



BASL Rare Diseases Masterclass Abstract Submission Guidelines

The BASL Rare Diseases Masterclass abstract submission is an online process. Please follow steps below to successfully submit your abstract.

GUIDELINES FOR ABSTRACT SUBMISSION:

By submitting an abstract, you agree to the following:

- a) The abstract is scientifically sound and ethically approved.
- b) The abstract is not an advertisement, nor contains anything obscene, defamatory, libelous, unlawful or in any way actionable.
- c) The abstract will be made available on the Society's website.
- d) All authors have seen and approved the abstract as submitted.
- e) If accepted, at least one of the authors will attend the Congress to present the research.

Reasons to submit an abstract:

- **Be Creative** - Submission allows you to be creative in visually sharing your presentation
- **Connect** - Develop connections to new colleagues and potential collaborations
- **Global networking** - Network with your peers and prominent experts in the field of liver disease
- **Improve** - Develop your presentation skills, an essential competence for advancing your career. It is an added value to your CV to make you stand out among other candidates
- **Peer Review** - Peer review is vital part of any research project. At these events you will have opportunity to present your findings and immediately receive feedback from your peers in an intellectually robust environment
- **Present** - Authors of the best abstracts will be invited to present in the BASL Rare Diseases Masterclass 2026 oral sessions to some of the most influential members of the liver community.
- **Visibility** - An ideal opportunity to obtain recognition via the programme and boost your profile among your peers and leading BASL experts

**If you have any problems or questions, please contact the
Event Managers on 01543 442154.**



Please read the following requirements carefully before submitting your abstract:

1. Entries should be related to the field of hepatology or gastroenterology.
2. You are allowed a maximum number of **400 words** in the abstract body. This does not include the title which can be up to **75 words**.
3. The 'Full title' should be presented sentence case (**not in title case or block capitals**), i.e. only the first letter of the title or appropriate terms such as abbreviations or proper nouns should be upper case.
4. Tables, Figures, images and reference documents can be uploaded with your abstract and will not count towards your word count total.
5. Each abstract should be submitted in one of the following categories: *Diagnostics in rare liver diseases, Clinical Trials, Iron Disorders, Wilsons Disease, Alpha 1 - antitrypsin deficiency, Other*.
6. It is best to type your abstract straight into the online submission form, or alternatively paste the text from a word-processed document. Please use the symbol font for special characters. You can use the buttons to add formatting.
7. Please do not include author details in the body of the abstract or in the abstract title. You will be asked to provide author details within the submission process. By default, you will be set as the 1st Author, but you can change this on the authors page, and add as many additional authors as you like in the order in which you would like them to appear
8. Please note that the abstract cannot have been presented at a prior meeting.
9. Once you click the 'submit' button, the online submission page will change to a submission confirmation page, and you will immediately receive a confirmation email and log in details. If you do not receive this, please email kim@basl.org.uk
10. Abstracts will be judged by a selected panel of reviewers from each category and choose those accepted.
11. Once your abstract is submitted, **no further changes can be made**, so **PLEASE CHECK IT CAREFULLY**

Abstracts must be submitted by Midnight Friday 18th September 2026

GUIDELINES FOR ABSTRACT FORMAT:

The title of the abstract should encompass the hypothesis you are testing or the nature of your investigation.

In general, the abstract should follow the format of introduction, methods, results and



discussion.

The first paragraph should concisely outline the background to the research and why the research needed to be undertaken – hypothesis testing or lack of data in a certain area.

The second paragraph should detail the methods you have used to generate your data. Full details of non-standard abbreviations should be given the first time it is used. Methods should flow from the most important/widely used method to the least.

The next section requires clear expression of your results. Quantitative data should always be included with the associated unit of measurement (e.g. ng/ml, % of control), where possible. The use of the word 'significant' should only be used in association with data that has been assessed for significance, with $P < 0.05$, using an appropriate statistical test. The nature of the test can be outlined in the poster/oral. A figure or table may be included

The final section should concisely outline your main findings, either in the form of a summary or a conclusion. Please refrain from stating that further research is necessary.



A sample abstract is given below.

Sample Abstract

Title:

Investigation of the effect of a panel of model hepatotoxins on the Nrf2-Keap1 defense response pathway in CD-1 mice.

Body:

The Keap1-Nrf2-ARE signaling pathway is an important regulator of the mammalian defense system to enable detoxification of foreign chemicals. We have investigated, *in vivo*, the ability of four murine hepatotoxins, paracetamol (APAP), bromobenzene (BB), carbon tetrachloride (CCl₄) and furosemide (FS) to deplete hepatic glutathione (GSH) and related this to induction of hepatic Nrf2 protein nuclear translocation. Additionally, we studied whether hepatic Nrf2 nuclear translocation is a general response during early acute hepatic chemical stress *in vivo*.

Male CD-1 mice were administered APAP (3.5mmol/kg), FS (1.21mmol/kg), BB (4.8mmol/kg) and CCl₄ (1mmol/kg) for 1, 5 and 24h, via intraperitoneal dosing in saline or corn oil vehicle. Each compound elicited significant serum alanine aminotransferase (ALT) increases after 24h (ALT U/L: APAP, 3036 $\pm$ 1462; BB, 5308 $\pm$ 2210; CCl₄, 5089 $\pm$ 1665; FS, 2301 $\pm$ 1053), accompanied by centrilobular damage assessed by histopathology. Significant GSH depletion was seen with APAP (9.6 $\pm$ 1.7% of control levels) and BB (52.8 $\pm$ 6.2% of control levels) 1h after administration, but not with FS and CCl₄. Western Blot analysis revealed increases in nuclear Nrf2, 1h after administration of BB (209 $\pm$ 10% control), CCl₄ (146 $\pm$ 3% control) and FS (254 $\pm$ 41% control), however this was significantly lower than the levels observed in the APAP-treated mice (462 $\pm$ 36% control).

We have demonstrated that the hepatotoxins BB, CCl₄ and FS can induce a significant increase in Nrf2 accumulation in hepatic nuclei. This was associated with modest changes in hepatic GSH and delayed development of toxicity.