

ABSTRACT GUIDELINES

In order for your presentation to be considered, abstract guidelines must be followed as closely as possible. Please ensure that the presenting author completes the abstract submission. Abstracts must be submitted by the deadline of **Sunday 29 May 2016, 11pm AEST**.

Authors should state a preference for *oral* or *poster* presentation, and address the abstract to one of the conference themes below.

CONFERENCE THEMES FOR PRESENTATIONS

Includes themes of: Theme A, Theme B, Theme C and Theme D. Clarification of each theme is below.

Abstract submissions are encouraged from and about groups most affected by HIV and related infections including but not limited to:

- Aboriginal and Torres Strait Islander and Global Indigenous Populations
- People living with HIV (PLHIV)
- Gay and MSM
- Culturally and linguistically diverse populations
- Women
- Children and young people
- People who inject drugs
- Sex workers

Theme	Explanation
Theme A: Understanding and identifying HIV and related infections: Basic Science, Biology and Pathogenesis. This theme explores fundamentals of HIV and laboratory based research and practice. Areas of focus include the translation of basic research to clinical and laboratory based practice in Australia and the Region.	<ul style="list-style-type: none"> • Mechanisms of viral replication • Viral diversity and bioinformatics • Virus – host interactions in productive or restricted infection • Viral latency and reservoirs • Immunology and pathogenesis • Biomarkers of disease outcome • Drug development • Vaccines (therapeutic and prophylactic) • Immune-based therapies • Microbicides • Gene therapy • Diagnostics • Affected community perspectives on research

<p>Theme B: Managing HIV and related infections: Clinical management and the lived experience of HIV.</p> <p>This theme highlights the clinical management of HIV, through presenting latest research findings relating to the diagnosis and treatment of HIV and the experience of living with HIV in Australia and the Region.</p>	<ul style="list-style-type: none"> • Natural history, course of infection and disease • HIV-associated diseases and related infections • Antiviral therapy and its complications • Clinical trials for vaccines and immune-based therapies • Delivery of care • Workforce issues and professional practice • Costing and economics studies • Affected community perspectives on clinical practice • HIV Testing - Point of Care testing, Home testing, Testing Hard to reach populations • Cascade of Care - Linkage to Care, Retention in Care • Treatment as Prevention • Prevention Strategies
<p>Theme C: Preventing HIV and related infections: Epidemiology and Prevention in Australia and the Region.</p> <p>This theme explores the range of prevention initiatives from behavioural and social research to biomedical and includes epidemiological and surveillance research aimed at understanding HIV for prevention purposes in Australia and the Region.</p>	<ul style="list-style-type: none"> • Epidemiology of HIV disease • Surveillance, Monitoring and Estimates • Social and behavioural research to prevent HIV transmission • Community education and prevention strategies • Prevention programmes and campaign evaluation • Health promotion • Costing and economics studies • Affected community perspectives on prevention
<p>Theme D: Policy, Politics and Cultural issues of HIV and related infections in Australia and internationally.</p> <p>This theme examines issues and experiences specific to populations affected by HIV. Papers submitted for this theme will have a population dimension and will include country specific sessions which might cover a range of research areas, including social research, health and community advocacy.</p>	<ul style="list-style-type: none"> • The politics of HIV • Human rights • National programs and policy • Cultural and social issues • Stigma and discrimination • Vulnerability and risk • Criminalisation • Ethical issues • Implementation research • Regional issues - Country specific research • Enabling environments and human rights • HIV and mobility • HIV in low prevalence settings • Affected community perspectives

PRESENTATION TYPE

Presentation Type	Time Allocation	Explanation
ORAL PRESENTATIONS	12 minutes presentation and 3 minutes question time	Oral presentations may be original research, case presentations, divisional projects or analytical studies. Where possible, presentations with a similar theme will be grouped together.
POSTER PRESENTATIONS	Permanently displayed during the Conference	Posters can present research in progress, case studies, divisional projects or clinical topics. A poster viewing session will take place on Thursday evenings at the conference for delegates to discuss the posters with their authors.
CASE PRESENTATION BREAKFAST	12 minutes presentation and 3 minutes question time	These presentations will take place in the case presentation breakfast.
EDUCATIONAL EXHIBIT, RESOURCE or COMMUNITY PROGRAM	To be displayed in the conference venue	Work that would be more effectively displayed as an exhibit or resource rather than a poster or presentation which could use multi-media.

ABSTRACT PREPARATION GUIDELINES FOR ALL PRESENTATIONS

All abstracts must:

- Use Arial 12 point type only
- Use single spacing only
- Format - Microsoft Word (.doc) file only
- Leave one line between paragraphs
- Specify all abbreviations in full at the first mention, followed by the abbreviation in parentheses, thereafter abbreviation only should be used
- Be written in English
- Check abstract thoroughly for spelling and grammar
- Do not include references

All abstracts must include:

TITLE: in **BOLD** at the top of the abstract

AUTHORS:

- Principal author to appear first
- Underline the name of the author who will be presenting the paper
- Use surname followed by initials (do not use full stops or commas between surname and initials)
- Omit degrees and titles
- Include affiliations for each author. Use superscript numbering *after* the author's name to indicate affiliations

BODY OF ABSTRACT: maximum 300 words, with following headings:

- **Background:** study objectives, hypothesis tested, or description of problem
- **Methods:** method used or approach taken
- **Results:** in summarised form, must include data but do not include tables, graphs or pictures
- **Conclusion:** description of main outcomes of the study. Include knowledge or insight that conference attendees will gain from the presentation, explanation of how conference attendees can apply the skills and/or knowledge within their communities and how the study contributes to evidence-based knowledge

Note: If the body of the abstract is more than 300 words it will be sent back to be revised. A sample abstract is available on the website. The 300 is not inclusive of the disclosure of interest.

DISCLOSURE OF INTEREST STATEMENT:

The Australasian Society for HIV Medicine recognises the considerable contribution that industry partners make to professional and research activities. We also recognise the need for transparency of disclosure of potential conflicts of interest by acknowledging these relationships in publications and presentations.

For an example of a disclosure of interest statement please see below

The Melon Institute and Metabolism Corp are funded by the University of Oxbridge, UK. No pharmaceutical grants were received in the development of this study.

Note: If accepted into the program you will be requested to include a disclosure of interest slide into your presentation or include such statements in your poster.

SELECTION CRITERIA

Abstracts will be favoured at review if they incorporate

- Original data of high quality.
- And/or
- An analysis that extends existing knowledge

In balancing the program the committee may require authors to present their work in an alternate format (e.g. as a poster rather than oral presentation).

Note: We encourage abstracts based on Indigenous issues be presented by Indigenous persons, or an Indigenous co-presenter be included. If this is not possible, please include some information as to whether any member of the indigenous community in which the research is based was involved in development of the research protocol or in conducting the research.

ABSTRACT SUBMISSION

Abstracts must be submitted electronically through the online abstract submission site. You will be required to enter:

- Preferred theme
- Preferred presentation type
- Authors' names (indicate presenting author and contact details - address, telephone and email). Note: Abstract presenters will be required to fund their own attendance at the conference and should not submit an abstract if this is not possible. Scholarships are available and preference will be given to those who do submit abstracts, however authors should ensure they are able to fund their own travel if need be
- Authors' affiliations
- Abstract title
- Abstract as a word document (maximum 300 words) including a disclosure of interest statement
- Short biography of presenter (maximum 50 words). This information will be used by the session chair for introduction purposes and may be published in conference literature
- Special audio visual requirements

Please contact the Conference Secretariat if you are unable to lodge your abstract via the website or if you have any queries. By submitting an abstract all authors agree to release the licence to the Conference organisers and give permission to publish the abstract in the conference handbook and on the website and, in so doing, certify that the abstract is original work.

CONFERENCE REGISTRATION

Abstract presenters will be required to fund their own attendance at the conference and should not submit an abstract if this is not possible.

All presenters (including posters) will be required to register for the conference by **Sunday 11 September 2016**. It will be assumed that any presenter not registered by this date has withdrawn from the program and their abstract will be removed from the handbook.

Disclaimer: The committee may place your presentation within another theme while developing the best fit sessions.