

# AI-Powered Personalized Heart Health

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Genomix AI

Alok Jha, MS, PhD  
Founder

Jennifer Kwan, MD, PhD  
Co-Founder



# Founders

Alok Jha, MS, PhD  
Co-Founder



- Former AI Adviser to AiCare
- Successfully demonstrated impact of genetics in Alzheimer's disease and Type 2 Diabetes
- Experience in AI modelling of genetics, imaging and drug repurposing.
- Research experience in Impacts of Ageing and Genetics based outcome
- Data scientist at Weill Cornell Medicine

Beth Israel Deaconess  
Medical Center



Weill Cornell  
Medicine

Jennifer Kwan, MD, PhD  
Co-Founder



- Experienced in personalized medicine
- Experience in genetics of cardiovascular medicine
- Research focus on genetics, ageing and imaging features
- Experience in genetics based clinical trials.
- Physician scientist at Yale University

Berkeley  
UNIVERSITY OF CALIFORNIA



UIC UNIVERSITY OF  
ILLINOIS CHICAGO

# Heart Failure

## — Key Data Points

6.5M

heart failure patients

1M

new cases per year

50%

of heart failure diagnoses  
can be linked to genetics  
and infections

CDC, HFSA

# Heart Failure — The Cost of Inaction



Patient **presents with symptoms** of heart failure



Patient (diagnostic) **testing oftentimes is inconclusive or not actionable**. Treatment is not personalized



Uncontrolled HF leads to significant **additional testing and hospitalizations** for HF



Continued **trial and error to figure out** which combination of medications is effective and tolerated

**\$15k**  
Delayed diagnosis

**\$25k**  
HF hospitalization

**\$125k +**  
Lifetime lost productivity

For many patients, this journey can take YEARS

**\$31 Billion/year burden  
on the healthcare system**

# Heart Failure — The Cost of Inaction



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Our goal is to provide actionable insights faster



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# Heart Failure — Lengthy Diagnosis Processes and Non-Personalized Treatments

Genetic profiling offers better prevention, treatment, and management, but:

## Complexity

Genomics variants are difficult to interpret



## Broad Parameters

Too many variables make it hard for physicians to decide on the best course



## Time-Consuming

Current process takes **2+ years** to get actionable results



# Why Now?

**UKB, TOPMED, Yale** curated cohorts

Extensive feature engineering, knowhow

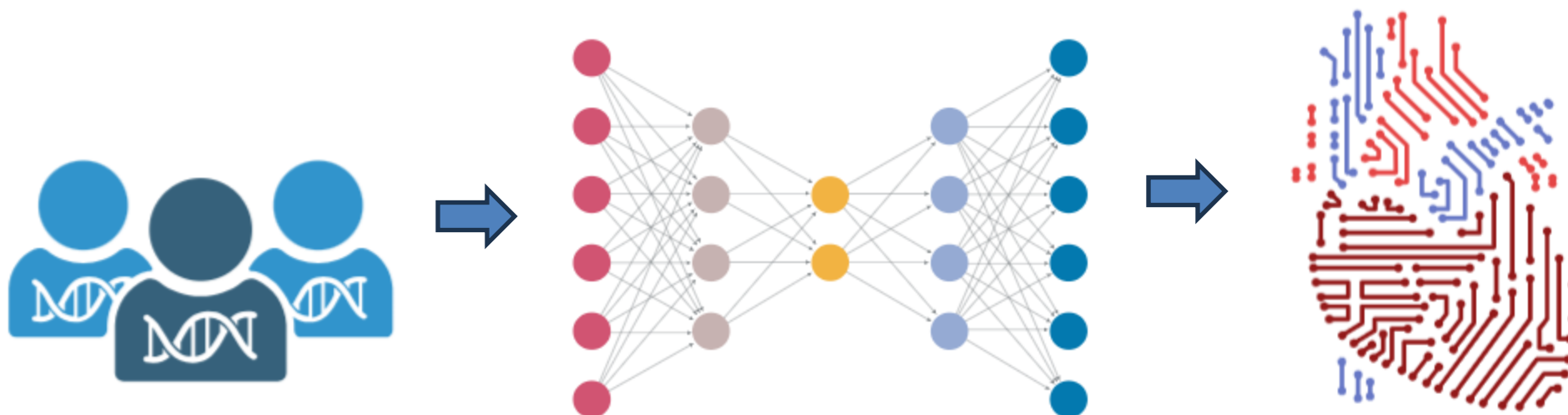


**Resources:**

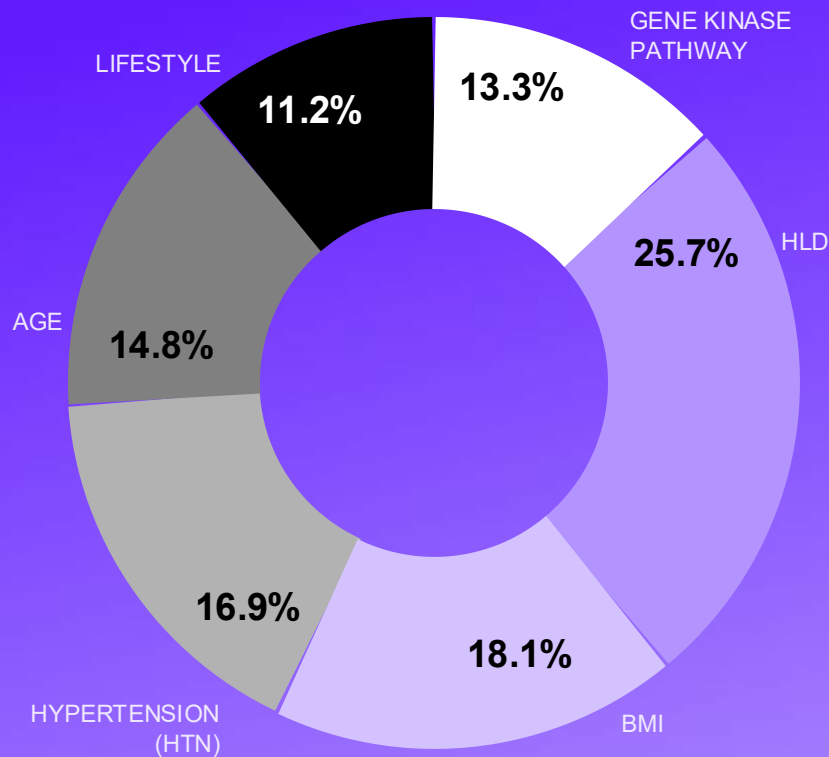
Large scale genomics datasets

**Technology:**

Deep learning AI tools can handle genomic data at scale → with heart failure insights



# Introducing RxScore



## Rapid AI-driven personalized risk assessment and treatment insights

- Personalized Disease Risk Forecasting
- Novel Treatment Combinations for Existing Diseases
- Disease Maintenance via Personalized Risk Management
- Preventive Measures and Actionable Suggestions
- Novel Drug Combinations from Approved Medications
- Personalized Food Allergy and Drug Response
- Similarity Index for Planning Future Therapy in Specific Populations

Genomix AI

Metrics:

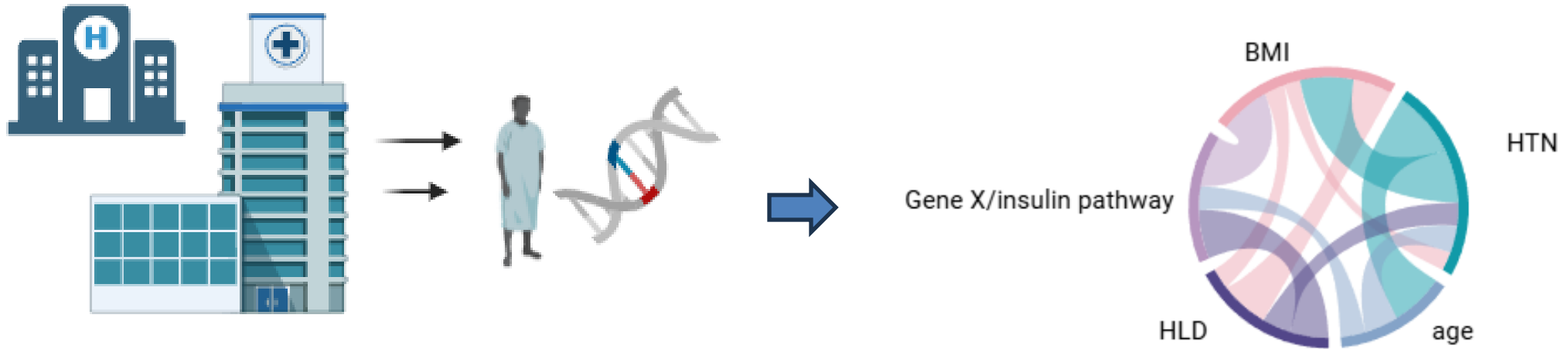
 #HF exacerbation,  # medication switches,  ED visits;  Improved function

# Revenue sources

Out of pocket executive health analysis

CPT code exists for reanalysis of existing genetic data \$500-1k

Clientele and source of data



Individuals, Pharma (patient selection), insurance companies, hospitals/clinics

# Competition

Sequencing

Variant calling

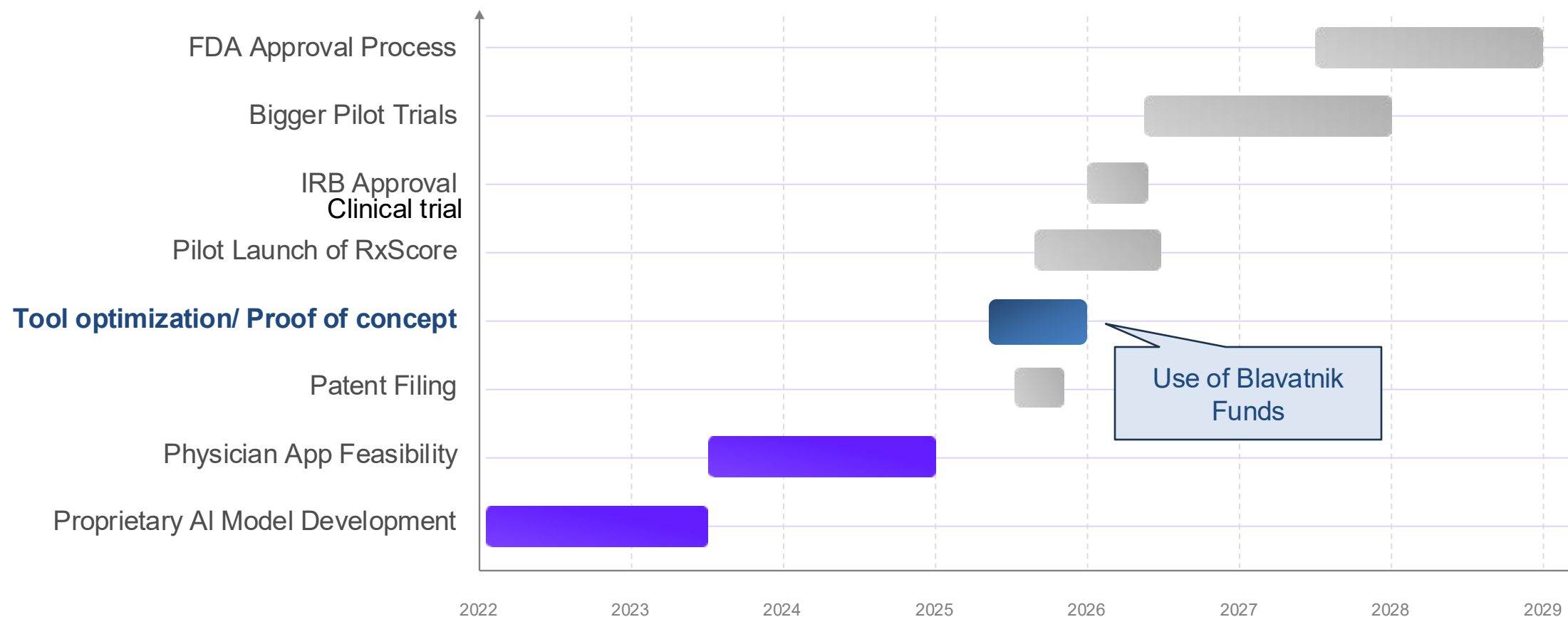
interpretability

Clinical reporting/insights

	Genomix	Azenta	Blueprint Genetics	Gene Dx	Current standard of care
Time to actionable insight	Days	Weeks to Months	Weeks to Months	Months	2-3 years
Adaptable/allows continual updating	✓	x	x	x	x
Provides insights on molecular pathway targets for drug discovery/repurposing	✓	x	x	x	x
Identifies specific targetable/actionable factors enabling personalized approach to health	✓	x	x	x	x
Turnaround time impact	High	Medium	Medium	Low	Low
Patient Outcomes	Fast & Actionable	Moderate	Moderate	Slow	Slow

# Objectives & Timeline

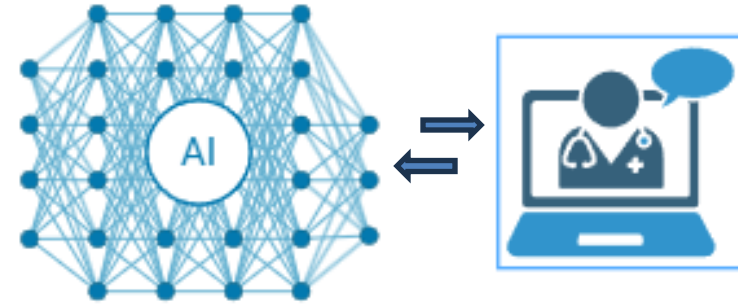
● COMPLETED ● PENDING



# Blavatnik funds will optimize a patentable tool & provide proof of concept

(100s of thousands of patients, extensive feature engineering and expertise, in process of filing patent)

**20k:** Algorithm automation & integration



**10k:** Testing: personalized score for 20 patients  
(IRB already approved)



Application of older tech  **75% improved outcomes** in Stanford Diabetes clinic  
 New therapies for Alzheimer's → Phase I clinical trials

*Metrics*

#HF exacerbation,  # medication switches,  ED visits;  Improved function 