INSTRUCTIONS FOR COMPLETING THE ONLINE ABSTRACT FORM - Oral/Poster

OVERVIEW

The 35th International Conference on Pharmacoepidemiology and Therapeutic Risk Management (ICPE 2019) is an exceptional forum for the presentation and exchange of scientific information from the fields of pharmacoepidemiology and therapeutic risk management among those in the pharmaceutical industry, government, academia, service providers, regulators, consulting firms, health insurers, and contract research organizations. The meeting is acknowledged widely as the preeminent global conference on pharmacoepidemiology and therapeutic risk management. The agenda will be a combination of invited lectures, submitted research abstracts, posters, symposia and workshops - together representing the current state of practice and knowledge in these dynamic disciplines. ICPE 2019 will be held at the Pennsylvania Convention Center, Philadelphia, Pennsylvania, August 24 – 28, 2019.

Please visit the ISPE website (www.pharmacoepi.org) for information about the ICPE 2019, scholarships, hotels, and registration as it becomes available.

INVITATION TO PRESENT YOUR RESEARCH

The International Society for Pharmacoepidemiology (ISPE) is an international professional society dedicated to advancing the health of the public by providing a forum for the open exchange of scientific information and for the development of policy, education, and advocacy for the field of pharmacoepidemiology, including such areas as pharmacovigilance, drug utilization research, comparative effectiveness research, and therapeutic risk management.

You are invited to submit an abstract(s) for presentation at the ICPE 2019. Abstracts will be accepted for an oral/poster presentation or for a symposium/workshop. Abstracts are encouraged on research consistent with ISPE Special Interest Groups (SIGs): Adherence; Asian Pharmacoepidemiology Network (AsPEN); Benefit Risk Assessment, Communication and Evaluation (BRACE); Biologics and Biosimilars; Comparative Effectiveness Research (CER); Databases; Digital Epidemiology; Drug Utilization Geriatric
Results that have been published (except in abstract form) either on-line ahead of print, or in printed version before January 1, 2019 are not eligible for submission. Results that have been presented at meetings of other scientific societies are eligible for presentation, provided they have not been published (except in abstract form) either on-line ahead of print, or in printed version before January 1, 2019. All abstracts accepted will be published online in *Pharmacoepidemiology and Drug Safety*, ISPE’s official journal.

**A. GUIDE FOR ORAL OR POSTER PRESENTATION**

An oral or poster presentation represents original research that is presented as either a 10-minute podium talk or as a poster. Poster presentations also may be considered for 3-minute oral presentation as part of a Spotlight Poster Session.

The total time allocated for each oral presentation is 15 minutes, which includes 10 minutes for the presentation and 5 minutes for discussion.

The following will provide basic guidance regarding the expected content of the structured abstract for an oral or poster submission.

**Background:** One or two sentences that describe the clinical (or other) importance of the study question.

**Objectives:** The main objective(s) or study question should be explicitly stated (e.g., “To determine the rate of”). If study was to test an a priori hypothesis, it should be stated.

**Methods:** Should include statements that address:

1. **Design:** Basic study design, source population, follow-up; For new analyses of existing data the dataset should be disclosed; statement of criterion standard if study of screening or diagnostic test and any blinding; analysis type (e.g., cost-effectiveness, cost-benefit, etc.) if an economic analysis. Matching and selection of controls, if relevant, also should be included.

2. **Setting:** To assist readers in determining the relevance of the findings to their own circumstances, the setting or source population should be described including statements regarding generalization to a larger or more representative population. This may include eligibility, inclusion/exclusion criteria, and for surveys and follow-up studies should include the number eligible versus the number/proportion remaining in the analysis.

3. **Exposures or interventions:** explicit naming of medications or other interventions. Nonproprietary names should be used.

4. **Main outcome measures:** the primary and secondary outcome measurement(s) as determined prior to data collection. If hypothesis was formulated after data collection, this should be stated.

5. **Statistical analysis:** The statistical methods should be described.

**Results:** The main outcomes of the study should be provided and quantified, including confidence intervals and/or other significance tests. If differences are not significant, the clinically important
difference sought should be stated and the confidence interval for the difference between the groups should be given. When risk changes or effect sizes are reported, absolute values should be included so that the reader can determine the absolute as well as relative impact of the result. Screening and diagnostic test studies should report sensitivity, specificity, and likelihood ratio and if predictive value or accuracy is given, prevalence or pretest likelihood should be provided.

Conclusions: Only those conclusions that are directly supported by the reported data should be provided, along with their implications (avoiding speculation and overstatement of findings). Emphasis should be given equally to positive and negative findings of equal scientific merit.

B. DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST

All presenters must disclose financial and any other interests of each author that may pose a conflict of interest or the appearance of a conflict of interest. A sample disclosure slide/form will be posted on the ICPE 2019 home page.

C. ABSTRACT SELECTION AND PRESENTATION

All abstracts will be evaluated by volunteers from the general ISPE membership. We seek to have at least 10 reviewers score each abstract. Abstracts are assigned to reviewers based on their topic preferences; the objective is to match abstract submissions and review preferences. The ISPE Scientific Program Committee will then review all abstracts considered for oral presentations at its meeting in Rome on April 7, 2019.

The final decision as to whether a presentation will be poster or oral will be made by the ICPE Scientific Program Committee. Only 216 abstracts will be accepted for oral presentations. There will be three distinct poster sessions – one each day of ICPE 2019.

ISPE will send two email notifications to submitters: [1] a general letter of acceptance or non-acceptance will be emailed soon after the Mid-Year Meeting (anticipate receipt by early May); and [2] a second letter with specific session/presentation details will be emailed after the agenda is set (anticipate receipt by mid June).

If an abstract is accepted for presentation, one author or the author's designee must attend the conference to present the abstract to have it published in the conference program. All presenters are required to pay the conference registration fee upon acceptance of the abstract. All presenters, panelists and moderators must register to attend the ICPE. Presenters not registered by the Early Bird Deadline will be removed from the Final Program. Presenters are responsible for making their travel arrangements and paying their travel and lodging expenses.

Additional information is available in Appendix D of the Abstract Processing Procedures document available by clicking HERE.

D. NEWCOMER TRACK - Deadline: January 12, 2019

The ICPE 2019 Scientific Program Committee offers a Newcomer Track for researchers submitting for the first time to the International Conference on Pharmacoepidemiology and Therapeutic Risk Management (ICPE), regardless of native language or country of origin. The Newcomer Track includes useful information for preparing scientific abstracts. Researchers are encouraged to review these materials posted in the form of a manuscript, slide presentation, and YouTube video prior to submitting their draft abstracts.
Researchers will receive feedback from a reviewer and will have the opportunity to revise/resubmit their abstract before the February 13, 2019 deadline. Abstracts will be reviewed between mid-December and January 12. Early submission is encouraged to provide sufficient time for review and revision of the abstract. Abstracts submitted after the January 12 Newcomer Track deadline will automatically go through the standard abstract review process.

All abstracts, regardless whether they have been reviewed previously in the Newcomer Track, must go through the standard ISPE review and selection process.

E. AWARDS

1. Student Awards

To recognize and encourage excellence in the scholarship of pharmacoepidemiology among students, ISPE will grant several student awards, which will be presented at the ICPE. The Stanley A. Edlavitch Award is granted to the author of the best student abstract. Awards also are given for the second and third best student abstracts and the best methods abstract submitted by a student.

Eligibility:

a) Applicant must be enrolled as a full-time student at the time of this submission.

b) Applicant must be listed as the first author.

c) Applicant must be a major contributor to the work.

d) If the abstract is selected, applicant must make the presentation at the Conference.

*Awardees will be notified by email in May 2019.

2. Andrew McAfee Award

The Andrew McAfee Award commemorates a passionate teacher, drug safety researcher and long-time active participant and supporter of ISPE who died in a tragic accident in 2010. The award is granted to the best abstract submitted by a researcher or student currently living in a developing country.

3. John Snow Award

This award is granted to the best abstract submitted by a female researcher or student currently living in a developing country.

F. SCHOLARSHIPS - Deadline March 1, 2019

A limited number of scholarships will be available to assist with attendance at the ICPE 2019. Scholarships may be used for registration, lodging, and travel to the conference. Researchers from developing countries, those in genuine financial need, and students who otherwise would be unable to attend ICPE are invited to submit an application form. Scholarship applications can be found on the ISPE website (www.pharmacoepi.org). SUBMISSION DEADLINE: March 1, 2019. ISPE will notify applicants by email in May 2019. Please be aware that the scholarship submission, review and award process is independent from the abstract review and acceptance process. You must submit a scholarship application if you would like to be considered for scholarship assistance.
G. SPONSORSHIPS, EXHIBITS & ACADEMIC SHOWCASE

ISPE offers organizations, institutions, and academic programs opportunities to support the conference while sharing their products and services with conference attendees. A Conference Support Opportunities & Scientific Exhibition Prospectus is posted on the ISPE website. Contact the ISPE office (301-718-6500) with questions.

H. GENERAL MEETING INFORMATION

Meeting, hotel, registration and travel information will be posted on the ISPE website (www.pharmacoepi.org). This information will be updated over the coming months. Contact the ISPE office (info@pharmacoepi.org) or (301-718-6500) if you have questions.

ONLINE SUBMISSION NOTES

• You can log off at any time and return to continue your abstract submission work any time prior the submission deadline.
• All abstracts must be complete by the submission deadline. Any abstract that has an “Incomplete” status will not be included in the review process nor included in the program for the meeting.
• Verify that your abstract is correct and complete by clicking “Review My Work”. Please review your abstract submission to ensure the information is complete and accurate. Once the submission site closes, no further edits will be allowed.
• If you give your ISPE member username and password to another person, they will have access to edit all abstracts you have submitted for review/consideration.
• If you submit an abstract on behalf of an author, only you will have access to edit the submission until the deadline.
• All notifications are sent to the presenting/contact author.
• The character count for the abstract is 2,350 characters (spaces are not counted). This includes characters in the following: Abstract Title and Abstract Body, and also includes the following required headers, Background, Objectives, Methods, Results, Conclusions.
• An application session will timeout after 2 hours.
• No Late-breakers will be accepted.
• Abstract Submission Deadline: Wednesday, February 13, 2019, 11:59 PM, CST