

2024 Nutrition Congress

2-4 October • Southern Sun Elangeni Hotel • Durban • KwaZulu-Natal • South Africa



CALL FOR ABSTRACTS

The 2024 Nutrition Congress Scientific Committee invites delegates to make a contribution to the 2024 Congress by submitting abstract presentations – Including Oral, Poster, Symposia and Pecha Kucha formats. Abstracts can be Scientific/Research-based as well as Information-based; the latter is the sharing of experiences, knowledge, project implementation etc. that is not necessarily research-based.

CONGRESS THEME • SPEARHEADING NUTRITION FOR ALL

PRESENTING CATEGORIES:

- **Food and nutrition in a changing society**
This category includes topics around - food security, food justice, advocacy, food sovereignty, social protection, food access, food systems, food environment and food literacy.
- **Nutrition research methodologies**
This category includes topics around - nutrition research methodologies such as dietary assessment, clinical trials, epidemiological studies, cross-sectional surveys, intervention studies, systematic reviews, and qualitative research.
- **Food and nutrition technologies**
This category includes topics around - food product innovation, indigenous foods, product reformulation, food technology advancements, AI and digital technologies in food and nutrition.
- **Nutrition in the prevention, management and treatment of disease**
This category includes, but are not limited to, 'disease-oriented' sub-themes, including severe acute malnutrition, diabetes, nutrition in critical care, weight management and obesity, non-communicable diseases, lifestyle modification, dietary patterns and disease prevention, nutrient-specific interventions, and public health interventions.
- **Professional practice towards excellence in nutrition**
This category includes topics around - the new professional, professional ethics, practice guidelines, continuous learning and education, interdisciplinary collaboration, leadership and management.

INSTRUCTIONS TO AUTHORS:

The Scientific Committee will peer-review all abstracts. In making a decision, the committee will consider the quality of the communication in terms of its relevance to the congress theme and presenting categories, research quality, the focus and substance of its results, how these are presented, and its originality.

The congress acknowledges and recognises that some programmatic presentations, though original and informative, may not be based on a standard scientific methodology format. Authors of such presentations are encouraged to submit abstracts for the presenting categories, but should nonetheless ensure that their abstracts meet the high scientific standards of submission expected for this congress.

Please read the following checklist and make sure that your abstract complies as it is likely to be rejected for any of the following reasons:

1. No objectives / methodology / conclusion
2. Lack of data / statistics / results not clearly presented
3. Non-original work (previously presented / published)
4. Content unclear and confusing
5. Failure to follow the instructions to authors

DEADLINE DATES:

18 March 2024	Deadline for abstract submissions
25 April 2024	Feedback in terms of whether your submission has been accepted for inclusion in the 2024 Congress programme
30 April 2024	Accepted abstract submitters are to register online by this date
31 May 2024	Accepted abstract submitters registration payment due by this date

ASSIGNMENT OF ABSTRACTS TO PRESENTATIONS:

- Abstracts will be assigned to sessions (after the peer-reviewing process) according to the best arrangement of the programme as decided by the Scientific Committee, taking into account (where possible) the stated preference of the presenting author
- Authors will be notified of the assignment of their abstract following the peer review process
- Abstracts that have been accepted for presentation will be published without editing on the congress website

NOTE: Accepted submitted abstracts will be open to view to all delegates throughout the Congress on the website: www.nutritioncongress.co.za

GUIDELINES ON SUBMITTING AN ABSTRACT:

1. Delegates wishing to present are invited to submit a short abstract for consideration and inclusion in the scientific programme
2. Results must be clearly presented in the abstract
3. Abstracts must be submitted online via www.nutritioncongress.co.za by **Monday, 18 March 2024**
4. No late submissions will be accepted
5. The Scientific Committee reserves the right to select papers and posters for presentation
6. Abstracts received will be acknowledged on submission via automatic email
7. Notification of acceptance or rejection will be via email by **Thursday, 25 April 2024**
8. Meeting rooms will be equipped with data projectors, and only MS PowerPoint will be accepted
9. Please note that no more than three submissions will be allowed per presenter due to possible programme limitations
10. Please read the submission requirements carefully, as abstracts submitted cannot be changed later
11. All presenting authors are requested to fully register for the congress by **Tuesday, 30 April 2024**
If registration and payment has not been received by this deadline, the presentation will not be listed in the programme
12. The congress will be in-person only
13. Any **conflict of interest** must be declared

The intent is to openly identify any potential conflict of interest so that the congress delegates may form their own judgement about the presentation with the full disclosure of the facts

This process of declaring conflicts of interest is *not* intended to reduce or inhibit collaboration, partnerships, networks or involvement in the congress, but rather to encourage transparency and integrity in decision-making

Conflicts of interest pertains to a financial relationship for research support, consulting, employment, or *non-financial* interest i.e. personal relationships consulting with pharmaceutical, trade companies, manufacturers or corporations whose products or services could be related to the congress. *Non-financial* interests could include religion, ideology, personal relationships and political associations or interests

Where there is no conflict of interest please enter the word: None

POSTER PRESENTATION & EXHIBITION:

- Authors may be required to do a short (2-5 min) presentation on their poster during a tea / lunch break during the congress. This information will be shared within the abstract result notification.
 - Details regarding the poster panel size etc. will also be shared within the abstract result notification.
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PECHA KUCHA PRESENTATION: *(a short presentation using images to represent your message)*

- Authors to prepare a 7 minute, 14-slide presentation using pictures, not words, to share your message, synchronising your message per slide i.e. 30 seconds per slide.
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SYMPOSIUM:

- Symposia will be approximately 1H in duration (the scientific committee may shorten or extend the time if needed, in consultation with presenters.
 - Submission will require a summary of the symposium, which can be attached as a PDF document – the document to include the speakers (2 or more and bio's), general programme, and a summary of the planned symposium discussion and lay-out.
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INFORMATION REQUIRED:

► Instructions to Submit an Abstract:

- **Abstract Sign In:** Please sign into the Abstract Portal with your account email address and password. If you have not yet submitted a presentation, please create a new account. The **presenting author** needs to create the account as results will be sent to the account holder
- **Contact Information:** Complete the information required on the Contact Information tab

► Instructions to Author:

- **Title & Presentation Type:** Insert the full title of the proposed presentation. The title should not exceed **30 words**
- **Preferred format of presentation:** Oral, Poster or Pecha Kucha
- **Theme:** Choose the presenting category you wish to submit under

► **Authors, Affiliations & Presenting Authors Biography:**

- Provide details of AUTHOR/S AFFILIATION/S
- Provide details of ABSTRACT AUTHOR/S
- Please indicate in the check box (✓) which author/s will present
- Presenting Author Biography - **100 words maximum**

NOTE: Additional presenting Author biographies can be uploaded as a PDF document under the 'ABSTRACT UPLOAD' tab

► **Abstract Upload:**

- Abstracts must be typed in English, and a special character keyboard is available.
- The body of the text must not exceed **300 words**.

THE ABSTRACT MUST ADHERE TO THE FOLLOWING FORMAT:

- **Introduction:** should be brief and informative and state the aim of the study.
- **Methods:** include a description of subjects and research methodology.
- **Results:** outline the findings of the study supported by statistics as appropriate. Do not use figures, graphs or tables in the abstract. The data provided must be sufficient to permit peer review of the abstract.
- **Conclusion:** provide a summary and relevance of the main findings.
- **Conflict of Interest Declaration:** Include or state: None
- **Keywords:** (Maximum of 5) Include or state: None

► **AV Requirements:**

- The meeting rooms are equipped with data projectors and only MS PowerPoint will be accepted
- MAC plug-points will be provided at the lecterns for those wishing to present using their own MACS

► **Review:** This will allow you to review your completed submission

► **Submit:** Before you submit your abstract you must agree to the 'Terms & Conditions'

EXAMPLES OF ABSTRACTS:

► **Original Research Template**

Impact of a structured patient educational intervention on Glycaemic control in adult type 2 diabetes patients in Qatar

Introduction: Glycosylated haemoglobin (HbA1c) is a known clinical marker of long term glycaemic control with implications for complications associated with type 2 diabetes mellitus (T2DM).

Objectives: To test the impact of a patient-centred diabetes educational toolkit on clinical measures of glycaemic control.

Methods: A culturally targeted randomised controlled educational intervention was carried out among 430 eligible adults with T2DM in Doha, Qatar. Subjects were randomly assigned to either a 6 week structured educational class (intervention, n=215) or a self-study toolkit over 6 weeks (control, n=215) and followed for 12 months. Fasting blood glucose (FBG), HbA1c and albumin-creatinine ratio (ACR) were monitored at baseline, 6 and 12 months. Between group means of quantitative clinical indices were compared using Student's t-test and multivariate analyses.

Results: In the intervention group, 109 subjects (M=40, F=69) completed the study (compliance rate, 51%) and 181 controls (M=50, F=131; compliance rate, 84%). Baseline HbA1c % was not significantly different between groups (p=0.794). Decreasing trends in HbA1c% were observed in all groups with significant differences at 6 months (p=0.032) and 12 months (p=0.006) in the intervention group compared to the controls. Similar trends in FBG were observed in all groups at 6 months (p=0.117) and 12 months (p=0.015) in the intervention and controls. ACR values at baseline were moderately high but not significantly different (p=0.870) between the groups. The intervention group showed a significant drop in ACR at 6 months (p<0.001) and 12 months (p<0.001).

Conclusions: Both groups had access to the educational kit but the intervention group showed better glycaemic control over the follow-up period. This educational intervention influenced clinical outcomes of Qatari T2DM patients. **Conflict of Interest:** None. **Key words:** type 2 diabetes, patient-centred education, toolkit, HbA1c, glycaemic control

► **Review Type Abstract Template**

Bibliographic analysis of scientific research on selected topics in public health nutrition in West Africa: review of articles published from 1998 to 2008

Introduction: Few countries in West Africa have the capacity for carrying out advanced training in nutrition and public health. To provide additional background information on the current regional applied nutrition research capacity and productivity, we have analyzed the collection of peer-reviewed articles on key topics in public health nutrition that were published during the period 1998-2008.

Materials and methods: Using PubMed bibliographic search engine, we identified peer-reviewed studies on major public health nutrition issues in the West African region. The following terms were searched: "breast feeding", "infant nutrition physiology" (comprising complementary feeding and weaning), "protein energy malnutrition", "nutrition and infection", "vitamin A", "iodine", "zinc", and "overweight".

Results: The search identified a total of 412 unique articles (37 ± 6 articles per year) that were published during the 11-year period. Most research focused on infant and young child feeding practices, selected micronutrient deficiencies, and the emerging problem of overweight and obesity. The primary author of

nearly half (46 %) the publications was located in an institution outside of West Africa. Most articles were published in English (90 %), and nearly half of all articles (41 %) were cross-sectional observational studies.

Conclusions: Few peer-reviewed research studies are published on key public health topics in the West African region. Considering the magnitude of nutrition problems in this region, new approaches are needed to encourage and support research capacity and output in West Africa. Action to establish centers of advanced nutrition training and applied research is long overdue. Conflict of Interest: None

Keywords: Nutrition, Public Health, Applied Research, Advanced Training, West Africa

► Programmatic Case Study Type Abstract

Potential use for lot quality assurance sampling (LQAS) assessments in nutrition surveillance in Somali

Introduction: Small sample cluster surveys like use of LQAS design of 33 clusters by 6 children (33X6) with use of the Decision Rule to determine relationships between global acute malnutrition rates and predetermined thresholds have been proposed for emergency assessments when Probability Proportionate to Size (PPS) cluster surveys are expensive, risky and difficult but rapid humanitarian response is required.

Objectives: To compare the nutrition situation outcome and relative costs from PPS and LQAS assessments and to determine the potential application of LQAS in nutrition surveillance for Somalia.

Method: A comparative study in a series of three independent and simultaneous PPS and LQAS (33X6) cross sectional surveys in same population samples was conducted in 2007-2008 in Hargeisa IDP settlements, Bakool Pastoral and Shabelle Riverine areas. The mean differences for the malnutrition rates and costs were analyzed using independent t-test and Analysis of variance. Results: Similar prevalence of acute and chronic malnutrition rates and similar estimates for phase classification of severity of nutrition situation were obtained. The mean costs were US\$ 5,026 (± 829) and US\$ 13,179 (± 750) for conducting a LQAS and PPS assessment taking an average of 73 (± 6) and 245 (± 32) person-days respectively. Overall there was a 54% ($p=0.016$) reduction in children assessed, 54.0% ($p=0.001$) person-days, and 44.8% ($p=0.0002$) amount of money spent for LQAS compared to PPS method.

Conclusion: The LQAS design on average assessed significantly fewer children, required less person-days and cost 49% less, providing significant cost-saving in classifying the nutrition situation and thus has a good potential for use in nutrition surveillance in Somalia. Conflict of interest: none.

Key Words: LQAS, PPS, emergency, nutrition, surveillance

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