



2nd SAFETYNET Scientific Conference



Field Epidemiology in a Changing World: advancing health amidst the evolving ecosystem and technology

Call for Abstracts: 2nd SAFETYNET Scientific Conference

The 2nd SAFETYNET Scientific Conference will be held at the Intercontinental Kuala Lumpur, Malaysia from **September 22—26, 2025**.

Abstracts from current trainees and recent graduates (those who graduated or completed their training after January 2023) of applied or field epidemiology training programs (FETPs) of any tier (frontline, intermediate, advanced) in the Southeast Asia and Western Pacific regions may be submitted online at <https://auth.oxfordabstracts.com/?redirect=/stages/77149/submitter> from **December 15, 2024 to February 15, 2025**.

Abstracts on any epidemiological studies conducted between January 2023 and January 2025 are eligible for submission. All abstracts should be written in English. Each person is allowed only one abstract submission as primary author.

Note: All abstract submissions, whether of current trainees or recent graduates, should be submitted by the FETP Director, Coordinator, Program Manager, Training Officer/Master Trainer or Resident Advisor.

SAFETYNET will assign three qualified epidemiologists from our pool of abstract reviewers to review each submitted abstract. Abstracts will be considered as candidates for either oral or poster sessions. In order to provide opportunities to those who have not yet presented in an international conference, abstracts of studies which have not been previously presented in international conferences or accepted for publication or published in a peer-reviewed journal will be given preference. Once an abstract is accepted, the Scientific Committee will determine whether it is more appropriate for oral or poster presentation.

By mid-April 2025, FETP Program Directors will receive a complete list of the results of abstracts submitted from their programs. Upon receipt of the results, directors are expected to communicate the results to primary authors of submitted abstracts. Those whose abstracts are accepted for oral or poster presentation will also be informed and sent joint invitation letters from SAFETYNET and Epidemic Intelligence Program (EIP) Malaysia by the end of April. They also will receive guidelines regarding the structure and delivery of their oral or poster presentations.

Instructions for Writing Abstracts

- Type and save your abstract in word processing software such as Microsoft Word, Pages (for Apple), or Google Docs; then copy and paste your abstract from your document into our web-based abstract submission system (link above). See the sample abstract below for the required format.
- Abstracts may not exceed 350 words in length. This word count excludes the headings of the structured abstract (Background, Methods, Results, Conclusions) and the title and authors' names. You can easily obtain your word count by selecting the appropriate text of the abstract and then choosing the "Word Count" command in the "Tools" menu of MS Word or of Google Docs.
- Justification: The abstract text must be left-aligned only (not centered or right-aligned).
- Do not include any graphics, tables, or references.

The web-based system, Oxford Abstracts, will request the following information:

1. Authors and Training Program Affiliation

Have the following information with you when you submit an abstract online.

- Name and email address of presenting author.
- Names and email addresses of co-author/s (*Please ensure that all co-authors have agreed to being listed on the paper prior to submitting the abstract.*)
- Name of FETP and tier (frontline, intermediate, advanced)
- Home country in which FETP is based as well as the FETP host institution (university, ministry of health, etc.)
- Name of FETP Program Director
- Email address of FETP Program Director
- Status of primary author: current trainee or graduate/alumnus
- Year graduated or completed FETP training (for alumni) or expected to graduate (if current trainee)

2. Title

- Be brief. Avoid subtitles if possible.
- Capitalize major words only. Capitalize the second component of hyphenated terms. Do NOT use abbreviations or acronyms in the title.
- Give geographic location (country, province or city) and dates of study or investigation. Do not abbreviate geographic locations; separate them from the rest of the title by an m-dash, e.g., Dengue Fever Outbreak — Ho Chi Minh City, 2015.

3. Abstract Text

- Structure the abstract using the following subheadings to identify each section: Background, Methods, Results, Conclusions.
- Each subheading should be typed flush left, in bold font, and followed by a colon.
- The Background section should address both 1) the public health significance of the subject and 2) the context or scientific background and rationale for the study (see sample abstract).
- The Methods section must include the study design, study subjects or participants, case definitions used, any laboratory tests performed and type of analyses done.
- The Results section must contain data. It should not include such statements as "Data will be discussed." If considerable work is needed before the conference, please state in the abstract that results are preliminary.
- Because of time constraints, changes cannot be made to the abstract after it is submitted. You may find, however, that the results and conclusions of the study do change, based on data analysis done after submission. If your abstract is accepted and significant changes have been made after submission of the abstract, please highlight the changes in your presentation, whether oral or poster.

4. Type of Study: Choose one among the following: Surveillance (includes data analysis, data quality audit, evaluation or setting-up of a surveillance system), outbreak or field investigation, survey, program evaluation, risk assessment, emergency response, other type of study

5. Key Words

Please include 3—5 key words; use terms listed in the Medical Subject Headings (MeSH) from the Index Medicus (<https://meshb.nlm.nih.gov/search>).

6. Topic of abstract: A list of topics will be provided on the online submission portal. You will be asked to select 2—3 topics from this list. See Annex A for a list of topics.

Before abstracts are submitted, we encourage presenting authors to see the checklist in Annex B and improve their abstracts to conform to the guidance given in the checklist.

In case you encounter problems when submitting abstracts, you may send an email message to abstracts@safetynetconferences.com.

Sample Abstract

Authors: Jeyanthini Sathasivam, Muhammad Alimin Mat Reffien, Mohd Anwar Shahrir Ahmad, Norli Rosli, Seok Hong Tan, Bala Murali Sundram, Shaharom Che Mat Din, Harishah Talib, Thilaka Chinnayah

Title:

Leaving no stone unturned towards polio eradication—Johor Bahru, Malaysia, 2022

Abstract Text:

Background: Sustaining the polio free status in Malaysia achieved since 2000 is becoming a great challenge with the reappearance of polio infection in many parts of the world. Johor Bahru District Health Office received notification of a polio compatible case on 8 April 2022 involving a 4-year-old male child with residual paralysis during the 60 days' follow-up. Detailed investigation was carried out to assess the risk of polio importation and transmission in Johor Bahru.

Methods: Case investigation included clinical, laboratory and radiological assessment of the case. Extensive active case detection was carried out. District polio vaccination coverages were analyzed. Environmental investigation included locality survey and analyzing of waste water samples. Stool samples were collected from ten healthy children at the same locality. A five-year risk assessment for evidence of poliovirus importation and transmission was done on three parameters namely population susceptibility, surveillance quality and threat assessment.

Results: Birth, developmental and medical history of the case was uneventful. No significant exposure history was found. Immunization was complete for age. 975 children from 1491 households visited had complete immunization. No clinic or hospital in the locality had missed AFP notifications. No other children with similar symptoms or missed notifications were noted through health facility survey. Polio vaccine third dose coverage was more than 98% over the last 5 years. Three-year waste water samples and samples from the targeted healthy children were negative. Risk assessment of poliovirus importation and transmission for Johor Bahru district was low.

Conclusions: Based on the available public health data and comprehensive field investigation, it was concluded that the likelihood of poliovirus as cause of paralysis in this case was unlikely. Ensuring a robust and effective surveillance system and sustaining high levels of vaccination coverage within the community plays a vital role in the efforts towards an eradication program.



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AND TECHNOLOGY NETWORK, INC.



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Annex A. List of Abstract Topics

Animal Health
Human Health
Environmental Health
One Health
Infectious Diseases
Food and Waterborne Diseases
Sexually Transmitted Diseases
Vaccine Preventable Diseases
Vector borne Diseases
Zoonoses
Neglected Tropical Diseases
Infection Prevention and Control
Noncommunicable Diseases
Injuries
Toxicology
Cancer
Cardiovascular Health
Respiratory Diseases
Maternal and Child Health
Mental Health
Nutrition
Surveillance
Outbreak Investigation
Program Evaluation
Information Technology
Climate change
Disaster Response
Others

Annex B. Abstract Preparation Checklist

Please review each section carefully before submission to strengthen your abstract.

GENERAL
Does the abstract respect the mandatory word limit? (350 words)
Does it follow the recommended structure (background, methods, results, conclusion)?
TITLE
Does it mention time, place, and person?
Does it emphasize the key results or conclusion? <i>NO: Measles outbreak in Micronesia, 2014</i> <i>YES: Measles outbreak associated with vaccine failure in adults – Federated States of Micronesia, February–August 2014</i>
VOCABULARY/WORDS
Are all abbreviations and unique terms defined?
Did you eliminate nouns that should really be verbs? <i>NO: We conducted an investigation</i> <i>YES: We investigated</i> <i>NO: We made an assessment</i> <i>YES: We assessed</i> <i>NO: We conducted an appraisal</i> <i>YES: We appraised</i>
Did you eliminate adjectives and adverbs and use quantifiers instead? <i>NO: This was a very big outbreak. (very is an adverb and big is an adjective)</i> <i>YES: The outbreak affected 420 people.</i>
GRAMMAR, PUNCTUATION, ETC...
Is it written (mostly) in the active rather than the passive voice? (subject-verb-object)? You can use the passive voice in the methods section. <i>NO: "Control measures were implemented by the health department."</i> <i>YES: "The health department implemented control measures."</i>
Are your sentences complete (with at least a subject and a verb)?
Do your sentences follow a logical order? Do your sentences flow logically from one to the next?
BACKGROUND
Does it answer the question: Why did you do the study?
Is it short (ideally, 1 sentence to state the public health issue, 1 sentence to introduce the study objectives)?
Is the last sentence of the background the study objective(s)? Is it clear that it is the study objective? Ensure that the objective is clearly distinguishable as the final sentence in the background. <i>For example: "This study aimed to investigate the features of measles in pediatric oncology patients, explore the reasons behind the outbreak, and provide recommendations."</i>
METHODS
Does it answer the question: How did you do the study?



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Do you describe the practical steps followed in the fieldwork?
Do you mention the methods used to analyze the data?
Do you also explain the indicators that were calculated (e.g., odds ratio, prevalence)?
RESULTS
Does it answer the question: What did you find?
Do you provide key figures needed to support the findings? Usually, the abstract should contain rates and denominators for the proportions calculated, proportion exposed or proportion affected, measures of associations and confidence intervals.
Do you use numerical data instead of words?
Do the data present and support the upcoming conclusions and/or recommendations?
CONCLUSION
Is the conclusion stated?
Does it answer the question: What do the results mean?
Does it answer the questions or study objective(s) given in the background section?
Are all conclusions and/or recommendations based only on the data presented?

Annex C. Evaluation Criteria

1. Background and rationale for study

- Is the problem clearly described and of high public health importance?
- Is/are the study objective/s given?

2. Methods

- Are epidemiologic comparisons clearly stated?
- Are critical definitions clearly stated or obvious (for example, case, principal exposure)?
- Do the selected methods correspond with the nature of the study and study questions?
- Is a clear and easy-to-follow sequence of methods presented?
- Are essential methods described with precision and undefined terms or jargon avoided?
- Overall methods: where they appropriate and adequately described?
- Data Analysis/Statistics: where they appropriate and adequately described (p-values, confidence limits, etc.)
- Originality: was the study/investigation cutting edge/novel approach?

3. Results

- Are the results relevant to the problem and reported in sufficient detail?

4. Recommendations

- Are the recommendations clear, feasible and supported by the results?

5. Impact

- Will this study/investigation produce a change in practice or policy?
- Was an effect on the health of the population at risk demonstrated or reported?

6. Overall Impression

- Is the writing clear and brief?
- Is there a logical sequence and cohesiveness among all abstract sections?
- Are proper and simple terms used to describe methods and discuss findings?