

Melbourne

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**The Thoracic Society of
Australia and New Zealand**

2008 Annual Scientific Meeting

Call for Abstracts

30 March – 2 April 2008
Melbourne Exhibition &
Convention Centre
Melbourne, Victoria



Further information: tsanz@fcconventions.com.au
or www.thoracic.org.au/asm2008

**Abstracts due:
29 October 2007**

**Early Bird registration:
by 25 February 2008**



The Thoracic Society of
Australia and New Zealand



Welcome

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The 2008 Annual Scientific Meeting will be held at the Melbourne Exhibition and Convention Centre from 30 March to 2 April 2008. The format will follow that of previous years with major plenary sessions, SIG oral and poster sessions, and breakfasts featuring both the overseas keynote speakers and local experts.

The overseas speakers are:

- **Professor James Hogg**, University of British Columbia iCAPTURE Centre, Vancouver, Canada, a world leader in pulmonary pathology especially with respect to mechanisms in COPD.
- **Professor Sebastian L Johnston**, National Heart and Lung Institute, Wright Fleming Institute of Infection & Immunity & MRC & Asthma UK Centre in Allergic Mechanisms of Asthma, UK, a leader in the area of the role of infections in the pathogenesis of airways disease.
- **Professor Jonathan Grigg**, Institute of Cell and Molecular Science, Queen Mary University London, UK, who is an expert in paediatric airways disease.

The Monday will again feature joint sessions with the ANZSRS and the ASM will be preceded by the Short Course for Advanced Trainees, the Respiratory Research Course, the Respiratory Nurses SIG Symposium, the ALF Lung Cancer Consultative Group Symposium and sponsored satellite symposia.

This year we are also honoured by the presence of Professor Peter Doherty, who will give the Wunderly Oration

Venue

Egalitarian and cosmopolitan, Melbourne has a passionate soul and intellectual fervour that makes it a truly international experience. From globally renowned architecture and events to café-lined streetscapes and verdant parklands, Melbourne is a city on show. The city is a melting pot of cultures, a fact reflected in its microcosms of restaurants, cafes, bistros and bars. Melbourne's dining spots offer a dizzying spread of the world's great cuisines, serving meals from the substantial and classic to the truly exotic.

We hope to see you Melbourne!

A/Professor Paul Reynolds
Chair, Central Program Committee

Dr David Armstrong
Local Organising Committee

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Guidelines for Submission of Abstracts to Annual Scientific Meeting

These guidelines are provided to assist members in preparing abstracts for presentation at the TSANZ Annual Scientific Meeting. By complying with these guidelines, authors will expedite the process of scientific evaluation, program arrangements and publication of abstracts.

- The Society welcomes the submission of abstracts on any aspect of respiratory medicine, surgery, sleep disorders medicine and related clinical and basic sciences.
- Abstracts which are being presented at international scientific meetings where abstracts are published may be submitted to the Annual Scientific Meeting.

Abstracts will not be accepted for presentation at the Annual Scientific Meeting if they:

- contain data which have been previously been published in the context of commercial development.
- report research work which has been carried out with financial support from the Australian Tobacco Research Foundation
- contain data which have previously been published in a full paper prior to abstract submission
- are not accompanied by a Declaration of Interest Form

A good abstract is generally very difficult to write. It usually constitutes a brief summary of a large amount of work and requires a depth of understanding, perspective and focus. Junior researchers particularly should be prepared for the need to write several drafts before reaching a final, acceptable version.

Abstracts will be published on the TSANZ Meetings Homepage prior to the conference, and in a supplement to *Respirology* (the Official Journal of the Asia Pacific Society of Respirology).

Your abstract/s must be submitted online using the submission form on the TSANZ ASM website –
<http://www.thoracic.org.au/asm2008onlineabstracts.php>

PRESENTATION

The following instructions relate to the presentation and submission of your abstract. These guidelines must be adhered to, as variations from the set format are financially costly to the Society and will result in rejection of the abstract.

a) Title

The title (in upper case) should be brief and as precise as possible. It should not exceed two lines of text. It should be relevant to the key original point of information contributed by the study and should preferably be descriptive, eg. "CAFFEINE PRIMES NEUTROPHIL OXIDATIVE METABOLISM", rather than ambiguous, eg. "THE EFFECTS OF CAFFEINE ON NEUTROPHIL FUNCTION".

b) Authors

Follow on from the title in upper/lower case with the presenting author listed first (see example). The first name or initial should be followed by the surname (e.g. Mark Ly). Leave one blank line between the title and the authors and their addresses (es).

c) Address(es)

Address(es) for the authors should be listed in the following order: Department, Institution, State and Postcode. The entire address section should be italicised (see example). Where the abstract includes authors from different departments, place the presenting author's department first, followed by other departments, using superscript numerals to link all authors with departments (e.g. Mark Ly¹).

d) Text

In general "structured" abstracts (see example) convey information more economically and succinctly. The first sentences should state explicitly the rationale, aims, goal or purpose of the study. If using abbreviations, give the full term, with the abbreviation in parentheses. Universally recognised abbreviations (e.g. FEV1, etc, see accompanying Table of Approved Abbreviations) need no explanation. Do not use non-standard abbreviations in the title of the abstract. Abbreviations for microorganisms should follow standard scientific notation, ie. the first letter of the genus in capitals followed by the species name in lower case. (eg. *P. aeuruginosa*). By convention, the entire abbreviation is printed in Italics or underlined.

If using headings such as Results, Methods, Conclusion, these words should be bolded. Start each section on a new line.

e) Methods

A concise description of the methods should follow. The details of this depend on the originality of the technique or approach used. Abstracts without methodological details are regarded as deficient.

Guidelines

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f) Results

Results should be provided in a quantitative manner in adequate detail. In some cases a small table may be a useful means of presentation (maximum of one per abstract without title or legend). Statements such as “The results will be discussed” are not acceptable.

g) Statistics

Use the following format: x(y (state whether SEM or SD); n=z, p=q; eg. 60(6 (SEM) (n=10, p<0.05).

h) Conclusions

The Conclusions should be clearly stated and must be referable to the results provided.

i) Grant Support

The grant support should be briefly stated at the bottom of the abstract.

j) Declaration of Interest Statement

All abstracts must be accompanied by a Declaration of Interest on the prescribed form. No abstracts will be accepted without this declaration.

k) References

References are generally unnecessary, but if required should be limited to a maximum of 3, numbered in the text and listed immediately below the text (within the specified area) in the following sequence: Authors, Journal, Year, Volume, First and Last pages.

l) Nominate a SIG

All abstracts **must** have a nominated SIG. This will be the SIG corresponding to the content of your abstract. There is a list of SIGs on the Official Abstract Form. Please tick the box most appropriate for your abstract. All abstracts must be nominated to a SIG.

m) Nomination for Ann Woolcock YIA

You must indicate your intention to nominate for the Ann Woolcock Young Investigator Award (see example) on the Abstract Submission Form.

n) Approved abbreviations

FEV1	– one second forced expiratory volume
FVC	– forced vital capacity
TLC	– total lung capacity
FRC	– functional residual capacity
PD20	– provocative dose for 20% fall in.
PC20	– provocative concentration for 20% fall in.
PaO ₂ , PaCO ₂	– arterial partial pressure of oxygen, carbon dioxide

Units of measure should conform to current scientific usage and can be abbreviated when they follow a number (eg. cm, ml, g, mg, nmol, °C). Unusual units should be defined in full.

POSTER PRESENTATIONS

Poster presentations are a common method of presenting data at international and national meetings. The main advantage of a poster presentation is that it allows the author to interact directly with interested members of the audience. The ability to present complex methodology and all of the data at one time allows for the presentation of complex and difficult material. This format can be extremely useful for the author to gain information from the audience.

Poster presentations are most appropriate when:

- Material presented is complex
- Subject matter is highly specialised catering to a smaller proportion of the audience
- Feedback from informed members of the audience is desired
- Comparisons between studies on the same topic are desired

Poster presentations are not an inferior form of presentation compared to an oral communication.

Sample of completed abstract

T-CELL PROLIFERATIVE RESPONSES TO MITE ALLERGENS ARE DETECTABLE IN MOST INDIVIDUALS REGARDLESS OF ATOPIC STATUS AND AGE

John Upham^{1,2}, Barbara Holt¹, Wayne Thomas¹, Paul O'Keefe^{1,3}, Lyle Palmer^{1,3}, Peter LeSouef, Peter Sly^{1,3}, Bruce Robinson¹ & Pat Holt¹

¹*Institute for Child Health Research, Perth WA 6008 and Departments of ²Medicine and ³Paediatrics, University of Western Australia, Nedlands, WA 6009*

It is widely held that in-vitro T-cell responses to allergens are considerably more prominent in allergic than in normal individuals, though this view is based upon culture techniques which fail to detect responses in up to 50% of allergic individuals. Our recent finding that allergic-specific T-cell proliferation is enhanced using specific serum-free medium (SFM) prompted us to re-examine this question and also to compare responses in adults and children.

Methods: Cross-sectional study of 34 adults (20-49years), 27 children (2-13 years) and 19 infants (10 weeks) recruited from the community. Blood mononuclear cells were cultured in SFM with whole mite. Der p1, Der p2 and tetanus toxoid, and proliferation assessed by ³H-thymidine incorporation.

Results: T-cell proliferation on response to mite allergens was detected in >90% of adults, and furthermore, the magnitude of these responses was similar in mite-allergic and non-mite-allergic subjects. Proliferative responses to mite were also present in 89% of children and 63% of infants ($p<.03$, infants vs adults), though these responses were significantly smaller in magnitude than in adults. In contrast, tetanus toxoid-specific proliferation was absent in all infants, but was observed in 56% and 57% of adults and children respectively ($p<.001$, infants vs adults/children).

Conclusions: The extent of T-cell "recognition" of ubiquitous allergens may have been hitherto underestimated. In addition, it appears that T-cell proliferative responses to mite begin to evolve very early, and subsequently become almost universal in later life. Moreover, our findings support the hypothesis that qualitative (as opposed to quantitative) variations in specific T-cell responses are associated with the allergic phenotype.

Supported by the NHMRC

Nomination: Ann Woolcock Young Investigator Award

Conflict of Interest: YES

NB: DO NOT INCLUDE AN OUTLINE BOX ON YOUR SUBMITTED ABSTRACT

The sample above is to show correct formatting only and is not to scale.

INSTRUCTIONS FOR SUBMITTING ABSTRACTS

- To ensure that the final abstract meets the required page layouts, set the document margins on your computer as follows:

Left	4 cm
Right	4 cm
Top	2 cm
Bottom	12.5 cm

The abstract must be set in portrait format.
- Please use Arial or Times New Roman font.
- Font size should be 11 points or greater.
- Complete and submit the Abstract Submission Form. No abstracts will be considered unless this form is submitted – either by electronic submission or by mail.
- Please submit your abstract as an MS Word 2000 document. If you use a later version, please submit as an RTF (rich text format) file.
- Please name the email attachments as follows:
First authors surname+initials+.doc
eg burdonj.doc
- If you are the first author on more than one abstract, please number the email file as follows: eg burdonj1.doc, burdonj2.doc, etc. etc.

ALL ABSTRACTS MUST BE SUBMITTED ELECTRONICALLY

<http://www.thoracic.org.au/asm2008onlineabstracts.php>

Failure to comply with these instructions will result in rejection of your abstract.

Abstract Submission Form

(Incorporating Declaration of Interest)

All abstracts must be submitted electronically using the online submission form at
<http://www.thoracic.org.au/asm2008onlineabstracts.php>

All sections of this form must be completed.

If you are submitting more than one abstract, a form must be completed for each abstract.

1. CONTACT DETAILS FOR PRESENTING AUTHOR

Title (e.g. Prof, Dr, Mr, Mrs, Ms, Miss)

Family name: First Name:

Department:

Organisation:

Postal Address: Post Code

Telephone: Facsimile: Email:

2 ABSTRACT DETAILS:

Title:

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Name of email attachment:
(see instructions regarding naming of files)

Is the abstract a systematic review? [] Yes [] No

Preferred type of presentation [] Oral [] Poster

3. NOMINATED SPECIAL INTEREST GROUP (SIG) - PLEASE TICK ONE BOX ONLY

- | | |
|--|--|
| <input type="checkbox"/> Asthma/Allergy | <input type="checkbox"/> Physiotherapy |
| <input type="checkbox"/> Cell Biology/Immunology | <input type="checkbox"/> Primary Health Care |
| <input type="checkbox"/> COPD | <input type="checkbox"/> Rural & Regional |
| <input type="checkbox"/> Cystic Fibrosis | <input type="checkbox"/> Respiratory Infectious Diseases |
| <input type="checkbox"/> Lung Cancer | <input type="checkbox"/> Respiratory Molecular Genetics |
| <input type="checkbox"/> Occupational & Environmental Lung Disease/Population Health | <input type="checkbox"/> Respiratory Nurses |
| <input type="checkbox"/> OLIV (orphan lung disease, lung transplantation, interstitial lung disease, pulmonary vascular disease) | <input type="checkbox"/> Sleep and Physiology |
| <input type="checkbox"/> Paediatrics | <input type="checkbox"/> Tobacco Control |

4. NOMINATING FOR ANN WOOLCOCK YOUNG INVESTIGATOR AWARD

[] Yes [] No

If this abstract is to be considered for the Ann Woolcock YOUNG INVESTIGATOR AWARD, it should be accompanied by an extended 800 word abstract for consideration by the Selection Committee (refer to Guidelines on the TSANZ website), and a statement confirming the role of the researcher in the work to be presented from the applicant's supervisor/head of department should accompany the application.

Abstract Submission Form

(Incorporating Declaration of Interest)



5. NOMINATING FOR APSR EARLY CAREER DEVELOPMENT AWARD

Yes No

If this abstract to be considered for the Asian Pacific Society of Respiriology (APSR) Early Career Development Award, it should be accompanied by a CV not exceeding three A4 pages (including publications). Please see TSANZ website for eligibility and other criteria.

6. NOMINATING FOR AUSTRALIAN LUNG FOUNDATION COPD TRAVEL AWARD

Yes No

Nominating for Australian Lung Foundation Travel Grant for Best Abstract on COPD by an Early Career Researcher?

Applicants are requested to check the eligibility and judging criteria for this award at www.lungnet.com.au/healthcare_profs/grants-awards.html

7. DECLARATION OF INTEREST

It is the policy of The Thoracic Society of Australia and New Zealand that any real or perceived conflict of interest for a conference participant must be disclosed. For this purpose, a real or apparent conflict of interest is defined as having a significant financial interest in a product to be discussed directly or indirectly during the presentation, being or having been an employee of a company with such financial interest, and/or having had substantial research support provided by an industry to support the product to be discussed at the presentation.

Declarations of interest will be kept at the Secretariat at the Annual Scientific Meeting. Abstracts will not be considered for presentation unless accompanied by a declaration of interest. Any conflict of interest should also be noted at the end of the abstract (refer to example).

I/We had a conflict of interest with respect to this paper. Yes No

I/We have the following real or perceived conflict of interest that relates to this presentation. (If more space is required please append).

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Please print name

Signature Date

ALL ABSTRACTS MUST BE SUBMITTED ELECTRONICALLY
<http://www.thoracic.org.au/asm2008onlineabstracts.php>

If your abstract contains scientific symbols, tables or figures, please also send a pdf version or mail a hard copy to the Secretariat

TSANZ 2008 ASM Secretariat
C/- Festival City Conventions
Postal Address: PO Box 949, KENT TOWN SA 5071 Australia
Street Address: 8 George Street, STEPNEY SA 5069 Australia

All abstract submissions must be received by the close of business on **29 October 2007**