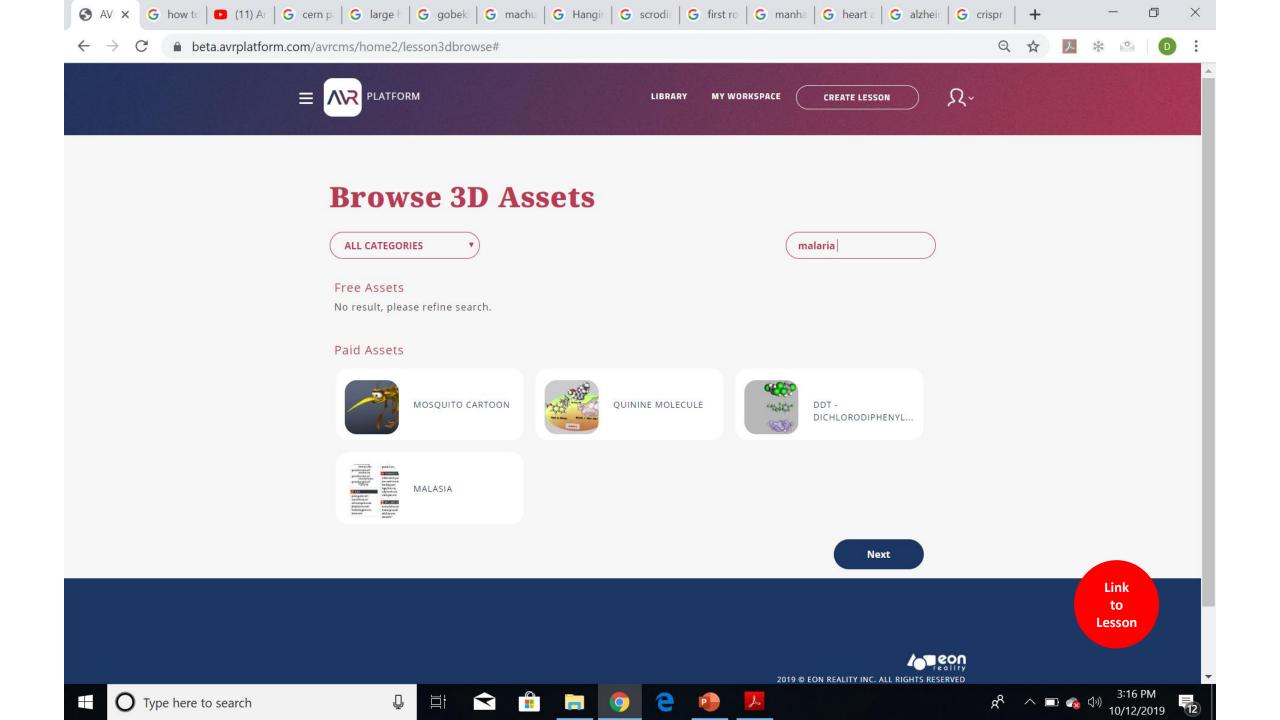


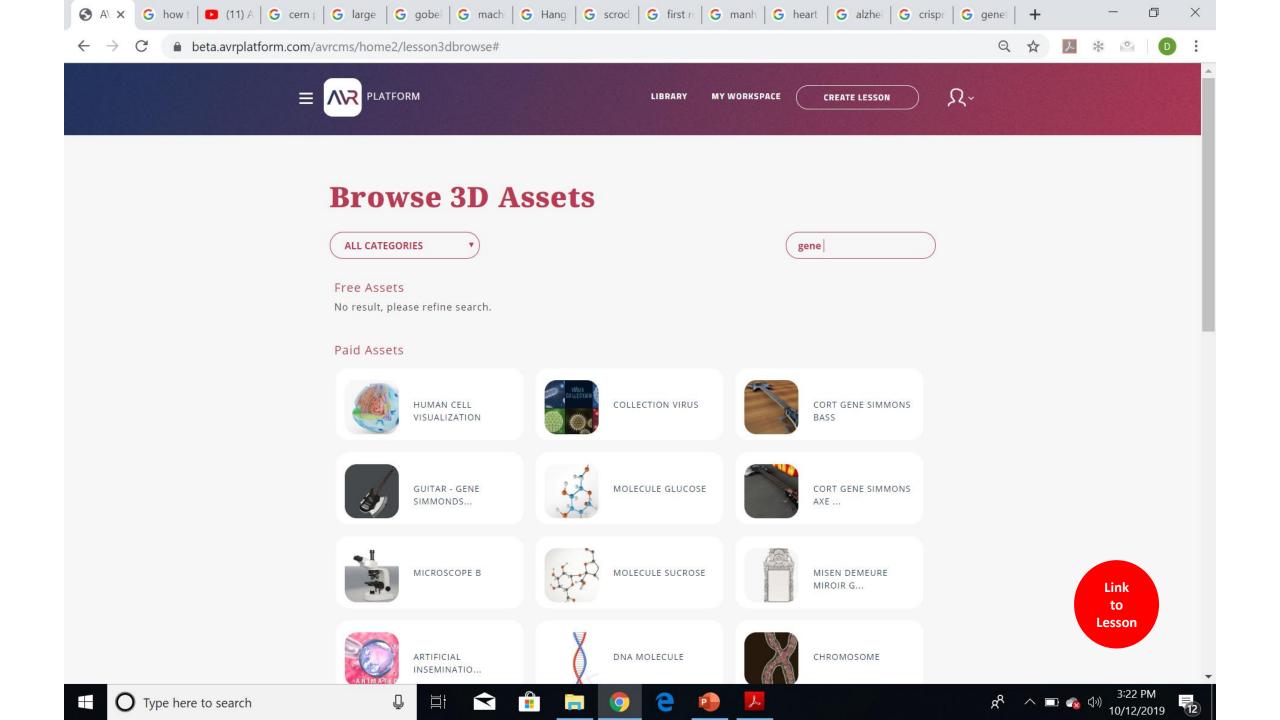












- How do we get training to the residents fast enough this is where the role of VR and AR comes in.
- There's a wealth of literature out there that shows experiential training outcomes far exceed learning through a textbook
- The healthcare sector has long entered an era of constant reskilling and upskilling.
- This is where I think VR and AR can play a crucial role to plug the gaps to improve medical training and assessment.
- And the beauty of it all, is that you can do and redo in countless iterations at zero patient risk.
- By the time a surgeon or resident is actually at the operating table, the patient and their family can rest easy knowing they are in safe hands.



VIRTUAL REALITY

(encapsulated environment)



Thank You