



2021 Call for Abstracts

Diabetes Canada and the Canadian Society of Endocrinology and Metabolism (CSEM) Professional Conference will be held virtually from November 24-26, 2021. The Diabetes Canada/CSEM Program Committee invites abstract submissions for consideration.

The 2021 guidelines contains the following sections:

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Submission Fees

For the 2021 abstract submissions, Diabetes Canada/CSEM is offering an early bird rate until May 19, 2021 where the administration fee for each submission is **\$25**.

After May 19, a fee of **\$45** will be charged for each submission. All abstracts must be submitted by 11:59 p.m. EST on June 2, 2021, as there will be no deadline extension.

The submission fees are non-refundable. Payment must be made by credit card. Major credit cards (American Express®, Visa® and MasterCard®) will be accepted for the secured online payment. **The abstract will not be considered if the fee has not been paid by the submission deadline.**

Please note, the abstract submission fee does **NOT** include registration for the conference. Registration must be done separately.

Expenses associated with the submission and presentation of the abstract are not the responsibility of the Diabetes Canada/CSEM Professional Conference.

Please note, only completed abstracts will be accepted.





Deadlines

- ABSTRACT SUBMISSION OPENS MARCH 24, 2021
- ABSTRACT SUBMISSION EARLY BIRD DEADLINE- MAY 19, 2021
- ABSTRACT SUBMISSION CLOSES JUNE 2, 2021

Selection Criteria

Abstracts will be judged on originality of work, adequacy of data, and clarity of exposition. Please make abstracts as informative as possible, including a brief statement of the purpose of the study, methods, results and conclusions based on the results. Actual data should be included in the abstract. Statements such as "results to be discussed" or "data will be presented" are not sufficient and will result in rejection of the abstract. Graphs and tables must be simple and easily interpreted. They also must be of high enough resolution for printing on a large poster format.

Encore Presentations

Abstracts accepted at other national and international conferences in 2021 may be submitted to the 2021 Diabetes Canada/CSEM Professional Conference for consideration. You must:

- Indicate the submission as an encore presentation.
- Include the name of the meeting and date on which the paper was originally presented.
- Please note, encore presentation submissions will be screened under the same criteria as other contributed papers.

Note: Abstracts must not have been published as a manuscript or an abstract prior to the Diabetes Canada/CSEM Professional Conference (November 23-26, 2021).

Embargo Policy

Diabetes Canada's embargo policy for submitted abstracts for the Canadian Journal of Diabetes (CJD):

- Accepted abstracts for CJD may not be published, broadcasted, posted online or placed in the public domain before the embargo date and time. In 2021 all accepted abstracts are embargoed until the posted embargo date and time.
- Abstract authors can present their findings of their submitted papers with experts for comment and at professional meetings to colleagues, but should be clearly





identified as embargoed and include the embargo date and time. It is the authors' responsibilities to ensure embargo policies are honoured by third parties. Should an author be planning to make such a presentation, we ask the author to inform Diabetes Canada of those intentions.

- The press may not distribute embargoed materials in the public domain before the embargo date. However, embargoed materials may be distributed to the media by press officers up to seven days before the embargo date. Press releases must be clearly identified as embargoed and must include the embargo date and time. It is the press officer's responsibility to ensure embargo policies are honoured by third parties.
- Participation in news conferences is open after the posted embargo date and time.

Should you have any questions about the embargo policy, please contact Diabetes Canada's Professional Conference team at <u>professional.conference@diabetes.ca</u>. A full statement of the policy is emailed to authors upon acceptance of their abstract for publication in CJD.

Authorship Requirements

There is no limit to the number of abstracts an author may submit; however, an author may only serve as a presenting author on two submissions. It is the author's responsibility to designate a separate presenter for scheduling conflicts that arise due to multiple submissions. If accepted, the presenter **must** be a co-author listed on the abstract at the time of submission. The author listed first in the author block is referred to as the first author and does not have to serve as the presenting author. The corresponding author will receive notification of abstract status. Should the corresponding author prefer, a different email address may be submitted for abstract correspondence and notification of abstract status. An author can be the first, corresponding, and presenting author. Please check off all that apply during abstract submission.

Abstract Reviewing Streams

Abstracts will be reviewed from two streams:

- Diabetes Canada: Clinical Practice and Research (e.g. basic science, clinical, metabolism etc.) and Diabetes Education (e.g. pregnancy, education, health-care delivery and case series etc.)
- CSEM (e.g. hypothalamus and neuroendocrinology etc.)- completed research projects or clinical series

Abstract Review Categories





From the abstract categories listed below, please select a category under which you would like to have your abstract reviewed. The Diabetes Canada/CSEM Professional Conference Program Committee reserves the right to move an abstract that has been inappropriately categorized without notifying the author(s).

Review Categories

Choose which stream is more appropriate:

Diabetes Canada OR CSEM

Choose all that apply (to a max of 3):

Basic Research: basic physiological or molecular biological research, e.g. using cell cultures or animal models

Clinical Research: endocrine/diabetes research focused on specific disease states, e.g. evaluation of diagnostic techniques or therapies

Case Series: interesting, challenging, new or informative clinical cases in endocrinology/diabetes care

Quality Improvement: systematic analysis of practice and performance improvements related to endocrine/diabetes care and management

Education: new or improved approaches and techniques for teaching and learning on endocrine/diabetes topics

Health-Care Delivery: innovative methods or approaches for improving health-care of patients with diabetes/endocrine conditions

***Case Series:** Case series may be submitted to the Diabetes Canada stream for consideration.

The chosen submissions for the case series will be presented as an oral session at the conference.

Case Series will be selected based on the following:

Originality of report, adequacy of data, and clarity of exposition are the determinants in the selection of case series. These should be as informative as possible using the following format:

a. Introduction: This consists of one or two sentences to describe the context of the case.

b. Case presentation: Several sentences to describe the history and results.

c. Management and Outcome: Simply describe the course of the patient's journey. Where possible, refer to any outcome measures which you used to objectively demonstrate how the patient's condition evolved through the management. Include any strategies used to facilitate self-management education and support.

Character Count and Writing Standards





Abstracts are limited to **250 words**, not including spaces. The abstract title, body and tables count toward the word limit. Abstracts can have a maximum of two tables and/or images. Graphs and tables must be simple and easily interpreted. They also must be of high enough resolution for printing on a large poster format.

Abstracts are published as submitted. Please proofread your work carefully to avoid

errors. All abstracts must be written in English with accurate grammar and spelling. Abstracts **WILL NOT** be edited by Diabetes Canada/CSEM Professional Conference staff. Typographical and grammatical errors will appear as submitted. Revisions or corrections to abstracts will not be permitted once abstracts are accepted.

Abstracts must adhere to the following format:

- The first letter of major words in the title should be capitalized.
- Author(s) first name and last name should be listed in all caps. Authors with multiple abstracts should list their names the same way on all abstracts.
- All abstracts must be submitted in both blinded and unblinded formats. For the blinded format, identifiers such as city, province or institution name should not be included within the title or body of the abstract. This ensures that both the reviewers and the authors are concealed to allow a fair review process.
- The use of standard abbreviations is required. Examples include kg, g, mg, mL, L, meq, m, mmol/L and %. Abbreviated terms should be expanded at first mention with the abbreviation in parentheses. The abbreviation can then be used throughout the rest of the abstract. Use numerals to indicate numbers, except when beginning sentences.
- Language can have a profound impact on the lives of people with and at risk for diabetes. Inappropriate language has a negative impact on self-efficacy, well-being and confidence which can seriously undermine experiences with health-care providers and, more broadly, can contribute to diabetes stigma. We encourage you to use language that is consistent with <u>Diabetes Canada's consensus statement</u> which was published earlier this year. Specifically, we would like to draw your attention to <u>this table</u> presented in the statement. It outlines phrases and words to avoid using and appropriate replacements to promote and help guide the use of inclusive, equitable and value-based language in diabetes clinical practice, healthcare and research settings. We hope that greater attention to the language used when speaking of diabetes will contribute to enhancing public understanding of diabetes and its complications, decreasing the stigma, and stereotypes and prejudices associated with it.
- Following the <u>National Standard of Support for Accredited CPD Activities</u>, it is required that any description of therapeutic options utilize generic names and not reflect exclusivity and branding.





- Special symbols may be included.
- The Diabetes Canada/CSEM Professional Conference Program Committee will consider presentation preferences. An abstract marked as "Only" indicates that the authors do not want the abstract considered for any other type of presentation. If an abstract is marked as "Oral Only" and is not selected for an oral presentation, the committee will not place it in a poster session. Marking an abstract as "Oral Only" will not guarantee its selection for the program.
- All author(s) must complete the conflict disclosure form included on the site.
- If the research presented in the abstract has been supported, in whole or in part, by a grant from Diabetes Canada, please indicate so by checking the appropriate box. Accepted abstracts with Diabetes Canada funding will be highlighted in the conference program. Responses provided to this question will not affect the acceptance of the abstract.
- Abstracts should be written and submitted by physicians, researchers or healthcare professionals. Abstracts submitted by pharmaceutical companies with employees as principal authors and/or co-authors WILL NOT be accepted. Research funded by industry that has been approved by a Research Ethics Board, and for which the principal author is not an employee of the funding company, will be accepted for review.

If you have questions about completing the abstract form, contact the Coordinator, Professional Conference and Events at <u>professional.conference@diabetes.ca.</u>

Abstract Rejection Criteria

Abstract will be rejected if:

- Abstract did not conform to instructions.
- Abstract lacks data or includes inconsistent/ambiguous data.
- Abstract is not well-organized, information is dated, the importance of the topic is not clear, discussion of study results is vague or conclusion is not supportable based on the data presented.
- Clinical research did not abide by the <u>Tri-Council Policy Statement: Ethical Conduct</u> for Research Involving Humans

The final decision with respect to selection, programming and/or publication of any abstract will be made by the Diabetes Canada/CSEM Professional Conference Program Committee.

Submission Methods





Upon successful submission using the online abstract submission website, the corresponding author (and additional email address if provided) will receive an acknowledgement of receipt. Please email Sujena Sukumar at <u>professional.conference@diabetes.ca</u> if you did not receive your email confirmation within 48 hours after submitting your abstract.

Changes to abstracts can be made before deadline **June 2, 2021**. A link to your profile will be posted in your confirmation email.

Abstract Status

The final decision with respect to selection, programming and/or publication of any abstract will be made by the Diabetes Canada/CSEM Professional Conference Program Committee.

A letter of notification of the abstract status and appropriate accompanying materials will be sent by email to the presenting author in **early July 2021.**

- **Oral Presentation:** Oral presentations are 10 minutes in length for the Diabetes Canada stream and 5-10 minutes for the CSEM stream (exact length TBC). Those selected for an oral presentation will receive guidelines and presentation details (date/time) in their acceptance letter. Presentations will be pre-recorded and uploaded onto Cadmium. A live Q&A session will take place during the conference in which presenting authors must be available to answer questions from delegates.
- Poster Presentation: Posters will be displayed for the duration of the conference in the virtual poster hall. Those selected for a poster presentation will receive guidelines and poster hall details in their acceptance letter. A PDF of the poster and a audio/video summary of the findings must be uploaded onto Cadmium prior to the conference. The presenting author must login throughout the duration of the conference to answer questions from delegates that will appear in a chat box that is connected to the respective posters. CSEM posters must be a one-page poster PDF and a 5-minute, narrated powerpoint (we encourage video but audio is acceptable). To be considered for CSEM trainee award, poster presenters must be available during the scheduled poster judging time (TBD).

CSEM Abstract Trainee Awards

Every year, the CSEM offer a number of awards to honor its contributions of their members to research, leadership, teaching and service to the Canadian endocrine





community. Accepted abstracts to the 2021 Diabetes Canada/CSEM Professional Conference are eligible for the following awards:

NEW for 2021! Quality Improvement Award:

One \$500 honorarium and certificate will be awarded to the trainee who presents the highest ranked oral or poster quality improvement project at the DC/CSEM Professional Conference.

Dr. John Dupré Award:

Two \$500 honoraria and certificates will be awarded to the trainees who present the two-highest ranked oral or poster clinical research projects at the DC/CSEM Professional Conference.

Dr. Charles Hollenberg Award:

One \$500 honorarium and certificate will be awarded to the trainee who presents the highest ranked oral or poster basic science/translational research project at the DC/CSEM Professional Conference.

Eligibility:

- 1. Accepted abstract to the 2021 Diabetes Canada/CSEM Professional Conference.
- 2. Presenting author is identified as a trainee and credentials provided from the abstract submission platform.
- 3. Presenting author agrees to be considered for the above-mentioned awards by clicking a checkbox on the abstract submission platform.
- 4. Presenting author must be a CSEM Resident or Research Associate Member (Free Join at <u>https://csem.wildapricot.org</u>).

All abstract submissions must conform to the abstract guidelines.