

# ALTRIS AI PLATFORM

**SETTING HIGHER DIAGNOSTIC STANDARDS  
AND IMPROVING PATIENT OUTCOME**



# WHAT IS ALTRIS AI ?

---

Altris AI is an AI-powered, standalone, browser-based software for OCT scans interpretation created for the support of eye care specialists in diagnostic decision - making.

## BUSINESS VALUE OF ALTRIS AI



### Follow up examinations for patients who need them most

With Altris AI eye care specialists **won't miss minor, early, rare pathologies** which will lead to accurate diagnosis for more patients and adequate treatment.



### Time saved, more patients served

Eye care specialists spend time only on pathological scans and overall examination will take less than **10 minutes**.



### Every patient gets OCT examination

Even less experienced eye care professionals can offer OCT.



### No time wasted on controversial scans

With Altris AI eye care specialists have a second opinion when dealing with controversial scans immediately which will save **3-5 hours** a week.

# PAIN POINTS OF EYE CARE SPECIALISTS



## Not noticing minor / early / rare pathologies

**25% of eye care specialists miss minor / early / rare pathologies** 3 times a week on average. **31% of eye care specialists don't know if they miss them.**

No follow up examinations are assigned which leads to worse patient outcome.



## Not offering OCT examination to every patient

**16% of eye care specialists** are not sure about their OCT skills and **don't offer OCT examination.** With Altris AI even less experienced eye care specialists will feel confident enough.



**Spending too much time on non-pathological scans** and on OCT examination in general.



## Struggling with controversial OCT scans

**65% of eye care specialists come across controversial scans** 3 times a week on average. They spend hours on consulting colleagues but sometimes don't find the right answer immediately.

## WHAT ALTRIS PROVIDES

---

- AIOCT screening and quick triage
- More than 100 retina conditions segmentation and classification with AI
- Vendor- neutral AI retina layers segmentation and thickness calculation
- Pathologies visualization and linear measurements done by AI
- Data management and data security
- High performance and accuracy

**5**

mins for  
interpretation and  
reports preparation

**91%**

cumulative accuracy  
of AI models

**100 +**

of detected retinal  
conditions



## All data in one place

Any authorized eye care specialist from any medical institution can access patient's history of examinations to make better diagnostic decisions.



## Full information about every patient

Eye care specialists can describe each patient's case using important details (gender, past traumas, concomitant diseases, such as diabetes).



## All formats are supported

Eye care specialists can upload DICOM and non-DICOM files of any OCT scan length (6mm - 12mm)



## Efficient team management

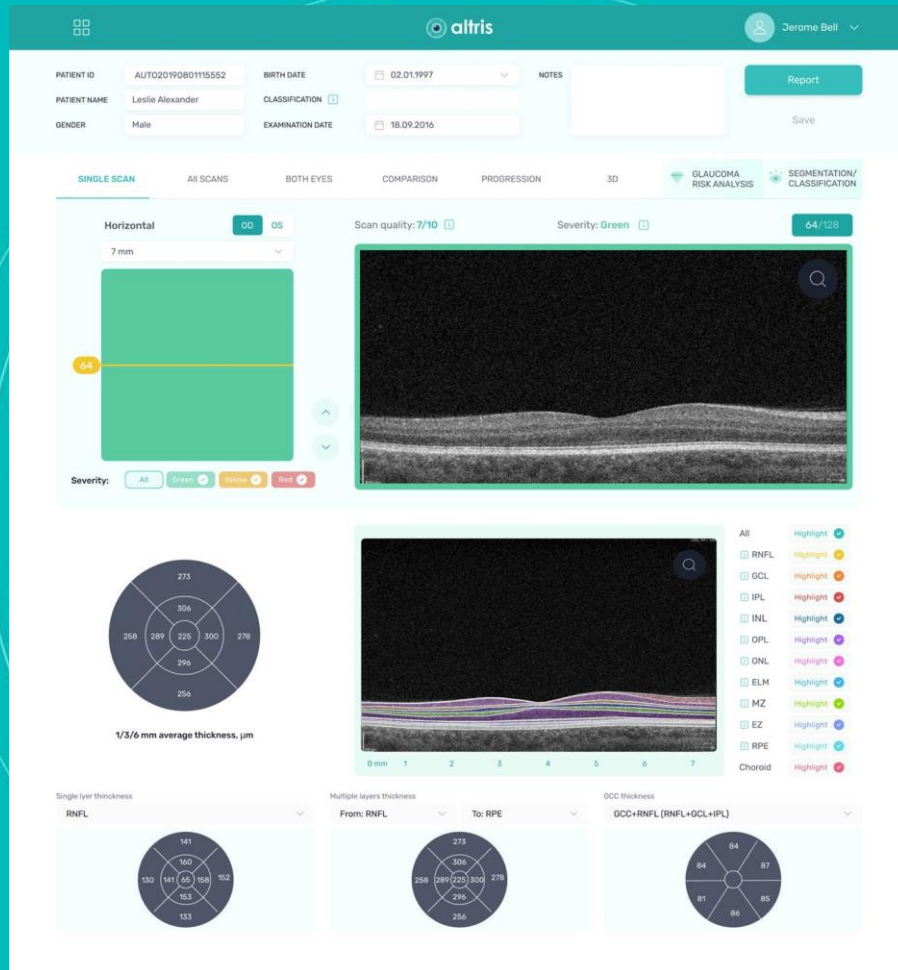
Assign team members with different roles so they could access patients' data easily.

# ALTRIS AI PLATFORM

\* all the following scans are used for visualization purpose



# AI OCT SCREENING



- Pathology severity visualization**  
 When you upload N scans into the system, it will instantly differentiate between normal retina scans, moderate severity scans, and severe scans
- Detection of low-quality scans**  
 Altris AI detects low-quality scans automatically and warns eye care specialists about the possibility of corrupt data
- Vendor neutral retina layers segmentation with AI**  
 Altris AI can segment 10 retina layers and provide the possibility to explore each one of them
- Retina thickness, layers thickness, multiple layers thickness**  
 Altris AI analyzes the thickness of retina, separates layers or multiple layers.



altris Jerome Bell

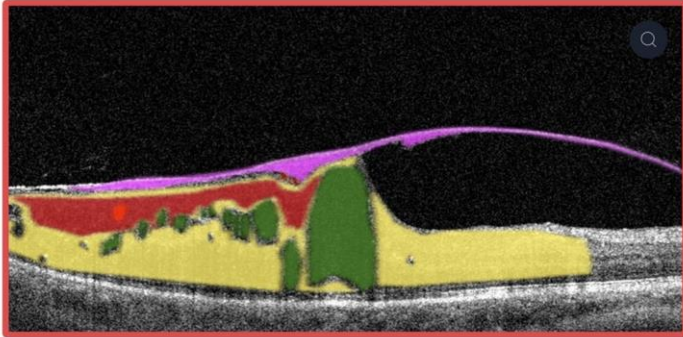
PATIENT ID: AUTO2019080115552 BIRTH DATE: 02.01.1997 NOTES: Diabetic retinopathy, Epiretinal fibrosis, Vitreo-macular traction syndrome, Diabetic macular edema **Report**

PATIENT NAME: Leslie Alexander CLASSIFICATION: Diabetic retinopathy, Epiretinal f... Save

GENDER: Male EXAMINATION DATE: 18.09.2016

SINGLE SCAN AI SCANS BOTH EYES COMPARISON PROGRESSION 3D GLAUCOMA RISK ANALYSIS SEGMENTATION/CLASSIFICATION

Scan quality: 9/10 Severity: Red 44/128



Analysed: 1/3 **Analyse other scans**

Segmentation:	Area	Calculate area	Classification:
All	<input type="checkbox"/>	<b>Highlight</b> <span>🟢</span>	Diabetic retinopathy
Vitreoretinal traction	<input type="checkbox"/>	<b>Highlight</b> <span>🟡</span>	Epiretinal fibrosis
Epiretinal fibrosis	<input type="checkbox"/>	<b>Highlight</b> <span>🟡</span>	Vitreo-macular traction syndrome
Disorganization of retinal inner layers	<input type="checkbox"/>	<b>Highlight</b> <span>🔴</span>	Diabetic macular edema
Pseudocysts	<input type="checkbox"/>	<b>Highlight</b> <span>🟠</span>	
Intraretinal cystoid fluid	<input type="checkbox"/>	<b>Highlight</b> <span>🟢</span>	
Diffuse edema	<input type="checkbox"/>	<b>Highlight</b> <span>🟡</span>	

# AI SEGMENTATION / CLASSIFICATION

- Pathology detection and visualization with AI**  
 Classification of pathologies by AI algorithm with the possibility to edit or delete them
- Utilization of AI for the segmentation of pathological areas**  
 Highlight pathological areas on the scan
- Pathology area calculation is done automatically by AI**  
 Pathological area is also automatically updated when the highlighted area is changed by the user.

PATIENT ID: AUTO2019080115552    BIRTH DATE: 02.01.1997    NOTES: [ ]    Report

PATIENT NAME: Leslie Alexander    CLASSIFICATION: [ ]    Save

GENDER: Male    EXAMINATION DATE: 18.09.2016

SINGLE SCAN    **ALL SCANS**    BOTH EYES    COMPARISON    PROGRESSION    3D    GLAUCOMA RISK ANALYSIS    SEGMENTATION/CLASSIFICATION

Severity: All    [ ]    [ ]    [ ]    SORT BY: Severity: High - Low

Severity: High - Low ✓  
Severity: Low - High  
In order

17/12/8    18/12/8    19/12/8

20/12/8    21/12/8    22/12/8

23/12/8    24/12/8    25/12/8

## ALL SCANS

- **Looking through ALL the scans with no additional effort**  
Eye care specialists can zoom the scan they need when looking through all the scans.

Convenient filtration according to the historical order or/and severity principles.

Eye care specialists can choose the most problematic scans among all the scans fast.

altris Jerome Bell

PATIENT ID: AUTO2019080115562 BIRTH DATE: 02.01.1997 NOTES: Diabetic retinopathy, Epiretinal fibrosis, Vitreo-macular traction syndrome, Diabetic macular edema Report

PATIENT NAME: Leslie Alexander CLASSIFICATION: Diabetic retinopathy, Epiretinal fibrosis Save

GENDER: Male EXAMINATION DATE: 18.09.2016

SINGLE SCAN All SCANS BOTH EYES COMPARISON PROGRESSION 30 GLAUCOMA RISK ANALYSIS SEGMENTATION/CLASSIFICATION

Horizontal, OS 18.09.2016 7 mm 6.4 1/3/6 mm average thickness,  $\mu\text{m}$  Severity: All Green Yellow Red

Horizontal, OS 11.05.2018 7 mm 8.3 1/3/6 mm average thickness,  $\mu\text{m}$  Severity: All Green Yellow Red

Scan quality: 8/10 Severity: Green 44/128 Scan quality: 9/10 Severity: Red 33/64

Single layer thickness Multiple layers thickness GCC thickness

From: RNFL To: RPE

From: RNFL To: RPE

From: RNFL To: RPE

From: RNFL To: RPE

## BOTH EYES

- Adding patients' examination of the fellow eye in 1 click**

Eye care specialists can upload the scan of the fellow eye fast to compare results.
- Reviewing patient's both eyes to compare pathology signs or thickness difference**

Eye care specialists can examine 2 eyes at the same time. If a specialist notices the pathology on one eye, a doctor can use a healthy eye for comparison.



Jerome Bell

PATIENT ID: AUTO2019080115552    BIRTH DATE: 02.01.1997    NOTES:

PATIENT NAME: Leslie Alexander    CLASSIFICATION:

GENDER: Male    EXAMINATION DATE: 18.09.2016       

SINGLE SCAN    All SCANS    BOTH EYES    **COMPARISON**    PROGRESSION    30    GLAUCOMA RISK ANALYSIS    SEGMENTATION/CLASSIFICATION

Horizontal, OS    18.09.2016

7 mm

64

1/3/6 mm average thickness,  $\mu\text{m}$

Severity:

Horizontal, OS    03.02.2019

7 mm

64

1/3/6 mm average thickness,  $\mu\text{m}$

Severity:

Scan quality: 7/10    Severity: Green    64/128    Scan quality: 9/10    Severity: Green    64/128

Thickness difference

Retina difference

Single layer thickness    Multiple layers thickness    GCC thickness

From: RNFL    To:



# COMPARISON

- Comparing the same eye in historical perspective**

Many patients with progressive diseases require regular follow up examinations. The comparison function of Altris AI makes this follow up control more convenient.
- Exploring several scans simultaneously**

Eye care specialists can examine several scans simultaneously and analyze the examination on the right and on the left in parallel. This function allows tracing changes on the pathological scans in real time. This function is available even if there is a different number of scans in 2 examinations.
- Retina thickness difference**

A separate thickness map for the review of the thickness difference of the macular area.



## PROGRESSION

- Tracing pathology progression by adding several examinations at the screen

Progression section allows tracing the state of pathology and its transformation with the time.

Examinations can be placed in a convenient order with the possibility to swap, delete them, and add new ones.

A comprehensible graph indicating the change of the central layer thickness is available here as well.

Tracing the change of the central sector thickness in real time.

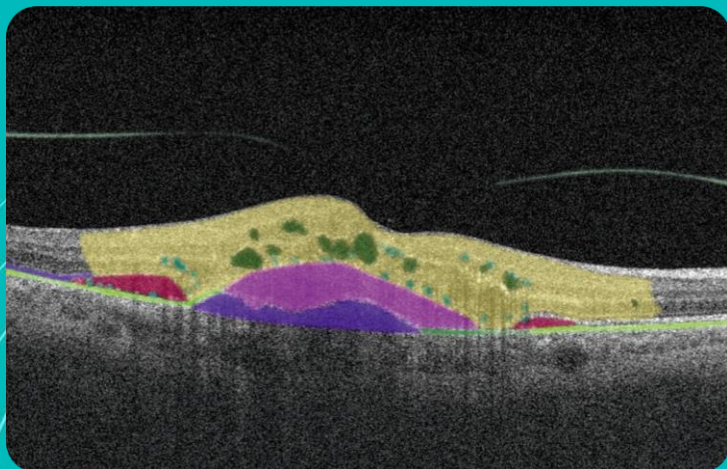
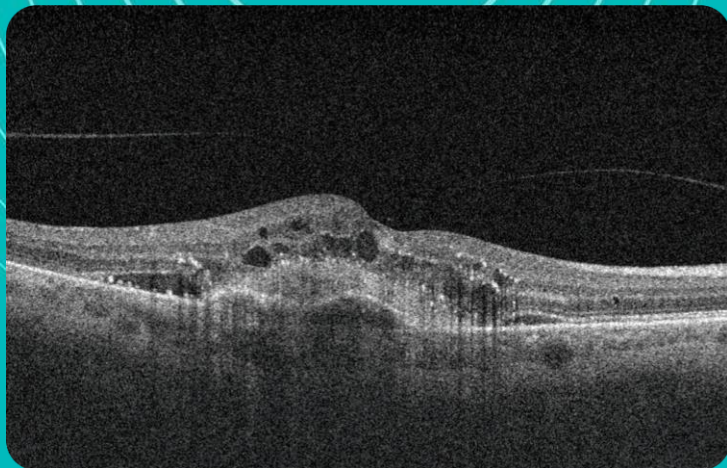


## Classification example:

- Wet AMD
- Choroidal neovascularization

## Segmentation example:

- Posterior hyaloid membrane detachment
- RPE disruption
- RPE atrophy
- Subretinal hyperreflective material
- Fibrovascular RPE detachment
- Ellipsoid zone disruption
- Intraretinal hyperreflective foci
- Subretinal fluid
- Intraretinal cystoid fluid
- Diffuse edema





## Segmentation

*Chorioretinal folds*  
*Chorioretinal scar*  
*Confluent drusen*  
*Cotton wool spot*  
*Cuticular drusen*  
*Diffuse edema*  
*Disorganization of retinal inner layers*  
*Double layer sign*  
*Drusenoid RPE detachment*  
*Ellipsoid zone disruption*  
*Ellipsoid zone focal defect*  
*Epiretinal fibrosis*  
*Fibrovascular RPE detachment*  
*Floaters*  
*Focal choroidal excavation*  
*Focal hyperreflectivity*  
*Full thickness macular hole*  
*Hard drusen*  
*Hard exudates*  
*Hyperreflectivity of neurosensory retina*  
*Hypertransmission*  
*Internal limiting membrane thickening*  
*Intraretinal cystoid fluid*  
*Intraretinal hyperreflective foci*  
*Lamellar macular hole* *Macular excavation* *Microaneurysm*

*Neurosensory retina atrophy*  
*Neurosensory retina detachment*  
*Operculum*  
*Outer retina tubulations*  
*Posterior hyaloid membrane adhesion*  
*Posterior hyaloid membrane detachment*  
*Posterior hyaloid membrane detachment with operculum*  
*Pseudocysts*  
*Pseudohole*  
*Reticular pseudodrusen*  
*Retinal neovascularization*  
*Retinal wrinkling*  
*Retinoschisis*  
*RPE atrophy*  
*RPE disruption*  
*RPE elevation*  
*RPE hyperreflectivity*  
*RPE rupture*  
*Serous RPE detachment*  
*Shadowing*  
*Soft drusen*  
*Subretinal fluid*  
*Subretinal hyperreflective material (SHRM)*  
*Subretinal hyperreflectivity*  
*Subretinal space*  
*Vitelliform material*  
*Vitreoretinal traction*

## Classification

*Asteroid hyalosis*  
*Central retinal artery occlusion*  
*Central retinal vein occlusion*  
*Central serous chorioretinopathy*  
*Chorioretinal scar*  
*Chorioretinitis*  
*Choroidal melanoma*  
*Choroidal neovascularization*  
*Choroidal nevus*  
*Choroidal rupture*  
*Cone/rod dystrophy*  
*Cystoid macular edema*  
*Degenerative myopia*  
*Diabetic macular edema*  
*Diabetic retinopathy*  
*Dry AMD*  
*Dry AMD - Geographic atrophy*  
*Epiretinal fibrosis*  
*Epiretinal hemorrhage*  
*Foveaschisis*  
*Full thickness macular hole*  
*Hypertensive retinopathy*  
*Intraretinal hemorrhage*  
*Lamellar macular hole*  
*Laser-induced maculopathy*  
*Macular degeneration*

*Macular telangiectasia type 2*  
*Myelinated nerve fiber layer*  
*Myopia*  
*Pigment epithelium detachment*  
*Polypoidal choroidal vasculopathy*  
*Preretinal haemorrhage*  
*Pseudohole*  
*Retinal angiomatous proliferation*  
*Retinal detachment*  
*Retinitis pigmentosa*  
*Retinoschisis*  
*RPE rupture*  
*Solar maculopathy*  
*Sub-RPE hemorrhage*  
*Subhyaloid hemorrhage*  
*Subretinal fibrosis*  
*Subretinal hemorrhage*  
*Tapetoretinal dystrophy*  
*Vitelliform dystrophy*  
*Vitreo-macular traction syndrome*  
*Wet AMD*  
*X-linked juvenile retinoschisis*



## AI PERFORMANCE INDICATORS

**Accuracy 98.50%**

**Sensitivity 97.00%**

**Specificity 99.80%**

**Segmentation  
accuracy 95.00%**

Accuracy is the proportion of predictions the model got right. >>

Sensitivity is the proportion of pathological scans correctly classified. >>

Specificity is the proportion of non-pathological scans correctly classified. >>

A pixel perfect match between the deep learning model output and ground truth annotation. >>

## CONTACT US

2nd km Katerinis - Elassonas, Katerini, Greece  
Branch: Evelpidon 61-63  
11362 Athens, Greece

Tel: +30 23510 79750 / +30 210 5750572  
e-mail: [info@optohellas.com](mailto:info@optohellas.com)  
[www.optohellas.com](http://www.optohellas.com)