Late-breaker session submission guidelines

Deadline: Online submission 20 June 2017 – 20 July 2017

General information:
The 48th Union World Conference on Lung Health is pleased to offer three late-breaker sessions on tuberculosis, TB/HIV and diabetes and lung health.

Information for authors
• All late-breaker sessions must be submitted online via the dedicated system that will be available from 20 June to 20 July, 2017. Abstracts submitted by e-mail will not be considered.
• In keeping with the spirit of a late-breaker session, we ask that only new and significant findings of broad interest be submitted for the late-breaker presentations in the form of an abstract to be submitted online.
• Persons submitting late-breaker sessions will be notified of acceptance or rejection of their abstract by 2 August, 2017.
• If you represent a UN organisation, please select the name of the organisation from the list available in the drop down menu.
• A listed co-author other than the corresponding author may register and present the study at the conference. The corresponding author is responsible for the session content. S/he is the contact person for submission and communication purposes and is also responsible for disseminating information related to the session to the co-authors.

Text of the abstract
• The abstract should be restricted to 300 words and should include background, methods, results, and conclusions.
• One table or one figure may be included with the abstract. Abstracts that do not contain specific results, or that were previously submitted to this conference will be not be considered.
• Type the title of the abstract in upper and lower case, using capitals only for the first word, acronyms and proper nouns. Titles of more than 25 words (110 characters and spaces) will be truncated.
• Abstracts can be submitted in English, Spanish or French. However, please note that if accepted, your abstract will be presented at an international conference, where the language common to most delegates is English. No simultaneous interpretation will be provided.
• Use the palette of characters provided to insert symbols, accents and special formatting (e.g., italics, bold, β, μ, etc.).
• Authors are responsible for proofreading and submitting an abstract without errors, as they will be reproduced in the form they were submitted.
• All accepted abstracts will be included in the Abstract Book, which is a supplement to the International Journal of Tuberculosis and Lung Disease (IJTLD). The Abstract Book will be made available online for download from the website at the conclusion of the conference.
• Abbreviations and acronyms must be written out in full at the first mention in the text.
• The maximum number of authors and institutions is eight.
• If all authors belong to a single institution, you do not need to create new affiliations for each author. Click on “Institutes” to fill in the affiliation fields.
• To submit a new abstract, click on “Create” under “MyAbstracts”.
• Please ensure that you carefully read all instructions given on the screen at each step of the process.
• If you wish to submit a table with your abstract, click on “Tables” on the top right to create a table. Tables should be no larger than five rows x 10 columns.
• If you wish to submit a figure with your abstract, click on “Graphs/Images”. The maximum file size of each graph is 5 MB. The maximum pixel size of the graph is 600(w) x 800(h). You may upload graphs in JPG, GIF or PNG format.
• Recommended resolution: min. 150 dpi, 300 dpi for images, 600 dpi for line art (charts).
• Important: the graphic content must be clearly legible when previewing the abstract.
• Low-resolution images will not be included in the Abstract Book.
• Please do not upload the text of your abstract as an attachment. Abstracts submitted as attachments will not be considered.
• Please note that tables and figures are reproduced in a single column with the abstract and that legibility is the responsibility of the author. We recommend that you use a sans serif (Arial or Calibri) font for clarity.

Organisation of abstracts

• **Background**: State the study objectives, study question or describe the challenge addressed by the research.
• **Design/Methods**: State the setting, methods, desired outcomes, procedures and techniques used to collect and analyse information. Include a description and breakdown of participants, procedures, measures and appropriate statistical analyses.
• **Results**: Present specific findings to date.
• **Conclusions**: Describe the implications of the results presented, and summarise key recommendations. Explain specific findings on how the research addressed the study, question or challenge.
Use of non-stigmatising language
The Union is committed to promoting patient-centred language in all conference abstracts and presentations. When drafting your abstract, The Union requests that you follow the guidance laid out in the Stop TB Partnership’s publication, *Suggested Language and Usage for Tuberculosis (TB) Care, Communications and Publications*.

Submission
The corresponding author will receive an e-mail confirming that the submitted abstract has been received. After submission, the authors will be able to export a copy of the submitted abstract. After the abstract has been submitted, you can still go back and edit it. However, please make sure that you submit it again before the deadline.

Please refrain from submitting multiple abstracts on the same topic by varying the authors or under different titles with only minor word changes. In such cases, all of the submissions on that topic will be automatically rejected.

Submissions should include a confirmation of the following points:

- The work has not been previously submitted for consideration to the general portion of The Union Conference.
- The date by which the work and analysis was mostly completed.
- A request and rationale for travel support to be uploaded online if so desired.
- The address, phone and e-mail address where the author may be contacted during the week of 2 August 2017.

Review of abstracts
All submitted abstracts will be sent for peer review by a panel of international. Each abstract will be reviewed and scored by at least three reviewers. The scores will then be submitted to a reviewing committee. Note that decisions of the abstract review committee are final and cannot be appealed.

Notification to authors
- Corresponding authors will be notified of acceptance of their late-breaker sessions by 2 August, 2017.
- Abstracts that are not accepted cannot be reconsidered for review or presentation at the conference.

Note: A small number of travel grants are available for presenters of accepted abstracts who require funding to attend the conference. If you intend to request support, an indication of your desire and rationale for consideration for a travel grant must be submitted online together with the abstract. The reviewing committee will be blinded to the request for travel funds.
Late-breaker sessions
Three types of late-breaker sessions will be considered for The Union World Conference. The sessions must present specific results; abstracts reporting data pending will not be accepted. We discourage multiple abstracts from the same study/setting unless the results are truly unique for each submission, with no overlaps.

- **Session type 1: The Union/CDC late-breaker session on tuberculosis**
The 48th Union World Conference on Lung Health and the United States Centers for Disease Control and Prevention are pleased to announce a late-breaker session related to tuberculosis. This category is for reporting all aspects of TB prevention, diagnosis and treatment research (including basic and clinical science, epidemiology, social, behavioral, and health care delivery).

- **Session type 2: The Union student late-breaker session on lung health**
The 48th Union World Conference on Lung Health is pleased to announce the late-breaker session, introduced last year, focusing on lung health for individuals currently studying. Individuals **must be currently enrolled as a student in a university programme** at undergraduate, graduate, or doctoral level either full- or part-time. All aspects of lung health are welcomed for presentation during the late-breaker session from basic science in immunology and vaccines, to operational research in TB, COPD, pneumonia, and other lung health issues in adults and children.

The tracks for which submissions are being accepted are as follows:

- Basic science, Drug development, immunology and vaccines
- Civil society and community engagement
- Clinical trials for new treatments for DS-TB and MDR-TB
- COPD, pneumonia, asthma and other lung health in adults
- Drug resistant TB care and treatment except clinical trials
- Drug sensitive TB care and treatment except clinical trials
- Global Plan to End TB 2016-2020 and End TB Strategy -- country level experiences on paradigm shift
- HIV-TB and other HIV-related lung health
- Human rights
- Latent TB infection (LTBI)
- Paediatric lung disease, including TB
- Patient-centred care
- TB and non-HIV comorbidities, i.e. diabetes, COPD, tobacco
- TB diagnostics, including drug resistance determination
- TB education and training
- TB epidemiology
- TB in key affected populations
- TB infection control
- TB laboratory service implementation
- **Session type 3: The TB-HIV and diabetes late-breaker session**

The World Health Organization HIV Department in collaboration with the HIV section of The Union is pleased to announce the TB-HIV late-breaker session at the 48th Union World Conference on Lung Health in Guadalajara, Mexico. For the first time we also include diabetes as an increasingly relevant co-morbidity of TB, though the emphasis will be maintained on TB/HIV.

All aspects of TB-HIV including basic and clinical science, epidemiology, health care delivery, public health, economic modelling as well as social, behavioural, psychosocial, and educational aspects are welcomed for presentation during the late-breaker session.

In keeping with the spirit of a late-breaker session we request that only new, innovative, and significant findings that have occurred as of 1 May 2017, or for which information has just become available, be submitted for the late-breaker presentations in the form of an abstract.

The late-breaker session will consist of eight oral presentations of ten minutes each, followed by five minutes of questions. The presentations will be selected from the abstracts submitted by the deadline mentioned above. Persons submitting the abstracts will be notified of acceptance or rejection of their abstracts by 2 August 2017.