

ISCEV abstracts

Style guide v3, Jan 2014

Brief submission guidelines:

Abstracts must be in English.

Use single line spacing.

Use bold type and lower case for the title and subheadings (Purpose, Methods, Results, Conclusions).

The presenting author's name should be first.

Individual name ordering should follow Western convention, i.e. given/personal name(s) followed by family name (e.g. Peter R. Smith).

Identify author affiliations with superscript numbering at the end (e.g. P.R. Smith¹).

The text should not exceed 500 words and should not include tables or figures.

The following abbreviations do not need to be written in full: ISCEV, ERG, VEP, mfERG, PERG, mfVEP, LED, MRI, OPs. All others should be written in full for their first occurrence, e.g. "The photopic negative response (PhNR) was recorded...".

Any references in the text should use the brief citation format, e.g. Marmor MF et al, *Doc Ophthalmol* 2009;118:69–77.

Example abstract:

Vision in six-month-old infants born to drug-misusing mothers prescribed methadone in pregnancy

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Purpose

Flash VEPs were abnormal in a cohort of 100 neonates exposed to maintenance methadone in utero. We now describe clinical visual and electrophysiological outcomes at six months.

Methods

Visual assessment included modified Atkinson test battery; strabismus, nystagmus, reduced visual acuity, delayed visual maturation or refractive error (>3 dioptres) defined a failure. Pattern onset VEPs were recorded to 120', 60' and 15' checks.

Results

81 drug-exposed and 26 comparison infants (79 and 52 % of the original cohorts) were assessed at a median age of 27 weeks (range 26–30). 90 % drug-exposed infants had been additionally exposed to illicit drugs and 26 % to excess alcohol in utero. 40 % of the drug-exposed cohort failed clinical visual assessment: the relative risk of abnormal assessment was 5.1 (95 % confidence interval 1.3–20; $p=0.02$). Nystagmus was particularly common. VEP peak times were slower and amplitudes smaller in drug-exposed infants, of whom 70 % had one or more abnormal VEP parameter. Abnormal visual outcome at six months was not associated with the pattern of additional drug exposure nor with a history of neonatal abstinence.

Conclusions

Abnormal visual electrophysiology in infants born to drug-misusing mothers prescribed maintenance methadone persists to six months of age, and is associated with abnormal clinical visual assessment.

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