CORPORATE MAGAZINE FOR PARTNERS
Special edition

FROM IDEA TO REALITY

A PERSONAL STORY

“Diabetes isn’t an illness, it’s a way of life”

Ivan Saltanov, founder of MLC

A UNIQUE INTERVIEW

Professor Reshetilov: how it all began

MLC AROUND THE WORLD

Where we are needed

FROM SHENZHEN

Zhang Lixin
COO MLC Shenzhen
ex-CEO of OSMUNDA Medical
“Flystat, born in drawings, has become reality”

Wen Xinyu
CTO, MLC Shenzhen
17 years at Foxconn
Flystat’s toughest engineering challenge — and how it was solved



CGM Flystat — a continuous glucose monitoring system

flystat.com

EDITOR'S LETTER

Dear friends,

This magazine is about people. About those who believed in MLC when we had nothing but an idea. Four years have passed — and today you are holding the story of how that idea became reality.

For me, this magazine is a way to say thank you to everyone who has helped our product come to life. A project like this cannot be achieved alone, and today I can say with confidence: the team is the key to success.

At the heart of MLC is the personal story of Ivan Saltanov, the company's founder and my husband. Every day I see this journey from the inside, and I am deeply proud of his achievements and of our shared humanitarian mission.

In these pages you will meet the key people behind our project — scientists, engineers, the production team and national representatives in many countries. You will see the doubts and difficulties we faced along the way and how we found solutions.

Thank you to everyone who has been with us on this journey. The most important part lies ahead: the path to the people who need Flystat. Enjoy reading!

Elena Saltanova
Co-founder and CVO, MLC; Editor-in-Chief

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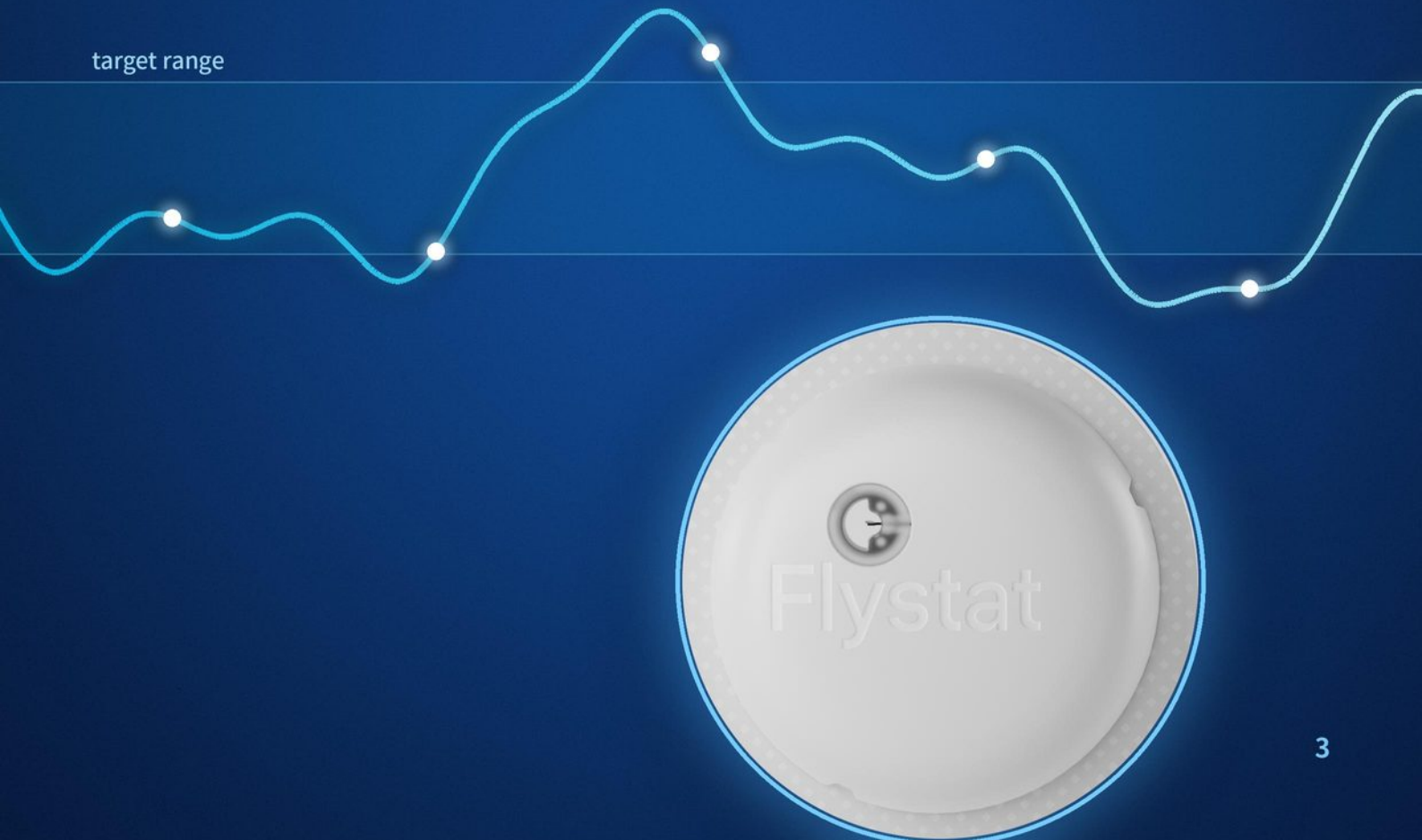
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01

WHAT IS DIABETES

What happens in the body
and why constant glucose monitoring matters



When the body can’t cope with glucose

Diabetes is a chronic condition in which the body cannot keep blood glucose at a normal level on its own. Hundreds of millions of people around the world live with it, and for each of them it is not a diagnosis on paper but daily work: 24 hours a day, with no days off.

How it works

Glucose is the body’s main “fuel”. We get it from food, and it enters the bloodstream. To move from the blood into the cells and give them energy, glucose needs insulin, a hormone produced by the pancreas. Insulin is like a key that opens the cell’s door to glucose.

In diabetes, this key doesn’t work: either there is no insulin at all, or the cells stop responding to it. Glucose stays in the blood, and its level gets out of control.

The main types of diabetes

Type 1 diabetes. The immune system mistakenly destroys the cells that produce insulin. It most often appears in childhood or young adulthood. The person needs insulin from outside every day, for life.

Type 2 diabetes. The most common type. Insulin is produced, but the cells respond to it less and less, and over time there may not be enough of it. It develops gradually and often goes unnoticed for a long time.

Gestational diabetes. Raised blood glucose that first appears during pregnancy. It needs special attention because it affects both the mother and the baby.

Everything affects glucose levels

The hardest thing about living with diabetes is that blood glucose never stands still. Literally everything affects it:

- **Food:** what, how much and when you ate;
- **Hormones:** including morning hormone surges;
- **Stress and emotions:** anxiety can raise glucose levels even without food;
- **Physical activity:** walking, sport, work;
- **Sleep, illness, fatigue.**

That is why a single morning measurement isn’t enough: blood glucose can change noticeably within an hour, and a person needs to know what is happening at all times.

What happens in the body

When blood glucose stays high for a long time, this is called hyperglycaemia. Excess glucose gradually damages small and large blood vessels and nerves throughout the body — quietly, often without obvious symptoms.

Complications of hyperglycaemia

- **Eyes.** The blood vessels of the retina are damaged (diabetic retinopathy), and vision deteriorates, potentially to blindness.
- **Kidneys.** Their filtering function is impaired (diabetic nephropathy), potentially leading to kidney failure, when a person needs dialysis.
- **Heart and blood vessels.** Blood vessels lose their elasticity, and the risk of heart attack and stroke rises sharply.
- **Nerves.** Diabetic neuropathy develops: numbness, tingling, burning and loss of sensation, most often in the feet.
- **Feet: diabetic foot.** The most serious consequence. A person doesn't feel small cuts and blisters, and because of poor blood supply, wounds barely heal. They turn into ulcers, become infected and, in advanced cases, the only option is amputation — of toes, the foot or the whole leg.

Every 20 seconds

somewhere in the world a person loses a leg to complications of diabetes. More than half of them die within five years of the amputation.

Source: IWGDF

According to research, up to 25% of people with diabetes develop a foot ulcer during their lifetime.

The good news is that many complications can be prevented or delayed **by keeping blood glucose under constant control.**

Hypoglycaemia — a danger in the moment

Glucose that is too low is no less dangerous. While hyperglycaemia damages the body over years, hypoglycaemia is dangerous here and now. It can develop within minutes — at night during sleep, after exercise or because of a miscalculated insulin dose. Weakness, trembling, sweating, a racing heart, confusion — and without quick help a person may lose consciousness and fall into a life-threatening hypoglycaemic coma. Night-time hypoglycaemia is especially frightening: during sleep the first warning signs can go unnoticed.

Life between finger pricks

To keep blood glucose under control, a person with diabetes has to prick a finger and take a reading with a glucose meter **20 times a day or more:** before meals, after meals, before bed, at night, when feeling unwell.

It is painful, inconvenient and exhausting. And even with so many readings, each one shows only a single point in time. What happens in between remains unknown.



The solution — continuous monitoring

Continuous glucose monitoring (CGM) systems change this picture. A sensor is inserted under the skin and automatically measures glucose every few minutes, day and night, sending the data to a smartphone.

Instead of separate numbers, the person sees the whole picture: where glucose is heading and how the body responds to food, stress and exercise. If the level goes outside safe limits, the system warns immediately.

It is more than convenience. It is freedom from constant finger pricks and peaceful sleep — for the person with diabetes and for their loved ones.

This is exactly the kind of system MLC is creating — CGM Flystat.

DIABETES IN NUMBERS

589 million

adults (aged 20–79) live with diabetes — almost one in nine

853 million

adults are expected to have diabetes by 2050

> 4 in 10

adults with diabetes don't know they have it — around 252 million people

3.4 million

deaths from diabetes in 2024 — one every 9 seconds

1.8 million

children and young people under 20 live with type 1 diabetes

20 seconds

every 20 seconds, somewhere in the world, a person loses a leg to complications of diabetes

Sources: IDF Diabetes Atlas, 11th edition, 2025 (diabetesatlas.org); International Working Group on the Diabetic Foot (iwgdfguidelines.org)

CGM Flystat — a continuous glucose monitoring system

02

THE STORY OF IVAN SALTANOV

Founder and CEO: a personal story and the path of MLC





A PERSONAL STORY

Ivan Saltanov

Founder and CEO, MLC

Ivan lives with diabetes himself. His personal experience — daily finger pricks, the search for test strips, constant monitoring — became the starting point for MLC and CGM Flystat.

> **“They say diabetes isn’t an illness — it’s a way of life**

When did you learn about your diagnosis? How did your life change?

“I became afraid that I wouldn’t be able to find a way to manage my diabetes. I had to measure my glucose with test strips, and I realised I wasn’t coping. On top of that, the healthcare system — I was born in Russia and was living there at the time — was so hard to access that I had no way of getting these strips free of charge through social insurance. In practice, I found shops or other people with diabetes who sold test strips on open marketplaces, which eased the strain on my budget — I mean, it reduced the cost. They received the strips for free and sold them at half price. And I would go and buy test strips from them. I was never even registered for social support for test strips, because it’s quite a complicated procedure. I had moved to Moscow from elsewhere, and they simply didn’t register me. I was given no insulin, no strips, nothing. So I had to study this market myself, study my illness myself and the ways of managing diabetes. Perhaps that is exactly what pushed me to look for more modern tools and a more modern approach — and today it has grown into our own project, a CGM system. I began to understand my body better, why I had mood swings. I began to understand that life is finite.”

What does an ordinary day look like for a person with diabetes? What made glucose control hardest or most frightening?

“An ordinary day for a person with diabetes and for a person without it are two completely different states. They say diabetes isn’t an illness — it’s a way of life. It affects everything. A person needs to control their glucose literally all the time: when they sleep, when they are awake, when they exercise, when they eat. And literally every day. Controlling glucose becomes a vital necessity, and it weighs heavily on the simplest, most basic things. You can’t just go somewhere without your device — on holiday, say, or on a hike. You can’t overeat your favourite food. You are always monitoring, always looking after your health. The only thing that outweighs this burden is that there is no other way. The other way is simply to die, to shorten your life, to literally leave this world. That is why diabetes is a way of life.”

When did you think, “This can be done better, and I want to do it”?

“I made the decision to create the project and began considering it when I realised that very few people were working in this field. Buying modern glucose monitoring systems — even modern test strips at a fair price — is quite difficult anywhere in the world. Perhaps because modern, developed healthcare is lacking — I don’t know, I probably can’t explain why this happens. But I made my decision

when I truly faced the problem — when literally every finger on my hands was so pricked that the fingertips had turned dark, because you have to prick them around 30 times a day, and there was literally no space left on my fingers. I was forced to look for other ways to measure my glucose."

Why did you decide to create your own system rather than use existing ones?

"Using any system is, of course, a matter of habit, and you have to get used to every new one. I decided to dedicate my life to creating our own system because, in essence, this is what I live with. It's easier for me to create it because I don't need to come up with some business idea: I am the user myself, and it's easier for me to get the message across. I decided that all the knowledge I had gained as a user, as a person living with diabetes, could be put to good use, and that we would create better products than companies that do this on a purely commercial basis."

How did the team come together? How did you find your co-founders and scientists?

"First of all, the core of our team are people who are friends and colleagues from previous projects and previous jobs, who had shown themselves at their best. Together we first formed the core group of founders, and then each of us took on our own area. The teams that were later built department by department were entrusted to the co-founders."

What did you know about medical devices at the start, and what did you have to learn from scratch?

"At the start we knew practically nothing about medical devices — literally nothing. We didn't even understand how they work or on what principles. This is truly our own project, not some reverse engineering based on existing models. We decided to take this path on our own, from the very beginning, because there are no open sources on how this works or how to create it. And there still aren't any anywhere in the world. That is exactly what makes our company one of the unique projects, because everything related to biosensing is pure, high-precision science. Then we began bringing in all kinds of scientists: we simply used Google to search the internet for scientific papers on biosensing and glucose measurement and looked for the names — who is behind this work? We put together a whole list of scientists working in this field and started meeting each of them, if they were available. Some turned us down; some met with us but confirmed that they work in other areas of glucose measurement — for example, measuring glucose by spectroscopy. These are promising, innovative directions, but unfortunately they may only appear in 10–20 years. It was in biosensor technology — on which the most widespread and popular CGM systems are built today — that we found literally a few scientists who became the foundation of our technology base and effectively helped us create the product. These scientists are still our consultants and part of our project — Professor Reshetilov, for example."

What was the hardest decision of these 4 years?

"The hardest decision was to continue the project when we realised that this startup required enormous financial



The founding team of MLC: Sergey Melenkov, Elena Saltanova, Ivan Saltanov, Marina Tmenova, Maxim Kolomiets

investment. Because a CGM project isn't something you can build for 1 or 2 million dollars, like an ordinary startup in other fields. When we found out that applying these technologies requires at least several tens of millions of dollars, it became a significant obstacle for us. That is where the difficult decision was made. We decided to raise funds and to involve the public in raising them, and that became the foundation of our project. In the early stages we effectively turned the idea into a business thanks to private investment. And now we are moving on to major investment at a mature stage."

Was there ever a moment when you wanted to give it all up? What helped you carry on?

"Thanks to the support of our team, and because my wife is part of our team, such moments get smoothed out, as they say, naturally — through dialogue. Of course, wanting to give it all up is completely natural, especially when you're tired. But teamwork and the ability of colleagues and family to support you at a difficult moment create an atmosphere in which, once the tiredness passes, you want to reach new heights and achieve new results — for the project and for my family."

What are you most proud of?

"As far as the project is concerned, I'm proud that we have built a company that even entire innovation sectors of entire countries have not built. In the future, every country will certainly have a company that produces and sells continuous glucose monitoring systems. This should exist in every country, because it is companies like these that show how a state cares for its society. But I'm proud that we are at the forefront of this movement. And I'm proud that our company has become one of the first — and unique, even compared with the conditions and support available in other countries. Many countries don't have this. But we do, and we can share this knowledge, sell and distribute our products. I'm proud of that."

What does Flystat change for a person with diabetes? What did you, as a patient, want from such a device?

"Continuous glucose monitoring systems don't vary that much. In practice, one manufacturer's system is very similar to another's. What sets them apart is accuracy, ease of use and, of course, price. Our device is convenient, accurate and affordable. So for each user, Flystat changes behaviour and lifestyle, giving them the chance to live their life as planned, free from the impact of the illness, early ageing and the factors that reduce quality of life. A better quality of life leads to a different way of life, to growing families, to having children — and in effect it changes the life not just of one person, but of a whole family line, a whole generation in different countries. That is why Flystat is a person's hope, in difficult circumstances, of shaping their own life and continuing their family line. As a patient, I would want accuracy from such a device. A CGM system isn't just a gadget that you can use or not use, like a mobile phone. It is a device that becomes a life companion for people who, by the will of fate, have diabetes and impaired glucose levels. I would like the device to be my companion, to help me keep living a good life and at the same time to be like a true friend: accessible, always there and accurate. That is why a CGM system is a person's companion. I would like to have a system that is a friend. And that is exactly what we are creating."



Ivan and Elena Saltanov

> **"Because my wife is part of our team, such moments get smoothed out"**

How do you see MLC a few years after its market launch?

"Ahead of us lie, of course, great achievements and great obstacles. Any product entering the medical device market, even with the most promising characteristics, has to get to know its customer. Every customer has to get to

know our product. This process of getting acquainted is quite complex, but it inevitably brings followers: the experience of successful use passes from person to person as a recommendation. That is why in the first few years it is very important to create this buzz, as they say — information about the real experience of real people using the device. Over the next 3 years we expect to work on expanding production through organic demand. In fact, for our project to exist, a very small number of people using our system on a regular basis is enough. And once we have established ourselves and reached maximum production volumes, we will think about further expansion and keep moving forward. So the next three years will be the years in which the company and a finished, high-quality product take shape, based on users' experience."

What would you say to the partners who have been with the project from the very beginning?

"Of course, I would like to express my deep gratitude to them for believing, first and foremost, in people. The first investors believed not even in the quality of the product or a future solution — they believed in people. I want to express my deep gratitude that our friends, colleagues and partners who were with us in the early stages of the project saw in us people capable of seeing things through. That is a very important factor. I consider them friends, colleagues, partners and truly people with great opportunities ahead."



CGM Flystat: applicator and sensor



Ivan Saltanov, founder and CEO of MLC

> **“A CGM system is a life companion. I would like to have a system that is a friend”**
>
> Ivan Saltanov

03

FIRST STEPS

How it all began and what we didn’t yet know



How it all began

It all began in 2022 with the idea of creating our own continuous glucose monitoring system. From that idea to the production sample, CGM Flystat went through five stages: the first concept, an early prototype, a new form factor, final refinement and, finally, the production sample.

The first working prototype was an electrode connected to laboratory equipment for in vitro testing. After that, every part of the future device — the sensor, the circuit board, the software, the phone connection, the app, the applicator, the needle and the patch — was created and tested many times separately, in its own prototypes.

Only when every unit had been tested did the team bring them together. This is how the first physical prototypes of CGM Flystat were born.

TEAM VOICES



Maxim Kolomiets

Co-founder and Chief Financial Officer (CFO), MLC

Certified securities market specialist with a degree in finance and credit. Since 2008 he has managed the finances of institutional and private investors, and since 2010 he has founded and led IT startups. At MLC he is responsible for financial management and business analysis and oversees partnerships in Asia and Latin America.

At what point did you, as a financier, realise that this project would succeed?

“I knew it at the idea stage, when it was just being born. Back then far from everything was working out, but I had no doubts. It was at that very moment that I became absolutely certain: this would work out one hundred per cent, whatever the difficulties. That certainty has stayed with me all these years.”

> **“ Even at the idea stage I had no doubts: this would work out one hundred per cent, whatever the difficulties**

4 YEARS

from idea to production sample

How the CGM Flystat applicator and sensor evolved



1 **Idea** — first concept

2 **Prototype** — early design

3 **Iteration** — new form factor

4 **Refinement** — final form

5 **Sample** — production sample

Now

Undergoing European CE certification · Market launch planned for 2027

TEAM VOICES



Valentin Vlasov, PhD

CGM sensor development, MLC

PhD and Master's in materials science, Bachelor's in electrochemical technologies. Joined MLC with commercial experience in developing polymer membrane coatings for CGM sensors. At MLC he designed the sensor and took part in building the first physical prototypes of Flystat — from the composition of the enzyme layer and membrane to the needle, applicator and signal processing.

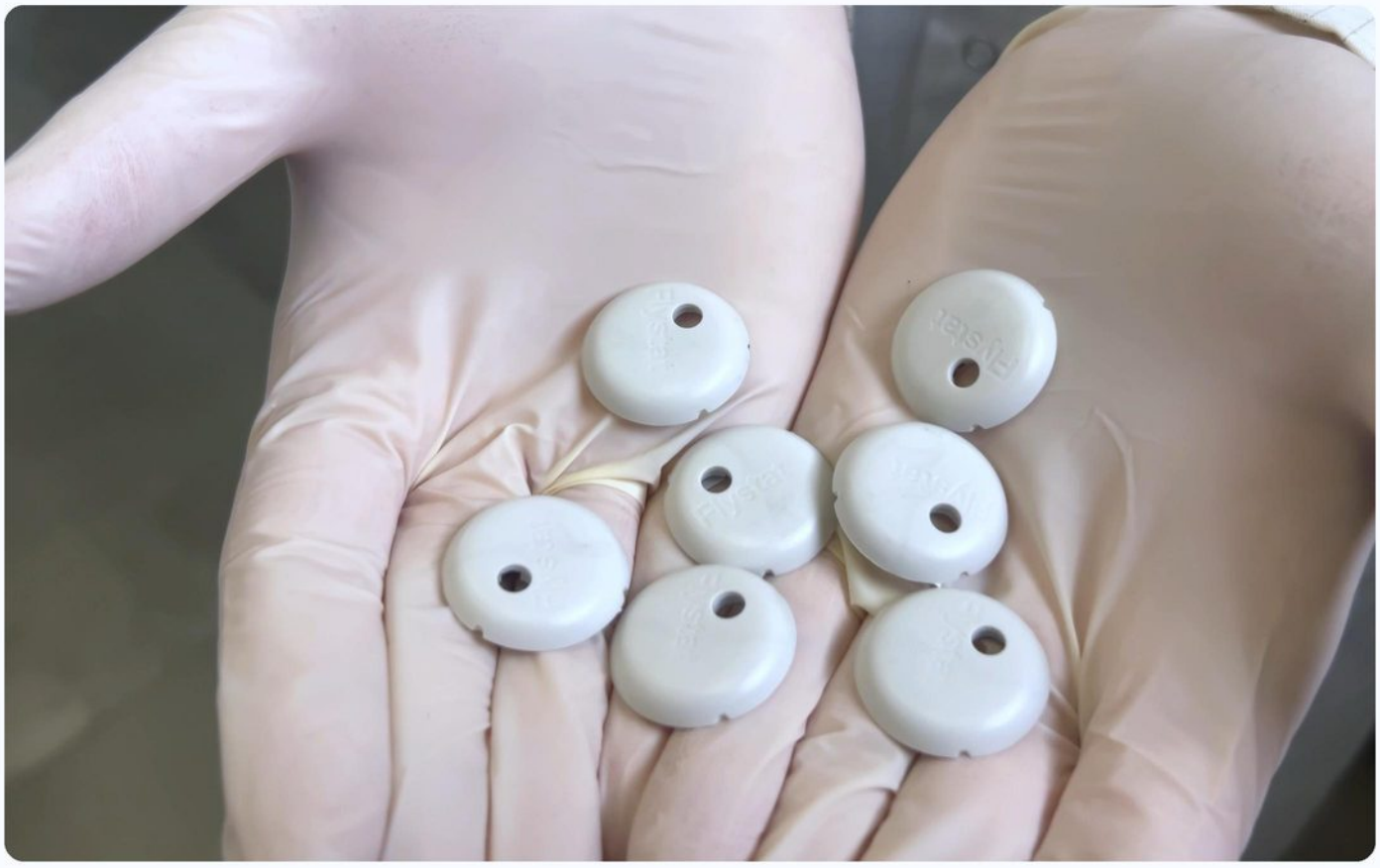
You designed the Flystat sensor and assembled the first prototypes. What was it like when a prototype worked for the first time?

"Creating a prototype is quite a broad question. If you think back to how smart glasses were developed, their first prototype was made of cardboard and already demonstrated the working principle. That prototype showed the idea was viable, but it was still very far from an industrial product. Formally, you could say that the first working prototype of our device was an electrode connected to in vitro test equipment. Our first industrial CGM sample, which I was the first to wear myself, came together when I stayed late at work one evening. It was certainly a happy moment when everything performed well at the same time: the sensor, the circuit design of the board, the board's software, the phone connection module, the phone app, the applicator activation mechanism, the needle release mechanism, the sensor staying on the skin, the sensor being inserted under the skin. Then I was able to go to the pool with this sensor and confirm that our assembly was watertight and the patch held the sensor in place even while swimming. At the time, this stage felt fairly routine — if anything, it was a relief that nothing major had to be redone or reworked. I was glad I could finally go home in peace. In fact, it was an expected and logical result, because each of these units had already been tested separately many times in other prototypes, each testing one of the aspects I've mentioned — as well as many more that I haven't."

> **"I was able to go to the pool with this sensor and confirm that our assembly was watertight and the patch held the sensor in place even while swimming**



CGM Flystat sensor in the laboratory



CGM Flystat sensors

04

CHALLENGES AND SOLUTIONS

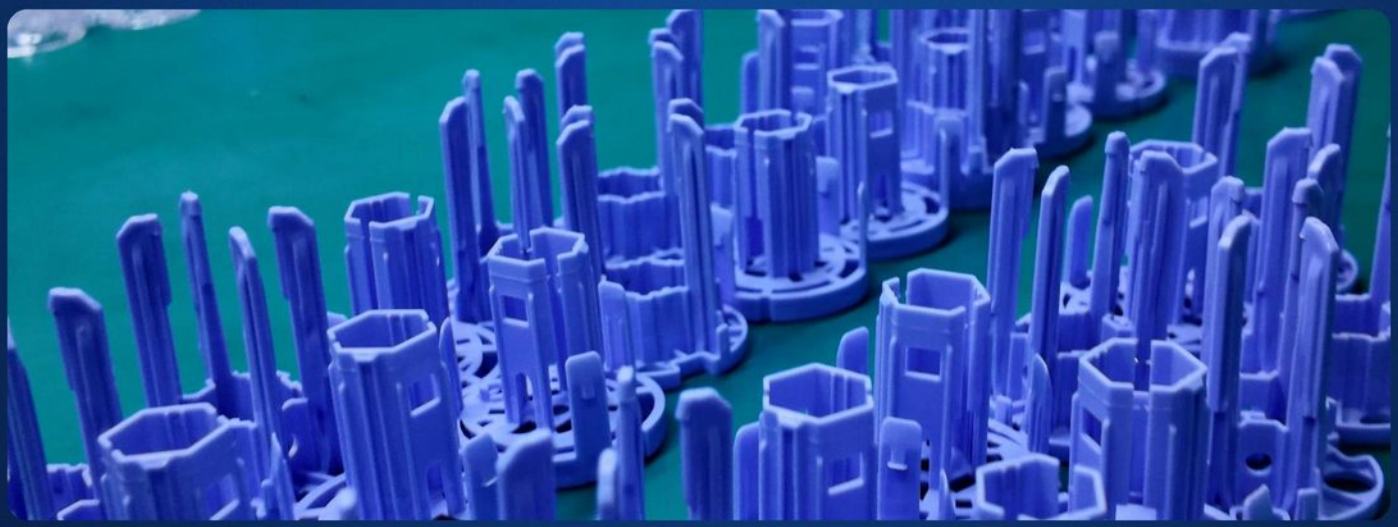
What we faced and how we found solutions

A path through tough challenges

Creating a medical device that a person wears around the clock means solving a multitude of engineering challenges. The sensor must measure glucose accurately, the housing must stay watertight, the patch must hold firmly on the skin even in water, and the electronics must withstand production without losing charge.

One of the toughest challenges was sealing the sensor's circuit board: it had to be reliably encapsulated in the housing without being damaged by the heat and pressure of moulding. The team tested the device's water resistance and adhesion in real conditions, including in a swimming pool.

Many components had to be refined again and again. Every challenge was solved thanks to the experience of the team, partners and contractors.



CGM Flystat components in production

TEAM VOICES



Wen Xinyu

Chief Technology Officer, MLC Shenzhen

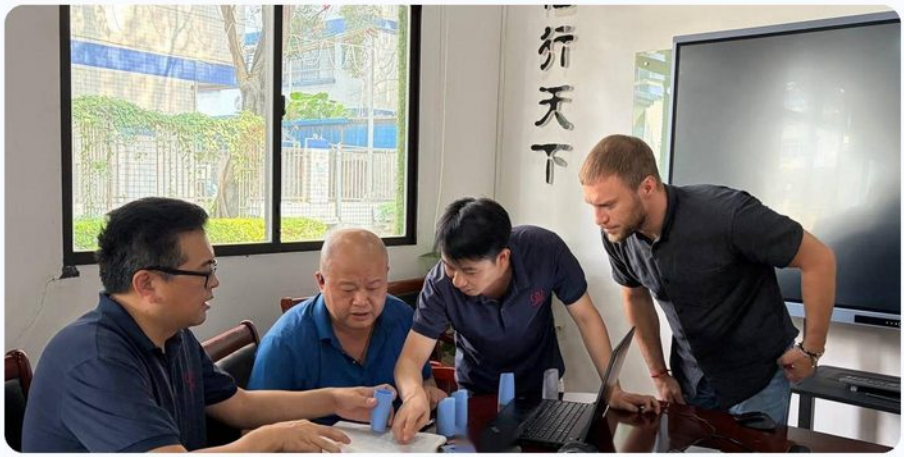
Engineer with more than 20 years of development experience. Spent 17 years as an engineering supervisor at Foxconn, then led the development of medical devices — from oxygen concentrators to CGM systems and insulin pens. At MLC he is responsible for the Flystat technical roadmap, the transition from development to production and the engineering documentation for CE certification.

You are leading Flystat's transition from development to production. What was the toughest engineering challenge along the way, and how did you solve it?

"The toughest engineering challenge I have faced was injection moulding and encapsulating the key, high-cost components of the printed circuit board assembly (PCBA). Standard moulding temperatures and pressures, as well as the thermal conductivity of the mould, cause irreversible, destructive damage to the board.

My solution was to select medical-grade, fast-curing, heat-dissipating materials for low-temperature, low-pressure moulding and to have a special, finely adjustable moulding machine custom-built. Moulding was split into two stages, and mould-flow analysis was used for evaluation. The mould surface is thermally insulated, the pins are made of ceramic, and magnets built into the mould keep the board from operating at high temperature and draining its power. We solved the problem by evaluating it from every angle."

> **"We solved the problem by evaluating it from every angle**



Wen Xinyu with the MLC team at a working meeting

Note. PCBA — the printed circuit board with electronic components, the "brain" of the sensor. It had to be reliably sealed in the housing without being damaged by heat and pressure.

05

TEAM AND SCIENTISTS

Scientists, engineers, software developers and contractors in many countries work on Flystat



Scientists and developers

The science behind the Flystat sensor



Anna Prostyakova, PhD

Head of Laboratory, MLC

PhD in chemistry (biotechnology). More than 20 years of research in bio-organic chemistry and polymers for biomedical use. More than 15 years in the development and production of medical devices and IVD tests: she has led a research centre and R&D projects and set up production of an IVD test after its registration. Independent expert on research projects in medical technology.

As a scientist, what does it mean to you that something developed in the lab will become a device people wear every day?

“When you realise that your work will ultimately become part of a device that someone will wear every day, it gives you a special motivation, a special challenge, and a special meaning to every calculation and experiment. In a project like this, science stops being abstract: the model you calculated and the material you selected now directly help people manage their condition. This transition isn’t just a product launch — it’s the moment when science truly serves people, every day, with no compromise on safety or accuracy.”

> “ **Science truly serves people — every day, with no compromise on safety or accuracy**

R&D team



Daria Dudorova
Research Scientist



Viktor Arkhipov
Research Scientist



Saveliy Melnikov
Research Scientist



Anastasia Tsyklinskaya
Research Scientist

Scientific foundation

The scientists whose research underpins the Flystat sensor



Anatoly Reshetilov

Professor, Doctor of Chemical Sciences · expert consultant to MLC

A scientist with 40 years of experience in biosensors — the technology on which CGM Flystat is based. Author of more than 150 scientific papers and 16 patents, and leader of more than 15 research projects.

At MLC he is an expert consultant on the electrochemical interaction of biosensor components, a key area for CGM Flystat. Member of the editorial boards of scientific journals and reviewer for an international biosensors journal.

INTERNATIONAL RECOGNITION

Co-editor of the monograph “Macro, Micro, and Nano-Biosensors” (Springer, 2021)

A UNIQUE INTERVIEW

We are publishing the very first interview between Ivan Saltanov and Professor Reshetilov. It was recorded in 2023, when MLC was just starting to develop the sensor, and it shows where our journey began.

What is a biosensor?

“Imagine a thermometer hanging outside a window and measuring the temperature. A biosensor is the same kind of measuring device, only it is based on biological materials: enzymes, microbial cells. It measures the changes that occur when these materials interact with a particular substance.”

> **“In a certain sense, the human being is a perfect, universal biosensor**

MLC's challenge through a scientist's eyes

Continuation of the interview with Professor Anatoly Reshetilov

FROM THE INTERVIEW

Is it difficult to measure glucose?

"If the properties of the enzyme are well known, creating a measuring system is fairly simple. The enzyme glucose oxidase converts glucose into gluconic acid and hydrogen peroxide, and the peroxide is easy to detect electrochemically: two electrodes, a set voltage — and we record an electric current."

> The measuring principle is simple and well studied. But turning it into a reliable sensor that a person wears on their body is a completely different challenge. Here is how the professor assessed it at the very start of our journey.

How do you assess our goal of creating a biosensor?

"I think it is a very interesting and worthwhile challenge. It involves solving a number of scientific and technical questions, and it could lead to very positive results. For example, it's important to determine the composition and combination of components: to choose a carrier polymer and create a complex biochemical matrix in which the enzyme glucose oxidase does not lose its activity. In addition, the electrodes have to be made, the enzyme applied to them together with the carrier material, and the thin enzyme film must form a single, integral structure. All these features make the challenge quite interesting."



Ivan Saltanov and Professor Reshetilov recording the interview, 2023

> **It is a very interesting and worthwhile challenge, and it could lead to very positive results**
>
> Professor Anatoly Reshetilov


Flystat

06

RESULTS

Production, product, team



Our cleanroom

Equipment commissioning

This is MLC's own production facility. Equipment commissioning is currently under way in our cleanroom: automated lines bearing the MLC logo have been installed here, and workstations for specialists have been set up.



Specialists at work with the equipment in the MLC cleanroom



MLC production line



Work area in the cleanroom



A specialist's workstation



Working in a protective suit: cleanliness comes first

Our contractors

Producing CGM Flystat components

CGM Flystat components are produced by seven key MLC contractors. The team regularly visits their production sites in person.



The MLC team at a contract manufacturer



Inspecting parts at a contract manufacturer



Sergey Melenkov on the production floor



Producing one of the components



A contractor's production line

TEAM VOICES



Sergey Melenkov

Co-founder and Chief Technology Officer (CTO), MLC

Engineer by training in mechanics and control systems. Since 2016 he has founded IT startups and promoted investment projects; co-founder of a marketing agency that has delivered around 150 projects. At MLC he applies his technical and project experience to work with contractors and technology partners.

How did you feel when you first held a finished Flystat sample?

“When I pick up the device, the first thing is the box. It’s sturdy, and you immediately feel there’s a serious device inside. When you take out the device itself, it looks friendly and is intuitive: you immediately know how to hold it and how to press the button. The coating materials feel pleasant to the touch, too. The device is very modern and interesting. When you see it, you immediately want to know what it’s for and how it’s used: it’s not just some plastic gadget, but something genuinely interesting. Once applied, the sensor itself is pleasing too: it has a soft-touch coating and rounded forms, it feels very nice to the touch and looks great.”

> “ When you take out the device itself, it looks friendly and is intuitive



INTERVIEW



Artem Glazkov

Production and project coordination, MLC

Graduate of Bauman Moscow State Technical University. Since 2019 he has worked in the development, production and registration of medical devices. At GE HealthCare he worked on the registration of high-tech medical equipment, including digital PET/CT. Experience in implementing ISO 13485 quality management systems and organising production inspections.

You connect development, production in China and certification. What is the hardest part of making all these pieces work as one? And what moment along the way do you remember most?

“In my view, the biggest difficulty is that development, production and certification represent three completely different philosophies. Development is above all about creativity, a constant search for new solutions and the drive to improve the product. Production, by contrast, is a clear, stable and reproducible system that reacts quite painfully to any change. What matters in production is predictable processes, stable characteristics and consistently high product quality. Certification is to a large extent a dialogue between the manufacturer and experts from regulatory authorities or notified bodies. Here it is important not only to ensure compliance with requirements, but also to be able to make a well-argued case for the safety and effectiveness of the device and to justify the technical decisions taken.

Even from these three brief descriptions it is clear how different the success criteria are in each area. What counts as success for a developer can become a serious problem for production or make certification considerably more complicated. My job is to keep finding compromises between these approaches for the sake of a common goal — creating an effective, reproducible product that meets regulatory requirements.

Sometimes I need to explain to developers that what matters is not the ideal solution from an engineering point of view, but a good-enough one that meets all the established requirements and can be implemented within a reasonable time frame. To certification specialists — that we need to look for acceptable ways to optimise timelines, the volume of information provided and the methods of demonstrating compliance, without lowering the level of evidence. And to production — that even well-established processes sometimes need to make room for improvement, without sacrificing stability and quality.

It is a very delicate balancing act, and often hard to predict. Our company also pays additional — and, in my view, very well-placed — attention to patenting our own technologies. This adds another dimension to decision-making, because we have to consider not only technical and regulatory requirements but also the protection of intellectual property. I consider this especially important for a technology company preparing to enter a competitive market. It is at moments like these that you really understand that managing a medical device project isn’t just about controlling deadlines — it’s a constant search for balance between the technical excellence of the product, its safety and the ability to bring the development into real-world use.

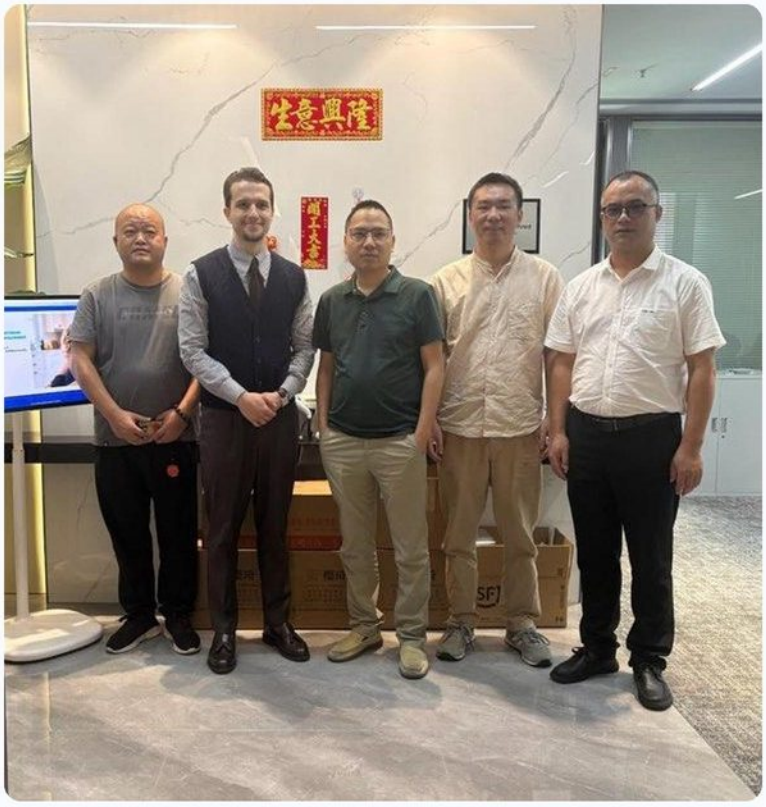
As for the most memorable moment, I would single out the story of the change to the design of our applicator. At a certain stage of development, we decided to make design changes aimed at improving user safety. I remember that period very well: there were many meetings, discussions and debates. The change was quite significant and affected several areas at once: we had to revise the design and technical documentation, assess the impact on production processes and analyse

the implications for testing and certification.

On the one hand, we were aware of how much additional work this would involve. On the other, we understood that the change was truly necessary to ensure the safety of the future user. In the end, after many discussions and approvals, we decided to change the design of the applicator. It cost us time, effort and, of course, nerves, but today I believe we did the right thing. For me, this case became a very clear illustration of the very balance I talked about earlier."



Artem at a packaging supplier's factory in China



Artem (second from left) with circuit board manufacturing partners in China



Artem (right) at MLC's production facility, in the cleanroom

> **Managing a medical device project isn't just about controlling deadlines — it's a constant search for balance**

TEAM VOICES



Marina Tmenova

Co-founder and co-head of marketing and media, MLC

Degree in economics and finance. Since 2013 she has developed online projects, built business lines at IT startups and has extensive experience in content management. At MLC she co-heads the marketing and media department and leads part of the team.

How did you feel when you first saw the finished Flystat box?

“Working on our own product, CGM Flystat, is not only about developing technology — it’s about understanding that there is a real opportunity to make life easier, calmer and safer for people with diabetes. When I saw the finished box of Flystat devices, I felt a special kind of pride and joy, and an understanding that what had once existed only as an idea, in sketches and drawings, was taking real shape. And at that moment I truly realised why we had all started this together as a team.”

> **“ What had once existed only as an idea, in sketches and drawings, was taking real shape**



The CGM Flystat box

What CGM Flystat can do

A continuous glucose monitoring system

CGM Flystat works automatically and discreetly: it collects data 24/7, shows glucose levels in real time and helps you act in advance rather than after the fact.



The CGM Flystat app, applicator and sensor



Sensor on the arm

24/7 monitoring

Glucose levels in real time — day and night

Smart alerts

Warn you if readings go outside the target range

History and reports

Data is stored and available to you and your doctor

Clear analytics

See how food, sleep and activity affect your glucose

Family access

Share your data with loved ones

Bluetooth

Easy, stable connection to your smartphone

Getting started is easy: Apply → Connect → Use

Based on MLC's product presentation. CGM Flystat is undergoing European CE certification.

TEAM VOICES



Zhang Lixin

COO, MLC Shenzhen

EMBA, former CEO of Shenzhen OSMUNDA Medical Devices Group. More than ten years of experience in the registration and certification of medical devices: he has led Class III devices from development to mass production under NMPA standards and more than ten CE/FDA projects. At MLC he is responsible for operations in Shenzhen, the CE certification process for the CGM and coordination with the R&D team.

You built MLC's site in Shenzhen: production, the team, the infrastructure. What moment along the way do you remember most?

"Ever since I joined the big MLC family, every moment has filled me with enthusiasm. Especially the moment when CGM Flystat, born in computer drawings, truly became reality thanks to the efforts of each and every one of us. Creating the laboratory in Shenzhen, the infrastructure, building the Shenzhen team — and especially seeing the number of MLC Shenzhen employees grow, and the support of the management — that is what has made the deepest impression on me. I hope that all our teams, working together, will bring the product to market as soon as possible."

> **"CGM Flystat, born in computer drawings, truly became reality thanks to the efforts of each and every one of us**



Zhang Lixin (left), Sergey Melenkov and Artem Glazkov in the cleanroom at the production facility

THE MLC TEAM WITH CGM Flystat

The founders of MLC with the device the team has worked on for four years: from the first idea to the production sample.



Now

Undergoing European CE certification · Market launch planned for 2027

07

MLC AROUND THE WORLD

Partners, representatives, international conferences and exhibitions

Where we are needed

From the very beginning, MLC was built as an international project. Today we have national representatives in countries across Africa, Asia and Europe, and we present our product at the world's leading medical exhibitions.

In February 2026, MLC presented Flystat at WHX in Dubai, and our next meeting with partners will take place there on 25–28 January 2027. The project has been featured in Health Magazine (UAE).

TEAM VOICES



Elena Saltanova

Co-founder and Chief Visionary Officer, MLC

Master's degree in linguistics, with training in intercultural communication and PR. Since 2015 she has built and led international, marketing and client teams at IT startups. At MLC she is responsible for PR and international development and co-heads the marketing and media department.

You speak fluent French. When there was a choice between Europe and Africa, you chose Africa. Why?

"For me, Africa is a continent with enormous potential and very close to my heart. Its people, despite all the difficulties they face, persistently pursue their goals day after day.

I deeply respect my colleagues and partners in Europe, but I understand very well that in Africa such devices are often unavailable, while the need for them is acute. That is why I decided to dedicate myself to developing the project in Africa and to expanding it where it is needed most.

I very much want a person with diabetes in Ouagadougou or Cotonou to be able to live as calmly as someone in Paris or Dubai."

> **"Our project carries a humanitarian mission, and I believe it can help save many lives**

Our national representatives

The people bringing MLC to countries across Africa, Asia and Europe



Octave ASSOGBA
Director of Development, African region



Victor ESSOMBE
Cameroon



Hồ Quang
Vietnam



Moumouni ZONGO
Burkina Faso



Marcel DANGO
Burkina Faso



Koudjo Elete ODO
Togo



Régis DE VOS
France



Sofian STUMPF
Sales Director



Ousmane ZONGO
Burkina Faso



Armand DA
Burkina Faso



Yacouba ZOBOUDRE
Burkina Faso



Mohamed OUEDRAOGO
Burkina Faso



Clinton HAGMENI HAPPY
Cameroon



Rachidou SAMA
Benin



Ibrahim MOHAMED
Benin



Roland ASSOGBA
Benin



Isaac ASSOU
Benin



Kouassi Florent KOUADIO
Côte d'Ivoire



Vincent KEGBE
Benin



Josias AZONGLATO
Benin



Fatou BAMBA
Côte d'Ivoire



Modou Makhtar MBAYE
Senegal



Mémel Léopold AKPRO
Côte d'Ivoire

> **"Our friends, colleagues and partners who were with us in the early stages of the project saw in us people capable of seeing things through"**
>
> Ivan Saltanov, founder and CEO of MLC

Voices of our representatives

With us since day one, from the medical field, and those carrying MLC in their own countries

MLC'S VOICE IN THEIR COUNTRY



Koudjo Elete ODO

MLC National Representative in Togo

What inspires you to develop MLC in Togo, and what would you like to change for people with diabetes in your country?

"As a Presbyterian missionary, I develop this project out of a deep conviction: to serve people, to help preserve life and to bring hope to those who need it. My missionary service has taught me values such as love for one's neighbour, compassion, solidarity, self-giving and service to the community. These values are also the foundation of my work developing MLC in Togo. I believe that serving God also means being useful to one's neighbour. Health is an essential part of human dignity, so I want to put my energy, my network and my experience into an initiative that brings medical innovation closer to people. I am especially concerned about people living with diabetes. Many of them need better support, more information and technologies that help them monitor their health more closely. That is why I promote MLC and continuous glucose monitoring solutions, in particular CGM Flystat. In Togo, I want to change the very way we approach diabetes: to move from an approach in which the disease is mainly treated — and often too late — to a culture of prevention, health education, regular monitoring and patient support. I want to bring together health professionals, community leaders, institutions, religious organisations and development partners to raise awareness together and improve care for people with diabetes. For me, this is more than a representative role: it is a continuation of my missionary calling. My greatest ambition is not only to grow MLC in Togo, but through this project to help save lives, ease suffering and restore hope."

> **"My greatest ambition is to help save lives, ease suffering and restore hope through this project**
>
> Koudjo Elete ODO

SINCE DAY ONE



Octave ASSOGBA

Director of Development, African region

You have been with MLC from the very beginning. Why did you believe in the project back then?

"I believed in MLC because:

1. I love participatory investment, and I have a lot of experience in it.
2. My first meeting with Ivan Saltanov truly impressed me, and I got involved straight away.
3. Ivan radiates such passion that it's impossible to listen to him without getting hooked.
4. In reality, I invested in Ivan and in the project team."

SINCE DAY ONE



Victor ESSOMBE

MLC National Representative in Cameroon

You have been part of the project since day one. What has changed since then, and what still inspires you about MLC?

"Here are five things that have inspired and impressed me about MLC since the very beginning of the project.

- **Smart project management:** decisions are relevant, pragmatic and forward-looking.
- **Humble leadership:** the leaders have remained accessible, open and willing to listen.
- **Transparent management:** everything is clearly explained to investors.
- **Rapid growth:** the project is developing very quickly, solidly and well.
- **Rigorous management:** funds go to what really matters for the project. Nothing is wasted."

FROM THE MEDICAL FIELD



Isaac ASSOU

MLC National Representative in Benin, biomedical laboratory technician

What difficulties do people with diabetes in Benin face when they need to monitor their glucose, and why do such technologies matter to them?

"Regular glucose monitoring is the foundation of diabetes care, but in Benin it faces a number of difficulties. Test strips, lancets and other consumables are expensive. Far from the big cities, pharmacies don't always have glucose meters in stock: they have to be ordered from Cotonou, at a cost of time and money. When the strips supplied with the meter run out, the ones that fit that particular model are often hard to find — and self-monitoring is interrupted. Add to this the constant finger pricks and the fact that each reading shows only a single moment.

For example, a patient checks their glucose at 8 a.m. and gets 1.10 g/L. But what happens at 10 a.m., after breakfast? At 1 p.m., after lunch? At 2 a.m., during sleep? With a glucose meter, finding out means pricking a finger again and again. CGM adds a new dimension: it shows how glucose changes day and night and warns of night-time hypoglycaemia. Patients can see how our dishes affect their glucose — maize paste with sauce, rice and beans, pounded yam, akassa, gari, sugary drinks. For older people, those afraid of needles and patients on insulin, it greatly reduces the number of finger pricks. And the doctor gets the full picture: time in the target range, night-time variations, trends.

Glucose meters and laboratory tests remain indispensable. The goal is not to replace them, but to complement them with an innovative solution that makes patients' lives more comfortable and their monitoring more effective."

> **"Ivan radiates such passion that it's impossible to listen to him without getting hooked**
>
> Octave ASSOGBA

MLC'S VOICE IN THEIR COUNTRY



Marcel DANGO

MLC National Representative in Burkina Faso

Why is it important for Burkina Faso that modern diabetes monitoring devices become more affordable? And how do you tell people about the MLC project?

"First of all, it matters because diabetes here is a disease that causes enormous harm. So modern solutions like this could truly make people's lives easier. Secondly, the country is working to strengthen its healthcare system, so any modern technological innovation that helps people will be warmly welcomed. Given how widespread diabetes is in the country, a device like this is very timely: it can make life easier for everyone living with diabetes, and even for healthy people. After all, the country is introducing innovation in many areas right now, including healthcare. We reach people mainly by spreading information through different channels: social media, local media, and also through community leaders — it is easy to get information across through them. But today the most widespread channel is social media: messages spread quickly there. There are also awareness campaigns through cooperatives and associations, and we have people on the ground who can bring the information to the whole population."

MLC'S VOICE IN THEIR COUNTRY



Moumouni ZONGO

MLC National Representative in Burkina Faso

What does being part of MLC mean to you personally?

"For me, being part of MLC is above all about conviction, vision and commitment to an innovation that can change the lives of millions of people, especially on the African continent. I deeply believe in MLC's potential and in its mission to make medical technology more accessible, especially in diabetes management. Personally, being part of MLC means contributing to an ambitious vision, taking part in building a meaningful project and being part of a journey that brings together technological innovation, health and benefit for people. It is also a responsibility: to believe in the vision, to understand it, to defend it seriously and to contribute to its development at my own level. MLC is not just a project I belong to — it is a vision I want to invest in for the long term. We work on the project wholeheartedly together — my wife, my team and I — and I am grateful to them for it."

Meetings with partners

First conference of national representatives · Dubai, 2024

This is where it all began. At the first closed conference in Dubai, MLC's national representatives came together for the first time. The team presented the project and its plans and showed partners the applicator housing and the packaging of the future device.



Participants of the first conference with the flags of their countries and the MLC flag



The applicator housing and sensor case in a participant's hands



Case with a sensor component



Ivan Saltanov presenting the project to national representatives



The MLC team and conference participants



Maxim Kolomiets talking with participants



Moumouni ZONGO, MLC National Representative in Burkina Faso, asks a question. Next to him — Victor ESSOMBE, MLC National Representative in Cameroon



MLC “Science for Life and Earth” awards

CGM Flystat — a continuous glucose monitoring system

Conference in Shenzhen

August 2025 · Meeting with MLC's key contractors

In August 2025, MLC brought together its seven key contractors in Shenzhen — companies that develop, manufacture and certify CGM Flystat components. Each partner presented its part of the project, from production to international certification. Among them were InnoMax MedTech and OSMUNDA.



The MLC team and InnoMax MedTech representatives led by the company's chairman, Jackson Shih. Shenzhen, August 2025



Jackson Shih

Chairman, InnoMax MedTech

InnoMax MedTech is a Chinese CDMO company that develops and manufactures turnkey medical devices for clients around the world — from diagnostics and imaging to wearable health devices.

Before that, Jackson Shih was Vice President of Foxconn, the world's largest contract electronics manufacturer.



OSMUNDA presentation: how to certify a CGM quickly and efficiently worldwide



Conference participants

Meetings with partners

Second conference of national representatives · China, 2025

The second conference for MLC's national representatives took place in China under the motto "From idea to reality". Representatives from different countries met the project team and partners, learnt how CGM Flystat is made and saw the device itself in person for the first time.



Conference participants with the flags of their countries



Conference slide: "Chine 2025"



Ivan Saltanov: "From idea to reality"



Ivan Saltanov addressing the representatives



Zhang Lixin, COO of MLC Shenzhen, introduces the Flystat app to MLC's representatives in Vietnam: National Representative Hồ Quang and his deputy Nguyễn Thị Ly



The MLC team talking with representatives



Working session at the conference

WHX Dubai 2026

The world’s largest healthcare event

In February 2026, MLC presented CGM Flystat at World Health Expo (WHX) in Dubai, formerly Arab Health. This year the exhibition was held for the first time at Dubai Exhibition Centre in Expo City and, according to the organisers, became the largest in the event’s 50-year history.

At the MLC stand, the team, partners and national representatives met visitors, demonstrated the device and the Flystat mobile app, and answered questions.

235 000+
professional visits

4 300+
exhibitors

180+
countries

According to WHX organisers



WHX, Dubai, February 2026. The MLC stand at peak hours



The MLC team, partners and national representatives at WHX



Ivan Saltanov with MLC national representatives



Ivan Saltanov presenting CGM Flystat to stand visitors



Elena Saltanova; Octave ASSOGBA, Director of Development for the African region; and Josias AZONGLATO, one of MLC's national representatives in Benin, at the MLC stand. On the table — CGM Flystat; on the screen — the mobile app.

NEXT MEETING

WHX Dubai 2027

25–28 January 2027
Dubai Exhibition Centre
MLC stand: N33.E39

How to find us
Point your camera at the QR code to open the exhibition map with our stand.

CGM Flystat — a continuous glucose monitoring system

Meetings with partners

Closed MLC conference · Dubai, 2026

MLC's national representatives and partners from many countries gathered in Dubai for a closed conference. The team presented the project's results and showed the working CGM Flystat device for the first time, and participants shared their experience of working in the regions.



Participants of the closed MLC conference with the flags of their countries



Sergey Melenkov showing the Flystat sensor



Working session: representatives from different countries



Participants' excitement: first photos with CGM Flystat



A gift to the founders of MLC from Koudjo Elete ODO, MLC National Representative in Togo — a figurine in the shape of the African continent



Elena Saltanova and Victor ESSOMBE, MLC National Representative in Cameroon — part of the project since day one



Left: Marina Tmenova addressing conference participants

AT THE CONFERENCE

- Results of the MLC team's work
- Demonstration of the working device
- Experience of representatives from the regions
- Awards for national representatives

MARKET LAUNCH

08

Four years ago, it all began with an idea. Today we have a production sample, our own cleanroom, a team and partners around the world. The next step is the path to the people who need CGM Flystat.



Now
European CE certification

25–28 January 2027
WHX Dubai · stand N33.E39

2027
Planned market launch

See you at WHX Dubai 2027!

flystat.com · partners@mlc.health · company@mlc.health
Stand map for WHX 2027 — scan the QR code on the right

FROM IDEA TO REALITY

MLC special edition for partners · 2026

“Our first partners believed, first and foremost, in people”

Ivan Saltanov, founder and CEO of MLC

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WHX Dubai 2027 · 25–28 January · stand N33.E39

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