30th International Symposium on ALS/MND

Perth, Australia
4 – 6 December 2019

Abstract submission
Conditions of Acceptance
This document contains important information on the conditions of acceptance for abstracts submitted for consideration for the 30th International Symposium on ALS/MND to be held in Perth, Australia on 4-6 December 2019.

The conference is organized as two parallel oral sessions; the biomedical research meeting and the clinical research and management meeting. The poster themes are organized to broadly match the topic areas in these two sessions.

Deadlines

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<th>Event</th>
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<tr>
<td>Submission</td>
<td>Wednesday 5 June 2019 (23:59/11.59PM)</td>
</tr>
<tr>
<td>Amendments and alterations</td>
<td>Thursday 27 June 2019</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>Friday 2 August 2019</td>
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<tr>
<td>Published on Taylor &amp; Francis website</td>
<td>Friday 8 November 2019</td>
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<tr>
<td>Published on our website</td>
<td>w/c Monday 11 November 2019</td>
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This document contains information on:

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1 Corresponding and presenting author

1.1 Abstracts should be submitted by the corresponding author of the abstract. The corresponding author is the only person that will receive email correspondence from us (including abstract submission ID).

1.2 A presenting author should be identified in the abstract submission process. This will be the person presenting the talk or poster at the conference.

1.3 Changes to the presenting author may be made on the system up to the abstracts amendment deadline (27 June 2019). After this date the submission system will not allow changes. Any further changes must be requested by emailing abstracts@mndassociation.org, quoting your abstract submission ID in all correspondence. There is no guarantee that changes requested after 27 June 2019 will be processed.

2 Correspondence

2.1 The email address and contact details used to register as a user on the online abstract submission system should relate to the corresponding author.

2.2 The email address of the corresponding author will be published with any accepted abstracts.

2.3 Notification of abstract decisions will be communicated via email, using the abstract submission ID as the primary reference.

This information will be available in two main notifications:

• The first notification in late July will include a link to login to your submission to find out the presentation format. This is to enable presenting authors to register at the best rate prior to the Early Bird registration deadline (27 August 2019).

• A second notification in September (for posters) and October (for orals) will include specific presentation theme/session, time and date information.

2.4 The corresponding author must be contactable by email over the summer months (July–September) to confirm acceptance of their presentation. An alternative email address for the corresponding author must be provided during the abstract submission process.

2.5 If the corresponding author email address becomes invalid, please contact the MND Association as soon as possible, at abstracts@mndassociation.org, to change it. Please note that we are unable to change contact details unless they become invalid.

2.6 To ensure you receive symposium emails from us, please add abstracts@mndassociation.org, symposium@mndassociation.org, and support@oxfordabstracts.com to your e-mail ‘safe senders’ list and check your spam/junk folders regularly.


3 Abstract content

3.1 Abstracts may be submitted even if previously presented at a national/international meeting.

3.2 Abstracts must be in English and be no longer than 450 words; this includes references and acknowledgments but not the title. If you exceed the word limit your abstract will not be reviewed by the Programme Committee.

Please ensure that your abstract is checked for grammar, understanding and accuracy as it will NOT be proof-read before publishing and there is no spellchecker available within the submission system. Any mistakes remaining in your abstract after the amendment deadline will be published and neither the MND Association nor our publisher will accept responsibility for this.

3.3 The title should be as brief as possible but long enough to indicate clearly the nature of the study (maximum of 35 words).

3.4 Do not include author names in the title or body of your abstract because a ‘blind’ reviewing process will be used. You will be asked to enter author names in a separate question on the submission form.

3.5 Do not start abstracts with very basic descriptions of ALS/MND e.g. ‘ALS is an adult-onset, rapidly progressive neurodegenerative disease’ as an opening sentence (this is an ALS conference so this knowledge is assumed).

3.6 The submission system has separate boxes for each of the subheadings (e.g. background, methods, results) and will automatically add this subheading to the beginning of the text you insert in each box, when the abstract book is produced. Therefore do not put the subheading at the beginning of the text you insert.

3.7 Where possible, all abstracts should be entered into separate boxes according to the subheadings in the submission system; do not retype the subheadings. See the example, using previous abstracts, below:

Background

Diagnostic uncertainty in ALS has serious management implications and delays recruitment into clinical trials. Emerging evidence of pre-symptomatic disease-burden provides the rationale to develop diagnostic applications based on the evaluation of in vivo pathological patterns early in the disease. After years of descriptive MRI studies in ALS, a number of studies have now emerged outlining diagnostic and prognostic applications based on pattern recognition.

Objectives

To outline and test a diagnostic classification approach based on an array of complementary imaging metrics in key disease-associated anatomical structures.
Methods

All participants of this prospective biomarker study provided informed consent in accordance with the Medical Ethics Approval of the project (Beaumont Hospital, Dublin, Ireland). Data from 75 ALS patients and 75 healthy controls were randomly allocated in a ‘training’ and ‘validation’ cohort. Spatial masks were created for anatomical foci which best discriminate patients from controls in the ‘training sample’. In a virtual ‘brain biopsy’, data was then retrieved from these key disease-associated brain regions. White matter diffusivity indices, grey matter T1-signal intensity values and basal ganglia volumes were evaluated as predictor variables in a canonical discriminant function.

Results

Following predictor variable selection, the canonical discriminant function reached an Eigen value of 0.871, a canonical correlation value of 0.682, Wilks lambda of 0.534, Chi-square 62.983 and a significance of less than 0.001. The model showed an overall classification sensitivity of 89.1% and specificity of 85.5% in the ‘training’ group. In the ‘testing sample’ both sensitivity and specificity reached 90%.

Discussion

This study evaluates disease-associated imaging measures in a diagnostic application. From a biomarker perspective, the meaningful interpretation of data from single individuals is paramount for the development of viable clinical applications. Although larger samples will be required for robust validation, the study confirms the potential of multimodal quantitative imaging in clinical applications. The concept of region-of-interest (ROI)-based, spatial reference system guided ‘data biopsies’ is also applicable to longitudinal analyses and potentially for the development of monitoring markers.

References


Acknowledgements

We would like to thank patients for taking part in the study. Funding for this study was provided by ‘name of funder’ from grant ‘grant code’. The authors declare no conflicts of interest.
model’. Keywords will be used to compile the subject index of the symposium journal supplement (please refer to the subject index of previous symposia as a guide). Previous abstract publications can be found on the MND Association website www.mndassociation.org/symposium. If you use ‘ALS’ or ‘MND’ as keywords, these will be removed.

3.12 Abstracts must not include tables or figures.

3.13 Data presented must be statistically robust and authors are requested to clearly state P and N values where necessary. Where the research involves the use of animals, presenters should consider the points raised in the ARRIVE guidelines when writing their abstracts www.nc3rs.org.uk/arrive-guidelines.

3.14 SI units should be used and non-standard abbreviations must be fully defined when first used (ALS and MND do not need defining).

3.15 Authors listed on the abstract must fulfil the criteria linked here: http://authorservices.taylorandfrancis.com/defining-authorship

3.16 All abstracts must be submitted online, via a link on the MND Association’s website www.mndassociation.org/symposium. Abstracts cannot be accepted via email.

3.17 Where several abstracts on a similar subject are submitted by the same author or research group, only one presentation may be offered.

3.18 Although abstracts can be amended after the submission deadline, the Programme Committee will assess them as they stand on 5 June 2019. Abstracts with very little content at this time may be rejected.

4 Presentation types

4.1 Authors must stipulate the preferred presentation format

• Oral Presentation
• Poster Presentation
• Work In Progress / Care Practice Poster Presentation

4.2 The ‘Work in Progress / Care Practice Poster’ category includes:

• Preliminary work (eg data or analysis not yet available)
• Case studies
• Care practice
• Resources (eg depositories or databases).

Unless so submitted, abstracts may be rejected.

5 Commitments of accepting the decision of your abstract

5.1 If an abstract is accepted, at least one author must register to attend the conference to present it in person. If this requires a change to the original presenting author, please inform us by contacting abstracts@mndassociation.org immediately. No reduced fees are available for abstract presenters.
Authors accepting the offer of a poster presentation must ensure their poster is on display at the conference venue at the designated time. The corresponding author will be notified of the time slot and it must be abided by (see section ‘2: Correspondence’).

Abstracts will be published in an online only open access supplement of the Amyotrophic Lateral Sclerosis and Frontotemporal Degeneration journal. Abstracts accepted as ‘Work in Progress / Care Practice Poster Presentations’ will not be published in the journal, but will be available on the MND Association website. 

Please note that printed abstract books will not be available this year. If you require hard copies of abstracts, please print these in advance of the meeting from our website www.mndassociation.org/symposium.

Abstracts will be published online the week commencing 11 November 2019.

Failure to register for the symposium after you have accepted a presentation allocation could lead to your presentation being withdrawn.

By submitting an abstract you consent to give us the license to act on your behalf with the Taylor & Francis group to publish your abstract in the symposium supplement of the journal Amyotrophic Lateral Sclerosis and Frontotemporal Degeneration. You also confirm that your abstract is:

- Your own work
- Does not infringe any intellectual property rights of any other person or entity
- Cannot be construed as plagiarizing any other published work
- Contains no content that is abusive, defamatory, libellous, obscene, fraudulent, nor in any way infringes the rights of others, nor is in any other way unlawful or in violation of applicable laws

Withdrawing your abstract

If you wish to withdraw an abstract please contact the MND Association by email at abstracts@mndassociation.org as soon as possible stating the submission ID of your abstract. Please note the submission ID is assigned to an abstract on initial submission.

Due to publishing deadlines, abstracts withdrawn after 2 August 2019 will still be published in the journal supplement.

Poster Prize Competition

The International Symposium on ALS/MND poster prize celebrates early-stage career MND/ALS researchers’ outstanding work, presented at the conference poster session.

Prizes will be awarded for the best clinical and best biomedical posters presented at the conference.

Early career researchers are eligible to enter if they are aged 35 years or under on the abstract submission deadline date OR if they were awarded their PhD within the last three years.
All eligible presenters should select the box within the abstract submission system, should they wish to be considered for the prize.

The eligibility criteria apply to the person presenting the poster during the poster prize judging at the conference. If the presenter does not qualify, the poster will not be considered for the prize.

Indicating that you are eligible for a poster prize will not affect your likelihood of being chosen for an oral presentation.

Only those who confirm their eligibility at the abstract submission stage will be considered for prizes.

Only abstracts accepted for publication in the online symposium journal supplement will be eligible for consideration for the prizes.

The presenter must be available at an allocated time to answer questions from the judges at the conference (for example, a poster attended by a senior author describing the work of the presenter will not be eligible for consideration).

The initial stage of judging will be based on the abstracts, as submitted by the abstract submission deadline of 5 June 2019. Final judging of shortlisted posters will take place at the conference.

Late abstracts will not be eligible for the poster prizes.

Full terms and conditions for the poster prize will be available on the website (www.mndassociation.org/symposium) following the opening of the submission system in early May 2019.

**Queries**

Any queries regarding the submission of abstracts should be sent to abstracts@mndassociation.org.