



FIRST 1000 DAYS





FIRST 1000 DAYS

The 1,000 days between a woman's pregnancy and her child's 2nd birthday offer a unique window of opportunity to shape healthier and more prosperous futures.

The right nutrition during this 1,000 day window can have a profound impact on a child's ability to grow, learn, and rise out of poverty. It can also shape a society's long-term health, stability and prosperity.

Today, undernutrition is still a leading cause of death of young children throughout the world.



For infants and children under the age of two, the consequences of undernutrition are particularly severe, often irreversible, and reach far into the future.



By focusing on improving nutrition for mothers and children in the 1,000 day window, we can help ensure a child can live a healthy and productive life.

Investing in better nutrition in the 1,000 day window can also help families, communities and countries break the cycle of poverty.

The right nutrition during the 1,000 day window can

Reduce the risk for developing various non-communicable diseases such as diabetes, and other chronic conditions later in life Save more than one million lives each year Significantly reduce the human and economic burden of diseases such as tuberculosis, malaria and HIV/AIDS Improve an individual's educational achievement and earning potential Increase a country's GDP by at least 2-3 percent annually

Improving nutrition during the critical 1,000 day window is one of the best investments we can make to achieve lasting progress in global health and development

MEDISTAR IS...

The *only* cost-efficient comprehensive, nutritionally complete, patented meal program designed to be administered as part of a comprehensive healthcare program

Proven, measurable health benefits

Extensive studies allow Medistar to make affirmative medical claims: lowers blood pressure 6%, cholesterol 8%, and blood sugar 20%, all in less than 12 weeks

Backed by science

Largest and most comprehensive pharmaceutical-grade clinical trials of its kind Validated by ISCTR

Meets recommendations and guidelines from all major advocacy groups

First and only meal plan that meets 100% of the National Academy of Sciences' daily recommended intakes for 20 essential vitamins/minerals. Also meets American Heart Association, American diabetes Association, American Cancer Society, Adult Treatment Panel III, Academy of Nutrition & Dietetics, Dietary Guidelines 2010

\$150M spent on program development: 7 patents; 4 years of trials and 3 clinical studies with over 1,200 participants at 10 major institutions

Great tasting food that people love to eat!





Foundation for personalized healthcare system across multiple demographics

Halal

Personalized medicine and treatment of chronic conditions tailored to the individual

Expandable to additional segments

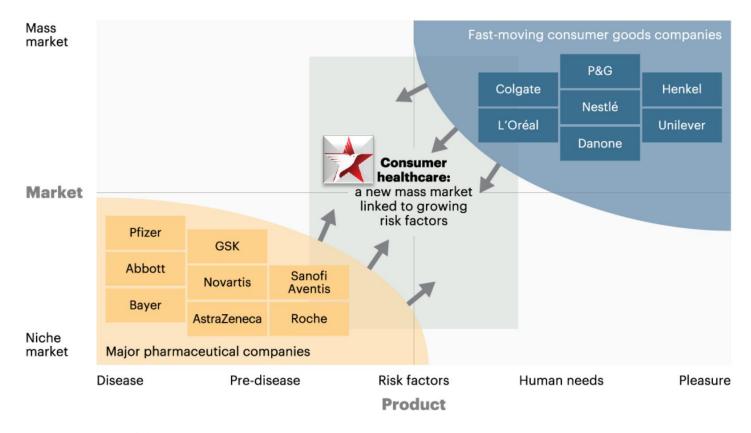
Ethnic Foods Preferences Additional Disease Categories

Experienced management team across food and health care industries



POSITIONED FOR GROWTH

The existing and growing mass market for consumer healthcare products is underserved and IQ is designed to fill that gap



Source: A.T. Kearney analysis



ACCELERATING CHALLENGE

Figure 1 Changing demographics create risk factors that accelerate the growth of chronic diseases



Sources: NHS, Age UK: Research into Ageing, Dementia Report 2010, WHO Diabetes and Obesity Atlas, IDF, Cancer Research, National Osteoporosis Society; A.T. Kearney analysis



METABOLIC SYNDROME: GLOBAL EPIDEMIC



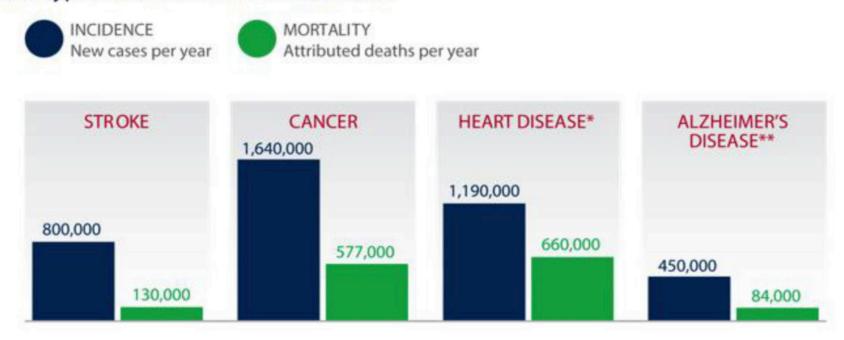
Source: Grundy SM, Brewer HB, et al. Definition Syndrome. Circulation, 2004

Metabolic Syndrome Leads to the Most Pervasive and Expensive Medical Conditions



METABOLIC SYNDROME EPIDEMIC

Incidence and mortality of the diseases associated with obesity and type 2 diabetes in the United States



Source: Statistical Abstract of the United States, 2009. U.S. Census Bureau; Heat Disease Facts. Center for Disease Control; 2013 Alzheimer's disease Facts and Figures, Alzheimer's Association; Heat Disease and Stroke Statistics 2013. American Heart Association

Four million newly-diagnosed cases per year in the U.S. 80% of this disease burden is preventable



METABOLIC DISEASE EPIDEMIC

Direct annual medical costs of the diseases associated with obesity and type 2 diabetes in the United States

		ALZHEIMER'S DISEASE \$109 BILLION	\$125 BILLION
	HEART DISEASE	TOP DILLION	5 5 5 5 5
	\$99 BILLION		S S S S S
		5 5 5 5 5	S S S S S
CTDOVE	the second s	5 5 5 5 5	S S S S S
STROKE	S S S S S	S S S S S	S S S S S
\$44 BILLION	5 5 5 5 5	5 5 5 5 5	5 5 5 5 5
	S S S S S	5 5 5 5 5	5 5 5 5 5
	5 5 5 5 5	5 5 5 5 5	5 5 5 5 5
5 5 5 5 5	S S S S S	S S S S S	S S S S S
5 5 5 5 5	S S S S S	5 5 5 5 5	S S S S S
5 5 5 5 5	S S S S S	5 5 5 5 5	S S S S S
5 5 5 5 5	5 5 5 5 5	5 5 5 5 5	5 5 5 5 5

Source: DiCarlo A. Human and economic burden of stroke. Age and Ageing, 2009, Heart Disease and Stroke Statistics 2013. American Heart Association; 2013 Alzheimer's Disease Facts and Figures. Alzheimer's Association; Mariotto A8, Yabroff KR, et al. Projections of the Cost of Cancer Care in the United States 2010-2020. Journal of the National Cancer Institute, 2011

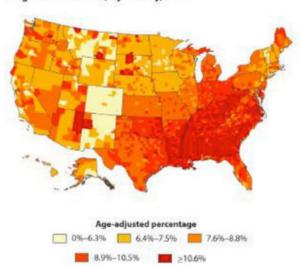
The direct medical costs associated with diabetes and obesity total over \$400 billion annually.

CANCED



FOCUS: DIABETES

Figure 3. Percentage of U.S. Adults Aged ≥20 Years with Diagnosed Diabetes, by County, 2008



Prevalence of Diagnosed Diabetes, 2007–2009					
U.S. Adults, by Age ^a					
20-44 years	2.6%				
45-64 years	11.7%				
≥65 years	18.9%				
U.S. Adults Aged >20 Years, by Race and Ethnicity ^{b,c}					
American Indian and Alaska Native	16.1%				
Asian American	8.4%				
Hispanic	11.8%				
Non-Hispanic black	12.6%				
Non-Hispanic white	7.1%				

* National Health Interview Survey.

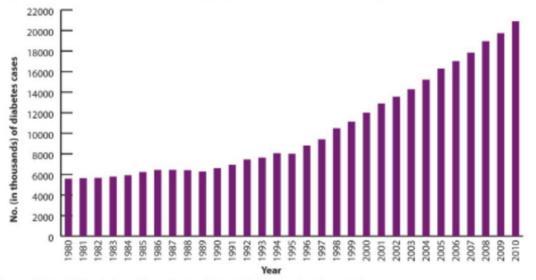
National Diabetes Fact Sheet, 2011.

^c Data were age adjusted. See Technical Notes for more details.

According to the Center for Disease Control 33% of the US Adult Population Over 22 million Adults Diagnoses Every Year Losing just 5-7% of body mass delays onset Annual Cost to the US Economy \$245 Billion \$176 Billion in Direct Medical Costs \$69 Billion in Lost Productivity

Food and Nutrition is a Leading Preventative Measure

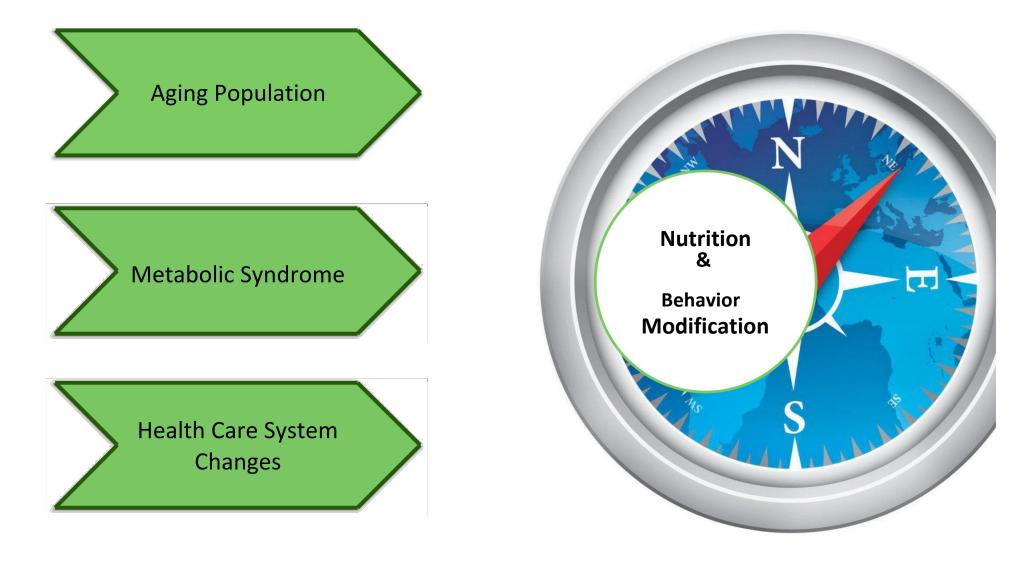
Figure 2. Annual Number of U.S. Adults Aged 18-79 Years with Diagnosed Diabetes, 1980-2010



Source National Diahotos Survoillance System National Health Interview Survey data



DRIVERS FOR THE NEW HEALTH CARE PARADIGM: NUTRITION & BEHAVIOR MODIFICATION

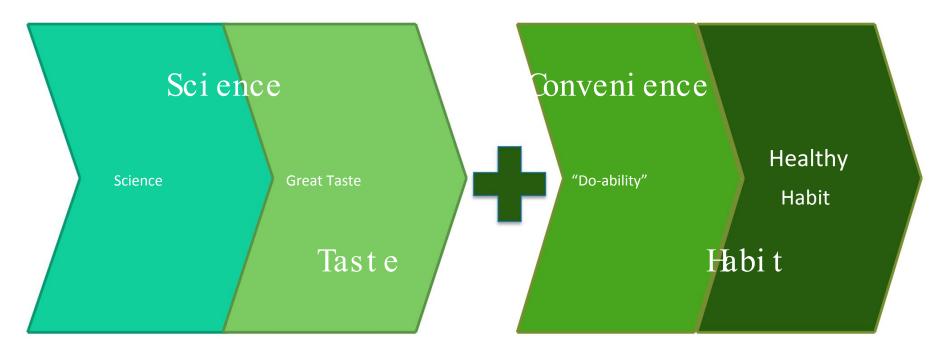




MEDISTAR: HEALTHCARE VALUE PROPOSITION

Nutrition

Behavior Modification



MEDISTAR: The only integrated solution for nutrition and behavior modification



"... there is no single pharmaceutical intervention capable of inducing similar, simultaneous improvements in these cardiovascular risk factors"

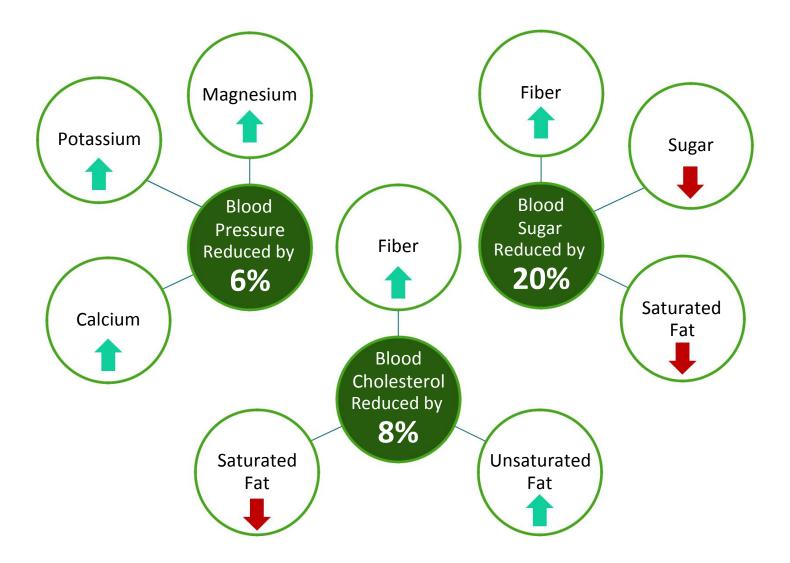
McCarron et al, Archives of Internal Medicine

In Just 12 Weeks...

73% of participants reduced blood cholesterol
75% of participants reduced blood pressure
62% of participants reduced blood sugar
80% of participants reduced excessive body weight

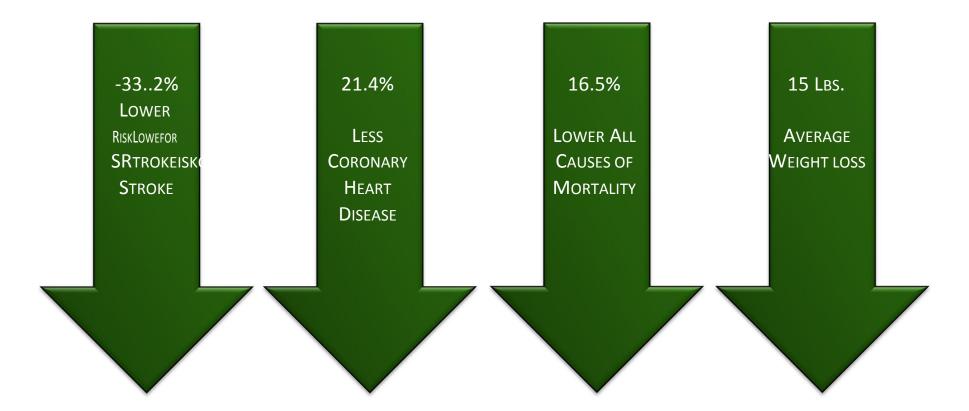


MEDISTAR YIELDS Proven Unparalleled Benefits



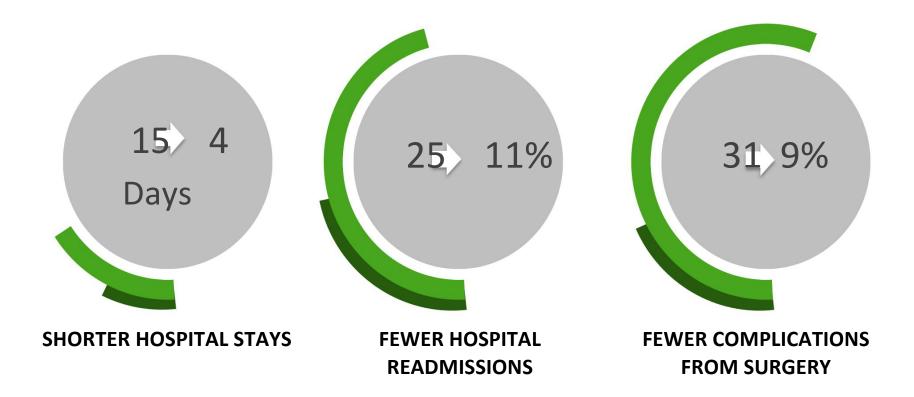


MEDISTAR'S CLINICAL EFFECT



The blood pressure improvements seen after 12 weeks lead to reductions in risk of stroke, clogged arteries, and mortality These effects are maintained for at least a year





Medistar corrects malnutrition leading to less time and money spent in the hospital and more time spent at home.







A COMPLETE NUTRITIONAL PROGRAM THAT MEETS RECOMMENDATIONS OF ALL 6 LEADING HEALTH ORGANIZATIONS

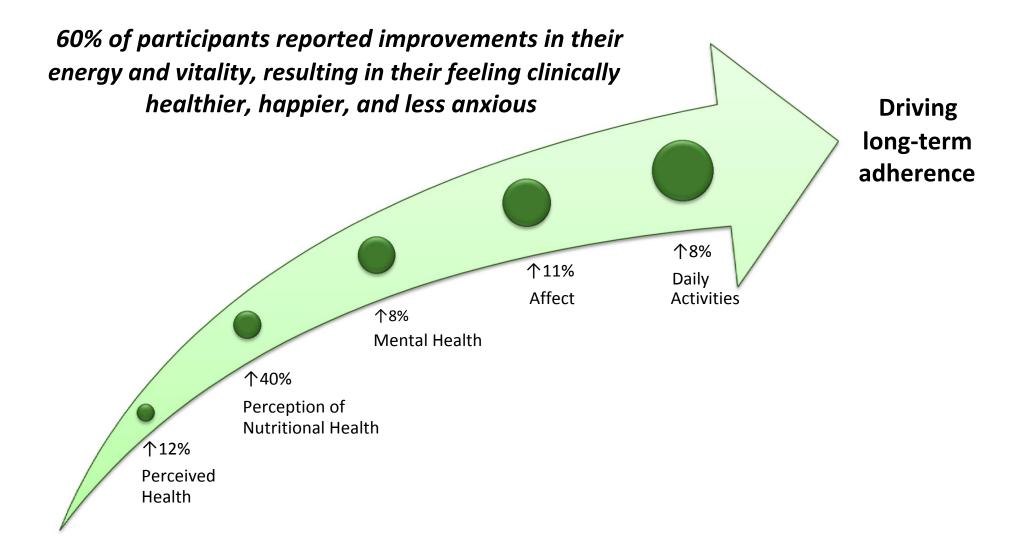
Advanced fortification technology enables Medistar to meet the nutritional recommendations of all 6 leading health organizations

	American Heart Association	American Cancer Society	American Diabetes Association	Adult Treatment Panel III Guidelines	Dietary Guidelines 2010	Academy Of Nutrition & Dietetics
Carbohydrates						
Fiber						
Protein						
Total fat						
Saturated fat						
Sodium	NEW REQUIREMENT					
Cholesterol						*

* NO SPECIFIC REQUIREMENT



BEYOND FOOD AND EFFICACY: BEHAVIOR CHANGE





MEDISTAR PROVIDES DELICIOUS AND FAMILIAR MEALS THAT ANYONE CAN ENJOY...



Great tasting food that people want to eat

Variety of foods – over 1000 items and growing



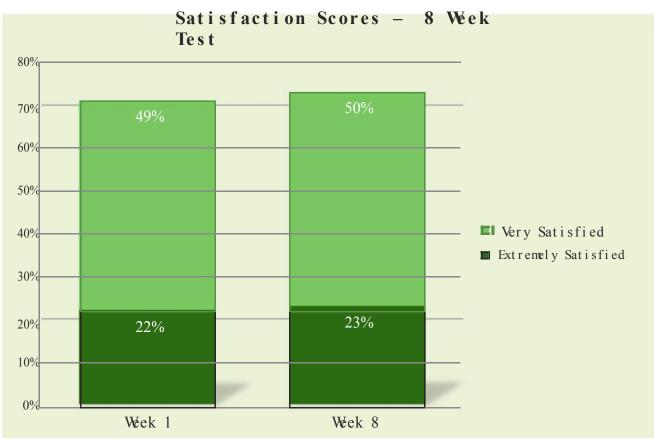
Completely reformulated organic recipes

Satiating – Larger portion size than typical frozen meals (15 oz vs. 10 -12 oz)

1. Product Satisfaction Survey, August 2009



AND THE FOOD TASTES GREAT!



Consumer Studies Campbell's Ohio Test

Over 70% of consumers were very or extremely satisfied with the meals



Tiller GROUP BRANDING EXPERTISE









and concepts





Regional produced products:

- Cereals
- Oils
- fresh vegetables
- high quality convenience food







and concepts



Organic food: More than 200 products of an entire organic product portfolio





and concepts



Frozen Food:

- vegetables

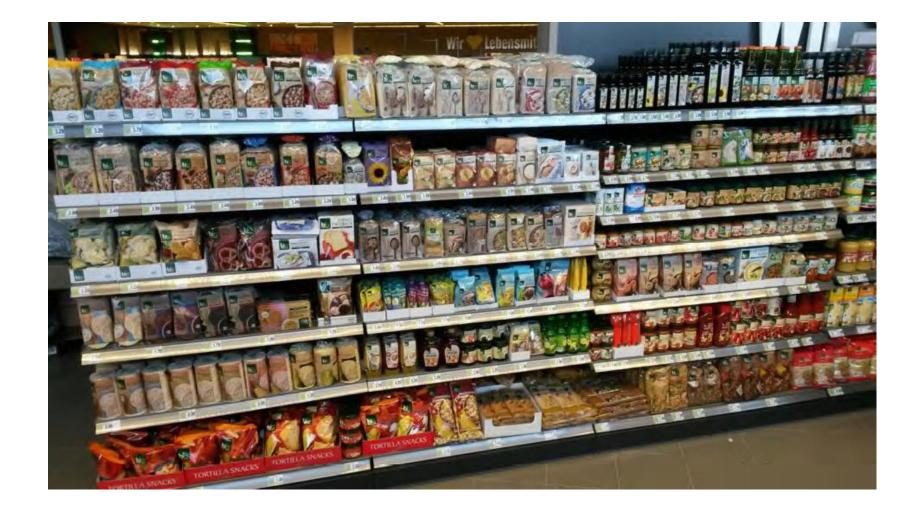
- convenience
- manufactured products





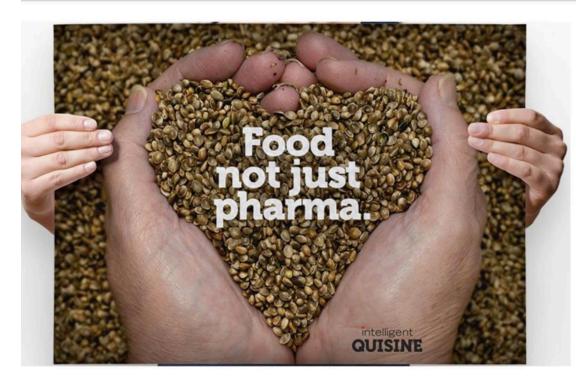








MEDISTAR BRAND DEVELOPMENT







rictly Confidential – Not for Distribution



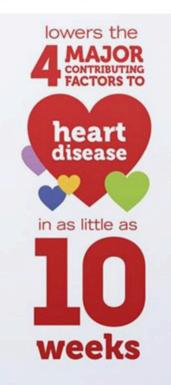
MEDISTAR BRAND DEVELOPMENT





sharing milestones motivates and rewards.











THE FUTURE OF NUTRITION BIG DATA AND THE INTERSECTION OF SCIENCES

Food

Analytics

Biology



MEDISTAR Experienced Management Team

Management Team

Chairman – Anthony N. Georgiou President – Dr. Nabil Dib Chief Executive Officer – William Brock Chief Operating Officer – Steven Traube Chief Financial Officer – Bernar Bekirov Chief Communications Officer – Curt W. Cronin Director of Nutrition - Dr. Michael Roussell Director of Strategy – John Joseph Director of Healthcare Liaison – Richard Sass VP of Consumer – Sheryl Wu VP of Innovation – Kathy Gibson Chief IP Counsel – Dr. Michele Wales, Esq.



MEDISTAR Experienced Advisory Team

Advisors

Dr. Chor San Khoo –Former VP of Global Nutrition & Health, Campbell's Soup Company Joe Palo – Former Head of Pharma Strategy at PWC, Board Member American Heart Association Peter Rogers – Former President of Nabisco North America

Ed Chadwick – CFO Henry Ford Health System

Howard Steinberg – Founder of DLife and former Kraft Marketing Executive

Medical Advisory Board

Dr. Nabil Dib – President, ISCTR
Dr. Tony Dimaria – Vice President, ISCTR
Professor Sir Magdi Yacoub – International Liason, ISCTR
Dr. Jennifer Hall – Scientific Advisory Board, ISCTR
Dr. Penny Kris Etherton - Professor of Nutrition, Penn State University
Dr. Gary Foster - Professor of Medicine and Public Health, Temple University
Dr. Judith Stern - Professor of Nutrition, UC Davis
Dr. Richard Kahn - Chief Scientific Officer, American Diabetes Association

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Thank You!

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