The IMPACT Center Podcast – Full Episode Transcript
ImpacTech Episode 27 - "Success for Steadiwear"

SPEAKERS
Emile Maamary, Dr. Mary Goldberg, Dr. Michelle Zorrilla

Mary Goldberg 0:02

Welcome back to the ImpacTech podcast. If you missed part one of my colleague Michelle Zorrilla and my conversation with Emile Maamary, co founder and CMO of Steadiware, be sure to check it out to hear about his journey through product development and regulatory hurdles. In today's episode "Success for Steadiware," we'll explore how the Steadi 3 is changing lives, the challenges of scaling a business in the assistive technology field, and Emile's vision for the future of Steadiware. Let's dive back in. Welcome back Emile for part two of our conversation with you, we really appreciate you being with us. So when we think about the overall market reach and impact of your product meal, what has the reception been like from your target users and in particular, do you have any insights into how it may have impacted their lives.

Emile Maamary 1:02

Oh, wow. Okay, the reception has been, you know, pretty warmly received. The device has been pretty warmly received. You know, significant improvements of 85% in our clinical study have been warmly received too. Devices restored independence, a dignity for many people, it enables them to perform daily activities like eating, drinking, writing. Healthcare providers are also really eager to demonstrate the technology we've we've lined up around 70 demo sites across the US and Canada that we'll be deploying devices to over the next couple of months. They praise the simplicity, the effectiveness, and I think that will contribute to higher adoption rates. Success Stories. You asked about success stories, right? There are quite a few different success stories. They're all there's a couple really nice testimonials on our website. I'll summarize them. Catherine, she's able to use the computer again. She's able to drink and eat alone again. Betty, she's able to play on her iPads, form puzzles again, apply eyeliner makeup. Joel is happy to be drinking with one hand. He's still working as an accountant, so he's very happy with the device. And those are some of the testimonies you'll see on the website. Some of the other ones I I've heard over the years are, you know, I'm able to play the clarinet again. I'm able to shave my beard again. I'm able to use whatever, whatever equipment in the garage freely. Something that also I should bring, bring up is that we've we also ran a study for the use of our device in rural settings to identify if it would reduce the amount of caregiving time. And in fact, it did. Our device was able to help caregivers save the time. It was mainly because of activities like eating and drinking and writing being easier so patients were calling their caregivers less, and that publication came out in May. Full disclosure, it was the Steadi 2, not the Steadi 3, but it's not going to be any different for the Steadi 3.

Mary Goldberg 3:20

You touched on the individual's function and participation. So participation, let's say, using the computer, so that infers, you know that could be getting back into school, for example, or working. And then, of course, some of the functional enhancements as well from those testimonials or others that you're aware of, what do you think we might be able to infer about overall health benefits to using the device?

Emile Maamary 3:52

I have to tread wisely here, because we haven't done a healthcare economic study, but what we've heard from individuals is that the device is helping them improve their efficacy at home. It's helping them reduce their costs of caregiving, and it's helping them feel more independent and more confident about the activities they're performing.

Mary Goldberg 4:18

So both physical health and mental health improvements certainly could, could infer there, yeah, that that's wonderful. And so to know this level of detail is is wonderful. I'm interested in whether you have a continuous feedback loop, and if so, how did you initially get that rolling? And how do you get individuals adhering to providing you that kind of feedback?

Emile Maamary 4:41

That's a great question. So I'm we have a group of beta testers that have been with us since version one. You know, some drop out, some some some join. But there's a core group that has been through every iteration. We met them through different channels. And you know, you. There we were presenting at an essential tremor Canada support group meeting, or we surveyed them through the International Essential Tremor Foundation, or they just stumbled upon us at a conference, or their caregiver stumbled upon our website. So really, it's been multiple different channels. We the way we keep them involved is, you know, whenever we have something new, they're the first to test it. We don't, obviously, don't charge them anything. And we, we have a different survey for each stage of the iterations. So we keep the surveys short, you know, three minutes to fill and we compile that data and build accordingly.

Mary Goldberg 5:48

That's awesome, I think great, and something for everyone to strive for, since we know that the customer discovery process is certainly ongoing, even once the device is in the hands of the user. So thanks for that info.

Emile Maamary 6:01

Absolutely, Mary. I'll just add one point. There's in our case, you know, and every different every different category has one. In our case, there's something called the quest survey. It's a quality of life in a central tremor survey that you can also perform that's really the standard. So we, we make sure to follow that and derive a lot of our questions in our surveys, from that standard.

Mary Goldberg 6:24

How did you go about scaling Steadiwear from the initial idea that it was to the company that you have now with this awesome, market ready product?

Emile Maamary 6:33

Wow, iterative developments of prototypes, clinical validation, securing funding from every single opportunity possible, whether it's a grant, whether it's a government program, whether it's a tax credit, of course, Angel, VC and other individuals who are, you know, particularly interested in tremors, have a family attachment to it, you know, building strategic partnerships with clinics, partner, physicians, distributors. That's really how we how we got to where we are today. I should note that we're now pivoting towards something called a B to B to C model, where health care providers will be the key distribution channel, along with medical device distributors, this will help patients, you know, try before they buy it. Will also help them try it in a safe space where they're comfortable with the white coat. And it will remove the taboo of the process of finding our website on a Google search and thinking, you know, Is this legitimate? And how come my physician hasn't heard about this before.

Mary Goldberg 7:47

What's the tipping point then to go from the B to C to B to B to C, I assume that you need to have confidence in the network that you've established and so on. But what was that initial go moment like to shift your model?

Emile Maamary 8:05

Yeah, you know, we definitely wouldn't have done this before we had the clinical data to support our claims. I would say that was a key point. So we ran a clinical study for Steadi One and Steadi 3. Steadi 2, we weren't as fortunate. We launched it amidst the peaks of COVID. And it was just, it was not easy to run a study at that time. We also, but we did what we did do for the city too, was we got a lot of users to try the device. They all paid for it, and we surveyed them, we published a white paper around that that helped us gain some credibility. And then with the Steadi 3 and you know, we ran a small study, a single blind, Sham, controlled study, where the data was provided as an abstract. The publication is not ready yet, but the abstract was then shopped to different

physicians. It intrigued them enough to want to demonstrate the technology, and that's when we decide, okay, you know, 1000s of users have tried this device. We have the clinical data to back this, and we have the funding to deploy, to deploy demo kits across multiple different sites. The key point is the funding. If you don have that, everything I mentioned before, that will go out the window. So that's, that's really where we decide, when we decided to say, Okay, we're going to take this to the next level. We're going to try to get as many demo sites as possible across the USA and Canada, where we primarily sell and, you know, get, get, get the feedback from the patients while they're at the doctor's office. You know, at the end of the day, one thing that we, we we take pride in, but is also a logistical nightmare, is we offer a 30 day money back guarantee to on all of our product so patients can try it from the comfort of their home if they don't have access to care. However, that also means that anybody who thinks that they have never been diagnosed, for example, have never been diagnosed and think the have essential tremor or parkinson's, they're trying our device, and they're being demotivated when it doesn't work for them, because they're not in the continuum of care. They don't know what their diagnosis is, and unfortunately, that causes a little bit of friction, because they then have to return the device and they label it as, you know, not credible. And so we want to remove that stigma. We want to remove that friction and make this as seamless as a process as possible.

Mary Goldberg 10:25

So a quick clarifying question for me, these demo sites, then, did they evolve from the provider, trial participants?

Emile Maamary 10:34

No, they didn't. Actually the trial participants were all here in Canada. We then compiled the data, made a nice presentation, and we're about to submit an abstract. But the presentation we used, we made it into a brochure, and then went to international movement disorder conferences and local movement disorder symposiums and said, This is what we have for now. Does this interest you? And sure enough, because of the gap in between in the continued care, between medication and surgery, most of the physicians were interested. And the reality is that most of the existing assisted devices out there can cannot classify as a demonstration friendly product, because they require customization, calibration, and most of them are labeled as as devices of that sort. So we we kept that in the back of our mind and said, This is how we're going to make the impact. This is how we're going to make a difference in this model. And we wanted to make something that was, you know, a one size fits all device. So now we only have two skews, left hand and right hand. And the device is like a strap. There's no more glove. So it allows for, you know, easier, easier use. And of course, it's much, much easier for the for patients to try it.

Mary Goldberg 12:02

As Michelle mentioned in the last episode, we love the follow up from our prior trainees. It's really fun, a good full circle moment. But we are also constantly learning and surveying the field, and the impact center in general is really interested in this kind of lessons learned piece and trying to dive a little bit more into some of the barriers and facilitators of tech transfer. And our colleague, Michelle Zorrilla has been leading that work and has some questions about that.

Michelle Zorrilla 12:33

Thanks, Mary. So seeing your journey since you did participate in the IMPACT Program has been amazing, and the growth and all the different iterations that you've gone through, there's obviously so many different steps, ideas, that you need to think about as you're developing things. But what key lessons have you learned on your journey, and was there anything that you wish that you would have known from the start that would have helped you avoid some of those challenges you've gone through?

Emile Maamary 13:03

I'll start by saying hardware is hard. Things that you know, you assume will take a couple of months, can take a lot longer. But what we've identified as some of the key points are early, user, feedback, stakeholder approach when building so the patient is important to to get feedback from, but really you want to identify every stakeholder involved, from the from the physician to the caregiver to the patient, and, of course, the payer, because you could get through the first three and then reach the point of a device that's not affordable, right? So you want to identify who the payer is going to be. You want to prioritize clinical validation. You want to secure IP. You want to develop a scalable business model that is eventually going to be profitable. So if I could summarize it, let's say embrace adaptability and persistence in the phases of challenges, that's what's been critical to study with success, I would say.

Michelle Zorrilla 14:06

And so obviously you've gone through other programs. You mentioned going through a different one early on, but what did you gain from your experience as an IMPACT trainee that has influenced your approach to innovation and entrepreneurship? Obviously, every program is different. So what was it from the IMPACT program that really stood out to you?

Emile Maamary 14:27

Well, I like I like that the the IMPACT Program, it really walked us through every different stage of iteration, as I mentioned before, you know, the user centered design component, the cross disciplinary collaboration, the importance of securing funding, the importance of foundation of the product, identifying how to approach the

market. You know how to align with the user's needs while maintaining industry standards, and how to identify a good partner to build a strategy with.

Michelle Zorrilla 14:59

So, what's next? There's obviously lots of room to grow. So what is next for Steadiwear? And there are there any upcoming projects or advancements that you're really excited about?

Emile Maamary 15:10

Well, you know, key milestone, full market launch of the Steadi 3, is next. That's the primary one. After that, we'll probably start the development cycle for we're hoping to also close off our current seed round, where there's 33% of it left. We're raising $1.2 million 400k left. We want to deliver to all the customers who are pre order. Market expansion, really, you know, diving into that B to B to C approach, deploying the demo kits, optimizing that process, trying to make it as seamless as possible for both the physician and the patient, really building a community around the physicians who we're going to be working with, and hopefully going after a Medicare reimbursement strategy that's still like two years out,

Michelle Zorrilla 15:57

That's a whole other ball game. All right, so you are in the assistive technology space. Obviously, you have a personal connection to it through your family members. How do you see that space evolving over the next five to 10 years? And what role do you hope study where will play in that?

Emile Maamary 16:18

Oh, wow. Well, Steadiwear aims to like lead in tremor and tremor management. So we we understand that, you know, down the line, there'll be a need to integrate some battery component help identify an AI component, integrate into digital health platforms. I think that's the way assistive technology is moving, and study where will not be far from that either. So really setting those benchmarks in tremor management while integrating into the existing quality of care will be the target,

Michelle Zorrilla 16:53

Of course, and is there any advice you'd give to other innovators or those just looking to develop assistive technologies and get into this space in order to navigate that tech transfer process?

Emile Maamary 17:05

Yeah, secure the IP early. Focus on the user's needs, but don't forget the other stakeholders. You need to really make sure that you have an MVP. Run with that MVP, there is a point where you're going to have to decide, should I keep iterating the prototypes or launch it to get real feedback, and it's there's no shame in launching something that's not perfect. The market will react to it. You'll gain a lot of feedback from it, and then you'll be able to iterate so collaborating with stakeholders to make sure that's possible, understanding the regulatory pathways and building a scalable model all factor into some of the advice I would give to help you navigate how to launch an assistive device or assistive technology in terms of tech transfers, I can't speak too much to it. We didn't we developed technology in house, and we are fortunate enough to be able to use our universities. I don't know if you if you know this, but we were also part of the IMPACT Centre at U of T that's what the program was called, too. It was just center with a re at the end instead of an ER. So we were fortunate enough to use some of their machinery, but they were also very kind enough to allow us to own the full patent. So we didn't really go through a tech transfer process. I'll leave that for one of the sessions that is part of the impact centers programming to elaborate on.

Michelle Zorrilla 18:35

Thanks so much. And then, how do you maintain motivation? Because I realize as you're going through the process, and it seems as though you like the idea of launching a likable product, and not necessarily the minimum viable product, right, something that's going to get you out there and get you moving, because you mentioned not necessarily having to have something that's perfect to get you into the market, since it will talk back to you. But when you face these challenges, what keeps you going and focus within industry, and how does that speak to you?

Emile Maamary 19:08

Well, you know, motivation. Motivation is very important. It gives you a strong sense of purpose, and that gives you a tangible, tangible impact, right? Embracing the challenges as opportunities, celebrating the process, you know, fostering teamwork and prioritizing self care is all really important in, you know, maintaining that, and these are all essential strategies to maintaining the focus too.

Michelle Zorrilla 19:32

And is there any final thoughts that you have or other advice that you give listeners about your journey and study where and the at field?

Emile Maamary 19:42

The field is ripe with opportunities for meaningful impact, collaboration, resilience are the keys to success. You know, try to find something that you're really passionate and is purposeful, and try to be driven by the desire to improve lives. You know, that's really what I just. Technology is all about. Innovation is all about we're excited to continue leading the charge and transformer management and empowering individuals globally. And we invite people to find what motivates them and to push that push, push in that direction. Of course, I'm happy to speak with anyone who is listening to this podcast, they can find me on LinkedIn as Emile Maamary, or type in Steadiwear with an i to find the company and connect with me. And I'm happy to chat.

Michelle Zorrilla 20:30

Thank you so much, Emile, and we'll make sure to have all those details in the Episode Notes as well. And it's been a pleasure. It's great to see you growing and I really wish Steadiwear all the best. That wraps up our two part conversation with Emile Maamary. From tackling development challenges to seeing the real world impact of the Steadi 3, Emile's journey exemplifies innovation and perseverence. We hope you found his story as inspiring as we have.

Mary Goldberg 21:01

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