

SolitonZ Games, LLC
865 Ridge Road
Hamden, CT 06517



Elena Bertozzi & Gregory Luther
T 262-751-6856, 860-306-6435
www.solitonzgames.com
elena@solitonzgames.com
greg@solitonzgames.com

Industry: Digital Health

Management:

Elena Bertozzi, PhD (Immersive Media, Philosophy, Professor and Chair of Game Design) - Founder, CTO
Gregory Luther, PhD (Optical Physics, Computational Photonics & Applied Math) - Founder, CEO
Seeking to fill additional roles:
VP Marketing & Sales

Board: Seeking members

Scientific Advisory Board:

Stefano Bertozzi, MD, PhD
Professor of Health Policy and Management, Dean Emeritus, Berkeley School of Public Health
Dilys Walker, MD
Director of Global Health Research, Bixby Center and Professor, UCSF School of Medicine
Aparna Sridhar, MD, MPH FACOG
Assoc. Clinical Professor, UCLA School of Medicine

Number of Employees: 2

Finance:

Accounting / Tax: BHC&B, P.C.
Funding to Date:
Founders: \$11,800
CT Innovation Pipeline Award: \$30,000

Financing Sought: \$1M

For:

- Scaling to larger customers by
- Integration with patient experience platforms
- Workforce expansion
- Content creation

Legal: Seeking Counsel

Business Description / Company Background

SolitonZ Games, LLC produces award-winning games that improve health outcomes and reduce cost. Using emerging interactive digital media and gamification, we motivate people to choose health-positive behaviors. SZG was founded in 2017 to commercialize a Bill & Melinda Gates Foundation grant-funded game. SZG produced three other games with grant and founder funding. Elena is a leading international expert in serious game development. Greg transitioned to industry from academia: Columbia, Rochester, CalTech, and Northwestern. He has served in CTO, Engineering Director and executive leadership roles building a tech firm from \$2M to \$40M. AOA is now a subsidiary of Northrop Grumman where he is currently a Technical Fellow.

Market Opportunity / Unmet Need:

EPIC and similar software are transforming healthcare. Analysts' estimate the US market for digital patient engagement is \$7B (2023) and \$18B (2030). The pandemic accelerated this transition and demonstrated both the potential benefits of digitization and the costs of health ignorance: unvaccinated people (cost 13B\$ in 2022 alone) on public health, workplace productivity, and national wellbeing. Digital patient education is now being added to platforms to reduce cost associated with avoidable diseases. We estimate that the US patient education market could be \$3B by 2030. Educational games are more effective than static media such as PDFs and videos at addressing difficult problems such as diabetes and sex ed, using innovative technologies, intrinsic motivation, and nimble localization for different user groups.

Products / Services – Launched & Pipeline:

Our current portfolio of games addresses vaccine hesitancy, family planning, and gestational diabetes. Activate My Shield (2021), and What's My Method? (2020) are currently being deployed. We are revising Baby, No More Sugar! (2019) to focus on educating women about gestational diabetes and healthy pregnancy. Our games are culturally localized and produced with multiple languages. They adapt to address specific patient concerns obtained from meta data collection during game play.

Commercial / Technical Milestones Achieved:

Pilots in India (2016-19) demonstrated efficacy in educating players and collecting meta data. Upcoming pilots will test healthcare process integration via tablets in waiting and examination rooms, phone downloads, and physician prescriptions for pre, post and in visit interventions: Barbados Family Planning (Q3 2023) Montefiore (Q4 2023) UCLA (Q1 2024). We have documented ownership of all products and IP. We are working on patent protection.

Competition / Competitive Advantage / Customer Benefits:

Most patient engagement platforms offer static patient education content (pdfs, pamphlets, videos). Though games have been shown to be more effective, they are not used. Game studios in the serious games market perform contract production lacking market focus and health sector expertise.

Financial Projections (Unaudited):

Starting with grant funded trials and revenue from clinics, we scale up to large health care systems accelerating growth in year 3 and 4 with financing.

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Revenue (thousands)	\$3	\$10	\$750	\$1,500	\$3,000	\$4,500
Gross Profit	\$1.3	\$5.4	\$450	\$1,035	\$2,220	\$3,510
Gross Margin	44%	54%	60%	69%	74%	78%