



SnoreFree : Health App



Highly effective & scientifically proven therapy of sleep-related obstructive breathing disorders. Against rhonchopathie (snoring) & obstructive sleep apnea (OSA) due to oropharyngeal tissue weakness.



We are passionate and driven e-health enthusiasts

Co-Founder



CEO Sigismund Kremser

Entrepreneur 20 years of experience
Funding, branding, consulting.



COO Ayla Versnak

Procurist, independent therapist
Project management, PR, content



CMO Dario Lindes

Speech therapist, specialised in
Snoring & voice therapy

Team



Regulatory Astrid Schulze

QMS, ISMS, certification
Specialised in digital medical devices



Legal Mag. Edwin Stangl

Independent attorney
Brand, terms, contracts



CTO Simon Knebel

Lead developer & architect
UI/UX, www, art direction

Advisors & Investors



Medical Advisor Dr. Uso Walter

ENT, clinical investigator, experienced in
Clinical trials & DiGA applications



Data Prof. Dr. Norman Uhlmann

Strategist, Data protection,
Consultant for e-health solutions



M&S Dr. Holger Friedrich

MD, Marketing access & sales
Specialised in e-health

Snoring / OSAS, a widely spread disease

Snoring and obstructive sleep apnea are highly underestimated common diseases.

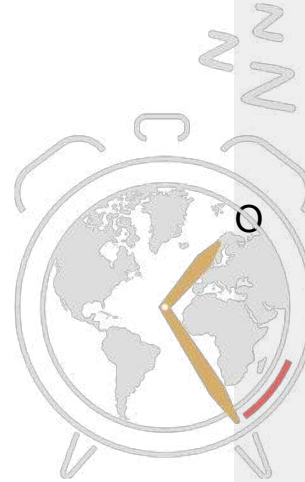
Interrupted breathing during sleep (OSA) is undiagnosed in over 80% of cases. (1)

Numerous awakening reactions disrupt the sleep rhythm, deep sleep and REM phases are rarely or never reached. (4)

The constriction and blockage of the upper airways reduces oxygen saturation in the blood. (4)

Partners of heavy snorers lose two hours of sleep per night = comorbidity. (2)

The average life expectancy of heavy snorers is statistically shortened by up to 10 years. (3)



GLOBALLY:

2 billion

Loud snorers

900 million

OSAS patients

500 million

partners of snorers, indirectly affected

2 hours daily

Sleep deprivation for those indirectly affected

Only in GERMANY:

5 million

Diagnosed OSAS patients + around 15 million patients not yet diagnosed.

- (1) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7230766/>
 (1) <https://pubmed.ncbi.nlm.nih.gov/19186102/#:~:text=Abstract,among%20surgical%20patients%20is%20unknown.>
 (1) [https://www.thelancet.com/journals/lanres/article/PIIS2213-2600\(19\)30198-5/fulltext](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(19)30198-5/fulltext)
 (1) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2276748/table/T1/>
 (1) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3630950/>
 (1) <https://www.nejm.org/doi/full/10.1056/NEJM199304293281704#?article>
 (2) <http://thesnoringcentre.co.uk/wp-content/uploads/2012/07/Why-women-lose-three-weeks-sleep-a-YEAR-to-hubbys-snoring.pdf>
 (3) <https://www.apotheken.de/news/12105-ist-schnarchen-harmlos>
 (3) <https://www.barmer.de/presse/presseinformationen/newsletter-gesundheit-im-blick/schnarchen-1070324>
 (4) <https://www.deutsche-apotheker-zeitung.de/daz-az/2008/daz-42-2008/nachts-durchatmen-morgens-erholt-aufwachen>

Often underestimated, but a serious health risks

The problem

Snoring and OSAS are a widespread disease. Studies show that even “normal” **snoring can lead to considerable long-term damage to health** and is often the precursor or predictor of OSAS. (1)

Short-term consequences

- Daytime tiredness
- Microsleep
- Lack of concentration
- Poor memory
- General loss of performance
- Lack of motivation
- Fatigue syndromes
- Weakening of the immune system
- Frequent sick leave

Long-term consequences

- Cardiovascular diseases
- Thickening of the carotid artery wall
- Cardiac arrhythmia
- High blood pressure, kidney damage
- Diabetes, obesity
- Depression, dementia
- Sexual listlessness, impotence
- Heart attack and stroke
- **Heavy snorers shorten their life expectancy by up to 10 years.** (2)

(1) <https://pubmed.ncbi.nlm.nih.gov/10464861/>

(1) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2442412/>

(1) <https://pubmed.ncbi.nlm.nih.gov/33868139/>

(1) <https://pubmed.ncbi.nlm.nih.gov/24179308/>

(1) <https://pubmed.ncbi.nlm.nih.gov/18163093/>

(1) <https://pubmed.ncbi.nlm.nih.gov/12860785/>

(1) <https://pubmed.ncbi.nlm.nih.gov/25946644/#:~:text=Conclusions%3A%20Self%2Dreported%20snoring%20is,and%20other%20diseases%20is%20warranted.>

(2) <https://www.apotheken.de/news/12105-ist-schnarchen-harmlos>

(2) <https://www.barmer.de/presse/presseinformationen/newsletter-gesundheit-im-blick/schnarchen-1070324>



The root cause, an organic pharyngeal insufficiency

The **root cause of snoring and OSAS** is almost always a **muscular tissue weakness** in the oropharyngeal space.

The **muscles relaxes** during sleep and **obstructs or blocks the airway** at three anatomical points in the pharynx. ⁽¹⁾



The **soft palate** slackens and vibrates in the airflow, swinging against the back wall of the throat.

The **base of the tongue**, when the tongue slides back into the throat and blocks the airway.

At the **larynx**, when the epiglottis lies over the aditus laryngis and thus blocks access to the trachea.

(1) <https://www.gesundheit.gv.at/krankheiten/hno/diagnose-therapie.html>

(1) <https://www.eurohno.de/diagnosen/rhinchopathie/-schnarchstoerung/-schnarchen#:~:text=Entstehung,sowie%20der%20Zungengrund%20und%20Kehledeckel>



Standard care and medical treatment methods



SURGERY

- **Irreversible**
- Invasive and painful
- Surgical risk
- Frequent side effects
- Questionable long-term effect
- Long sick leave
- Often follow-up operations necessary
- **High health insurance costs**



CPAP mask

- Only symptomatic therapy
- Uncomfortable and disruptive to sleep
- Lack of compliance / adherence
- Drying of the mucous membranes
- Pressure sores, skin irritation
- Conjunctival irritation
- Disrupts the partnership
- **High health insurance costs**

Anti-Snore Devices

- Protrusion splint
- Nasal dilator
- Back vest
- Supine alarm
- Chin strap
- Sleeping cap

Disadvantages

- Disruptive to sleep
- Uncomfortable
- Limited success
- Costs
- Low compliance

The SnoreFree method

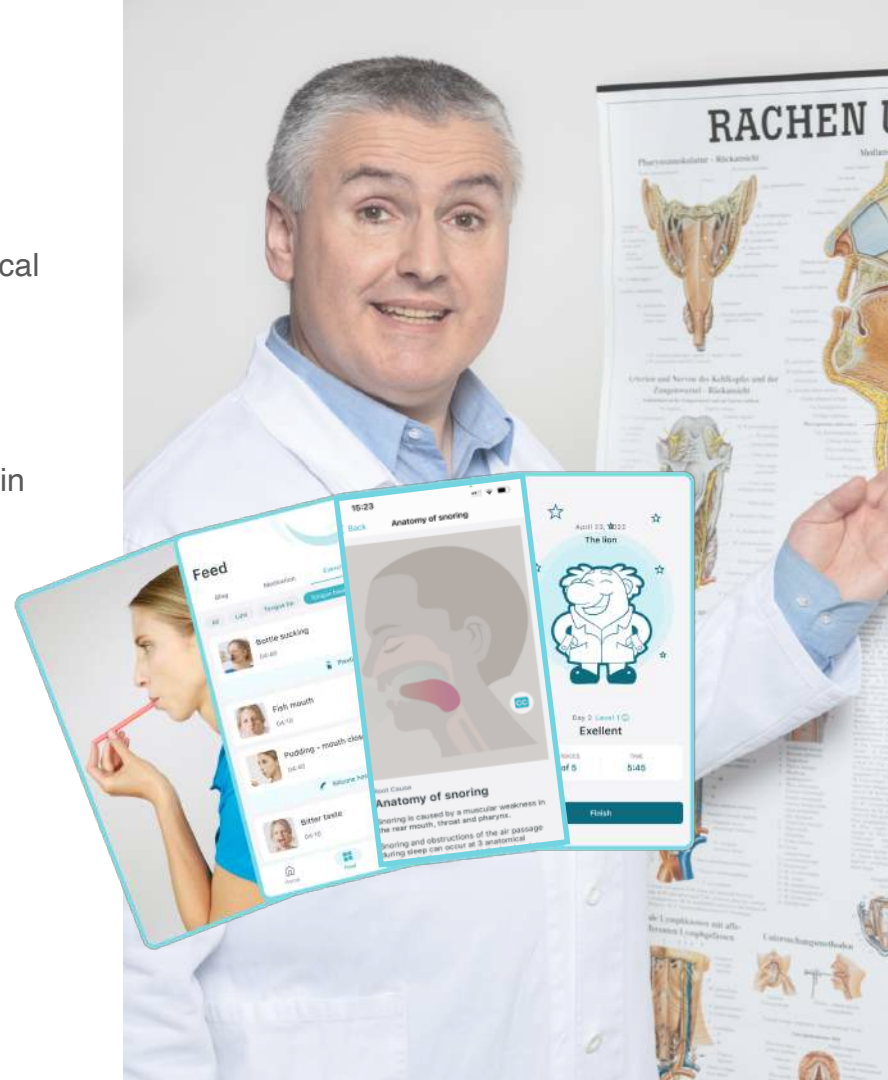
Dario Lindes, speech therapist, co-founder and our medical director, is a pioneer of myofunctional snoring therapy.

We have implemented this **innovative therapeutic approach** in the **SnoreFree** app, as a **class 1 medical device according to MDR**, and can help many patients in an accessible and low-threshold way.

After just a few weeks, **up to 80% of our users notice a significant improvement in their quality of sleep and life.**

SnoreFree for deep and restful sleep and more harmony in the bedroom.

Guidelines, specialist literature, scientific studies:
<https://schnarchfrei.de/quellen-medizinischer-inhalte/>



Myofunctional therapy for the oropharyngeal tract

SnoreFree is a digital speech therapy, a mouth and throat training program to strengthen the oropharyngeal structures and prevent sleep-dependent airway obstruction and breathing difficulties with the symptom of snoring (rhonchopathy) and the obstructive sleep apnea syndrome (OSAS).

Regular, continuous training can lead to a significant improvement in respiratory flow during sleep, sleep quality and, as a result, a reduction in daytime sleepiness, increased vigilance, improved alertness and cognitive and physical performance, as well as an increase in quality of life.

SnoreFree is classified as follows in the care path:

- Tertiary prevention to avoid worsening of the condition.
- As an additive to other therapeutic applications such as CPAP, protrusion splint, surgery
- As a stand-alone therapy or as an accompanying therapy with a speech therapist.

Eudamed identification number: **AT-MF-000037983**

Unique Device Identifier MDR: **UDI (01)04170000085836(8012)**



The SnoreFree app

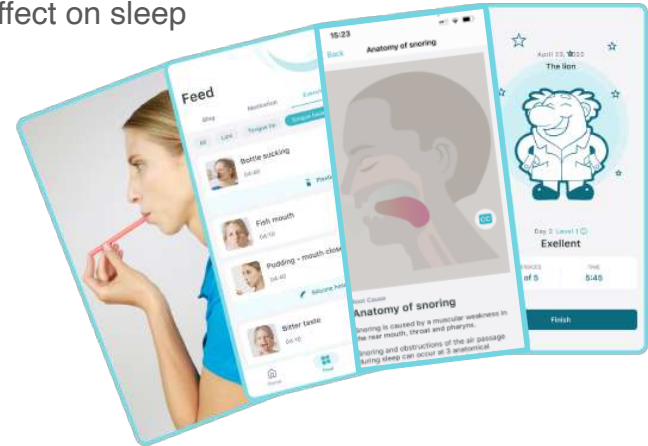
Therapy program: Myofunctional therapy with 48 validated speech therapy exercises in video format, creates a personalized daily training program for the user of approx. 15 minutes, consisting of four coordinated exercises.

Individual adaptation: The progressive 4-level program allows the user to increase the level of difficulty over the course of the training according to their personal training behavior.

Feedback: A sleep diary and a personal rating of the exercises by the user provide an ongoing insight into training behavior, therapy progress and the effect on sleep improvement.

In addition, the app contains information

- Anatomy and structure of the ENT tract
- Basic causes of snoring
- Physiology of sleep, sleep medicine
- Sleep hygiene, snoring avoidance and prevention
- General tips and tricks for healthy sleep
- Meditations and breathing exercises



The SnoreFree system

Consists of the **SnoreFree** Health App and the training utensils package, which contains tried and tested utensils from speech therapy that are required for approx. 1/3 of the exercises.



Advantages of the SnoreFree therapy

- Treats snoring fundamentally (causal approach)
- No risks and side effects
- No uncomfortable devices required during sleep
- Promotes patients' health literacy
- Easily available anywhere and at any time
- Personal guidance from professional speech therapists
- Individualized training plan in 4 levels
- Currently available in German and English.
- Significant cost savings for health insurance companies



The SnoreFree UtilityPack

To increase the compliance of the SnoreFree therapy, we have assembled the training utensils in a practical UtilityPack. The UtilityPack can be ordered at a reasonable price from our sales partner ATC Handels GmbH.

<https://therapiebedarf24.de>

SnoreFree as CPAP add-on

Increases the compliance for the CPAP mask.

Through oral training (speech therapy exercises), the pressure setting of the CPAP device can often be reduced due to the patient's improved breathing performance, which is a great relief for many CPAP users. This in turn increases compliance and tolerance of CPAP patients.

Sources

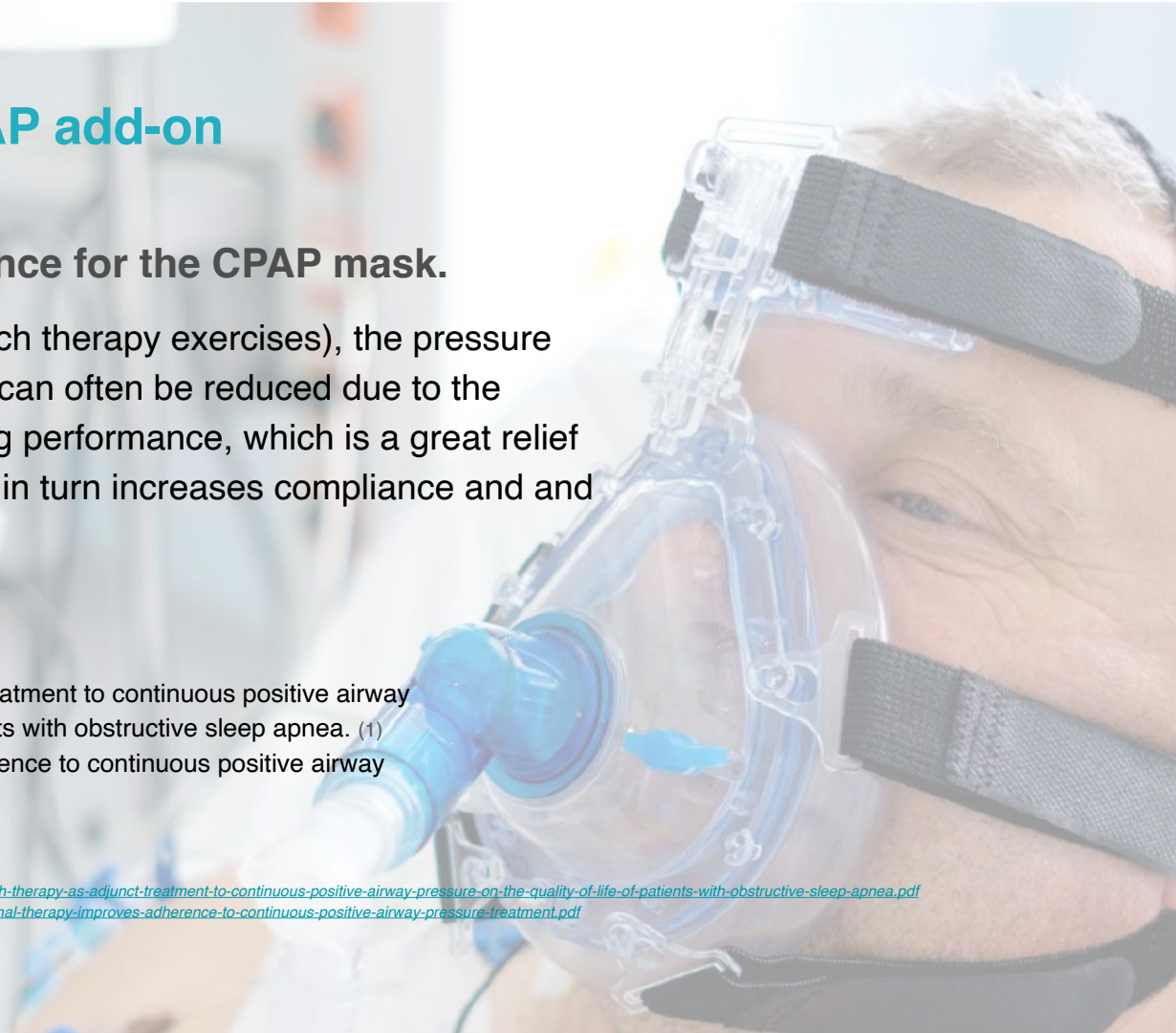
Effect of speech therapy as adjunct treatment to continuous positive airway pressure on the quality of life of patients with obstructive sleep apnea. (1)
Myofunctional therapy improves adherence to continuous positive airway pressure treatment. (2)

(1) <https://pubmed.ncbi.nlm.nih.gov/23702236/>

(1) <http://www.sleepclinic.be/wp-content/uploads/Effect-of-speech-therapy-as-adjunct-treatment-to-continuous-positive-airway-pressure-on-the-quality-of-life-of-patients-with-obstructive-sleep-apnea.pdf>

(2) <https://www.gtmf.eu/wp-content/uploads/2018/03/Myofunctional-therapy-improves-adherence-to-continuous-positive-airway-pressure-treatment.pdf>

(2) <https://pubmed.ncbi.nlm.nih.gov/27913971/>



SnoreFree as a game changer | possible patient path

- **ICD-10 R 06.5** Mouth breathing disorder including snoring (Rhonchopathie)
- **ICD-10-CM R 06.83** snoring (Rhonchopathie)
- **ICD-10 G 47.31** OSAS / Obstruktiv Sleep Apnea Syndrom
- **ICD-11 7A4Y** Other specified sleep-related breathing disorders
- **ICD-11 7A41** Obstructive sleep apnea syndrome
- **ICD-11 7A4Z** Sleep-related breathing disorders, unspecified

In order to avoid over- & under-therapy, but also for patients with no indication for CPAP therapy or with a CPAP intolerance (e.g. PALM (2) or Baveno (1)), more and more frequently methods such as weight reduction and respiratory muscle training are being recommended. The **SnoreFree** therapy as a mild and cost-effective treatment for disease-related or disease-causing OSAS, which many patients can use to treat themselves, regardless of time and location.

Prerequisite

- Recommended therapy duration of at least 3 months
- As regularly as possible, at least 4 times a week, approx. 15 minutes of training
- Smartphone or tablet and internet access

**Recommended first
treatment step**



SnoreFree

(1) <https://aasm.org/ahi-and-beyond-exploring-alternatives-to-diagnosing-osa-severity/>

(2) https://www.researchgate.net/figure/The-PALM-Pcrit-passive-critical-closing-pressure-arousal-threshold-loop-gain-and_fig1_320646657

Medical indication

By relieving airway obstructions during sleep, the **SnoreFree therapy** can lead to the following improvements:

- Increased vigilance
- Increased ability to concentrate
- Increased attention
- Increased physical and mental performance
- More vitality and energy in everyday life

Positive impact on supply

- Improving sleep quality
- Reducing daytime sleepiness
- Improving quality of life
- Enhancing patients' health literacy

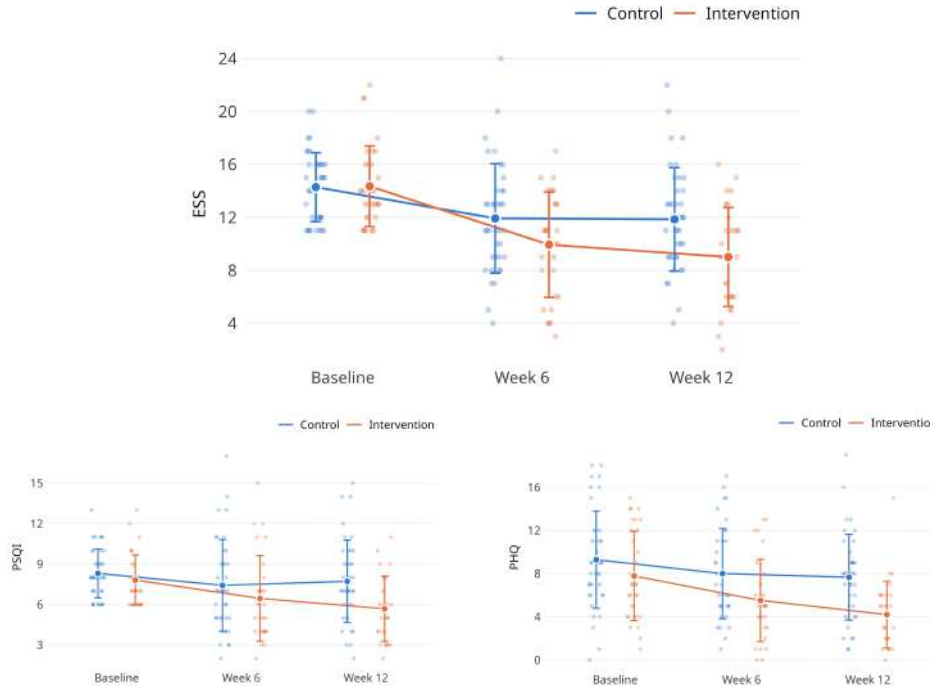


Clinical OSAS trial 2025 / 2026 - the interim results

With 172 diagnosed Obstructive Sleep Apnea Syndrom (OSAS) Patients

Questionnaires: Pittsburgh Sleep Quality Index | Epworth Sleepiness Scale | Patient Health Questionnaire

Duration: 3 months | Dropouts < 10%



Primary endpoint:
Epworth Sleepiness Scale (ESS)
values daytime sleepiness

The improvements / differences between the **CONTROL group** and **INTERVENTION group** are statistically significant.

Secondary endpoints:
Pittsburgh Sleep Quality Index (PSQI)
assesses the sleep quality

Patient Health Questionnaire (PHQ)
Sleep related depressions



SnoreFree : Therapy

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