

Newsletter from Emotra AB (publ)  
Göteborg, October 27, 2015

## Brief situation report from Emotra

**At a large international summit in the USA, Lars-Håkan Thorell, EDOR's inventor, gave a presentation of the method and the research behind it, as well as about the ongoing European clinical multi-centre study. His presentation generated a lot of interest among leading suicide researchers. The European multi-centre study on the use of EDOR for assessing suicide risk, which Emotra is conducting in close collaboration with the European Psychiatric Association's Suicide Section, EPA-SS, is proceeding according to plan. More than 970 patients have now been tested using the method.**

This summit was held on October 11–14, 2015 at the Waldorf Astoria Hotel in New York City and gathered researchers from all over the world. It was arranged by The International Academy of Suicide Research (IASR) and The American Foundation for Suicide Prevention (AFSP). A total of 28 speeches, divided into three parallel themes, were given on the first day. Lars-Håkan Thorell's speech belonged to the first symposium, "Genes, Gene Expression, and Neurobiology of Suicidal Behavior" and the title of his speech was "Hippocampal CA3 Related Orienting Dysfunction in Depressed Suicide Victims?".

Dr. Thorell presented the basic scientific facts about electrodermal reactivity and how it is measured. He continued with the subject of electrodermal hyporeactivity, how it is defined, and Emotra's research on it. He also spoke of which factors and parts of the brain that probably lie behind the lack of electrodermal-specific orientational reactions that several research papers have found in up to 97% of depressed people who later committed suicide. Thorell continued by stating that 98% of patients who were not hyporeactive did not try to take their own lives.

He clarified that hyporeactivity does not predict suicide and that the prediction of suicide attempts is neither possible nor even desirable. Thorell emphasised that the use of EDOR has one single goal, which is to screen those patients who are at risk of committing suicide from those who aren't at risk, so that suicide-prevention efforts and resources can be focused on the correct patients. He gave a broad description of the theoretical model that he is developing based on both the empirical findings and with reference to other models of suicidal behaviour.

Under the banner of another theme, one speaker emphasised that we lack a model of the suicide itself. This is precisely what Emotra can provide, and what's more, Emotra has an objective,

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***Emotra AB (publ) is a medical technology company that carries out research, development, clinical studies and marketing in the area of suicide prevention. The Company's method, EDOR, is a proprietary, objective and quantitative diagnostic, psychophysiological test for detecting hyporeactivity in patients suffering from depression. During the test, the patient listens to a series of audio signals. The patient's response, in the form of very small changes in dermal electric conductivity, is measured and analysed. This extremely sensitive and specific test of suicidal risk has been developed as the result of research.***



scientifically validated, high-precision method for differentiating between depressed people with suicidal tendencies (prepared to die) and people who do not have such tendencies. Leading researchers in the field expressed great confidence in the clear results and the model which Lars-Håkan Thorell presented.

One of the USA's foremost researchers expressed his appreciation of both the scientific model and of the fact that Emotra has managed to launch such a large clinical multi-centre study as EUDOR-A, Emotra's ongoing European study. Others drew attention to the fact that Emotra's research field and method are completely unique and were very surprised that the research and clinical documentation had progressed so far. Valuable contact was established with top suicidologists. These researchers were very keen on keeping in touch and to be kept up to date on the study's progress.

The EDOR study, EUDOR-A, which is being conducted by Emotra in collaboration with the European Psychiatric Association's Suicide Section, EPA-SS, is progressing as planned. So far, test data for more than 970 patients have been submitted to Emotra for analysis. The participating clinics submit data regularly and they have experienced very little hassle and few problems with using the method. This aspect is important to emphasise, since it indicates that the method will function well in routine use in the future.

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