Guidelines for Preparing Abstracts: For Authors

General requirements:

1. Abstracts must be original and must not have been previously published elsewhere.
2. Abstracts should be submitted as a single Microsoft word file.
3. All abstracts will be reviewed by symposium scientific review committee and only accepted abstracts can be presented at the symposium.
4. All accepted abstracts for presentation at the symposium will be submitted to BioMed Central for publication in the journal, **BMC Infectious Diseases** (PubMed indexed) after peer-review by journal's editorial board. Therefore, the corresponding author should ensure that all named authors should agree to the submission of the abstract for publication.
5. Spellings within any one abstract should be either US English or UK English, but not a mixture.
6. Following specifications should be adopted: a) follow the use of single line spacing, b) type the text unjustified, c) font type Times New Roman and d) font size 12.
7. The word limit of the abstract main text should not exceed 250 words and this word limit excludes the title, authors and affiliations.
8. To be acceptable, abstracts shall contain a concise statement of the research. No tables, figures and references are allowed in the abstract.
9. Species names should be spelled out at first use and Italicize scientific names of organisms (eg. *Mycobacterium tuberculosis*).
10. The symposium secretariat and the journal BMC Infectious Diseases reserve the right to edit the abstracts.
11. Apart from regular research abstract, **Case Reports** are also invited with well-described reports of exceptional or unusual cases. Case reports should make a contribution to medical knowledge and must have educational value or highlight the need for a change in clinical practice or diagnostic/prognostic approaches.

Preparation of Abstracts:

Title: Use a short and concise title that indicates the content of the abstract. The title should be in **bold**, sentence case (no unnecessary capitalization) with no full stop at the end.

Authors: First name, middle initials if required, and surname with no full stop at the end. Corresponding author's name should be underlined. A comma should separate author names. Where authors are from a number of different institutions, the appropriate institution number from the affiliation list should be given as a superscript number immediately after each author's name, e.g.: John Smith[1], Susan Jones[2]

Affiliations: Affiliations should include department, institute, town and country. Where there are multiple affiliations, each should be listed as a separate paragraph. Each institute should appear in the order used against the author names (see above paragraph) and show the appropriate superscript number, e.g.:

[1] Department, University, Town, State, Post code, USA.

[2] Department, University, Town, State, Post code, UK.

The journal can include an email address for the corresponding author on the published abstract and this email address should be included after the affiliations and before main text.

Main text: Should not be more than 250 words. Greek and other special characters may be included. If you are unable to reproduce a particular special character, please type out the name of the symbol in full. SI units should be used throughout (litre and molar are permitted, however). If web link (URL) is used in the text, both the title of the site and the URL should be provided in the following format: Mouse Tumour Biology Database [http://tumor.informatics.jax.org/cancer_links.html]. Abbreviations should be used as sparingly as possible and

should be defined when first used. Each paragraph headings (Background, Methods, Results and Conclusion) should be typed in **bold** with no colon at the end as shown in the SAMPLE abstract.

Background

The context and purpose of the study.

Methods

How the study was performed and statistical tests used.

Results

The main findings in summary form and with enough data should be provided to permit evaluation by reviewers.

Conclusion

Summarize the findings and the conclusion should be your results driven. It is unacceptable to use statements such as "the results will be discussed".

SAMPLE ABSTRACT

A simple, low-cost and low-tech MODS assay for detection of TB and MDR-TB for use in resource-limited settings

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Background

The converging epidemics of HIV and TB pose one of the greatest public health challenges of our time. Rapid diagnosis of TB is essential in view of its infectious nature, high burden of cases and emergence of drug resistance. Optimal methods for identifying TB and drug-resistant TB in a timely and affordable way in resource-limited settings are not yet available. The purpose of this present study was to evaluate the feasibility of implementing the MODS assay, a novel assay for the diagnoses of TB and MDR-TB directly from sputum specimens, in the Indian setting.

Methods

This study involved a cross-sectional blinded assessment of the MODS assay on 1036 suspected cases of pulmonary TB in HIV positive and HIV negative patients against the radiometric method, BD-BACTEC TB 460 system.

Results

Overall, the sensitivity, specificity, PPV and NPV of the MODS assay in detecting MTB among TB suspected patients were 89.1%, 99.1%, 94.2% and 95.8%, respectively. In the diagnosis of drug resistant TB, the MODS assay was 84.2% sensitivity for those specimens reporting MDR with Kappa value of 0.85. The median time to detection of TB in the MODS assay vs. BACTEC was 9 vs. 21 days (p-value<0.001).

Conclusion

Costing 5 to 10 times lesser than the automated culture methods, the MODS assay has the potential clinical utility as a simple and rapid method. It could be effectively used as an alternative method for diagnosing TB and detection of MDR-TB in a timely and affordable way in resource-limited settings.