Late-Breaking Science

Abstract Submission Guidelines

Submission Dates: June 16–Aug. 4, 2025, 7 pm ET (UTC-4)

Guidelines for Late-Breaking Science Submissions

Late-Breaking Science Sessions are innovative and provide the latest breakthroughs in clinical science. The sessions provide notable exposure and recognition for studies likely to have a significant impact on clinical practice and/or to make significant advances in a scientific field. The American Heart Association is excited to receive your late-breaking science.

Submission: Abstracts submitted via the late-breaking submission process are expected to contain, at a minimum, the study design. Information on the characteristics of the patients enrolled is also desirable. If available, the major trial results should be summarized and will be maintained confidential. Each submission must include a $300 online payment. If accepted, the abstract may be modified in the fall for publication, since the trial data presented at Scientific Sessions will be published online in the *Circulation* journal supplement. Send your questions or concerns to Mary.Lu.Hare@heart.org.

We understand the flexibility needed for trial timelines. For trials closing close to the deadline, please reach out to Mary.Lu.Hare@heart.org and she will forward your concerns to the Chair and Vice-Chair of the Committee on Scientific Sessions Program.

Submission Type:

- Late-Breaking Randomized Clinical Trial – must include some type of intervention
- Breakthrough Innovations in Clinical and Translational Science- first in human therapeutics, major technology advances
- Clinical Trial Update - Update on a previously presented clinical trial
- High Impact Science from Clinical Registries or Observational Studies

Categories/Themes:

- Acute & Chronic Coronary Syndromes
- Arrythmia & Electrophysiology
- Brain Health
- Congenital & Pediatric
- Critical Care & Anesthesia
- Heart Failure, Cardiomyopathy, Transplantation & Pulmonary Hypertension
- Health and Technology Innovations
- Hypertension
- Imaging
- Nephrology
- Nursing & Allied Healthcare
- Prevention, Epidemiology & Lifestyle
- Valve
- Vascular & Thromboembolic Disease
- First in Human/Drug Discover

Abstracts:

Abstract Character Limitations
Character Maximum Limit: 2,500
Character Minimum Limit: 50

Graphics Guidelines

- All graphics (figures) and text-based graphics (tables) should be provided as 72-300 dpi, pre-sized, BMP, GIF, JPG or PNG images only, with a maximum width of 440 pixels (no limit on length).
- Black-and-white digital images should be in grayscale mode. Color images should be saved in RGB color mode.
- All graphics will require a brief description of the image.
- Please Note: If an abstract is accepted for publication, any images submitted with the abstract are placed after the abstract that will appear in the online-only supplement to *Circulation*, an American Heart Association journal.

<u>Additional Late-Breaking Science Submission Requirements:</u>

Information regarding your science will be collected during the submission process. Not all questions may be applicable to your research. Please fill out the required steps during submission to the best of your ability.

- Are implications for health equity addressed in the study findings?
- Is this study testing a treatment/intervention to improve health outcomes?
- Is this a first-in-human therapeutic trial?
- Availability of final data
- Company supporting the trial
- Disclosure of unlabeled/investigational use of drug or product

- Acronym and marketing description (that does not mention trial results or outcomes)
- Principal investigator

The AHA is committed to improving health by ensuring the diversity of populations in scientific research.

- Does the study include representation from women and historically underrepresented racial and ethnic populations?
- Is your study group representative of the people who have the condition of interest?

The abstract with the overall design and major results that you submitted for consideration may be edited online in preparation for publication in *Circulation*. Further information with a link to the abstract site will be sent to you from Mary.Lu.Hare@heart.org when editing is available in early October. The final abstract provided to the AHA will be published in *Circulation*.

- The Abstract Copyright Transfer Agreement is collected at the time of abstract submission. If you select "Yes," your abstract will be published in the online *Circulation* supplement and the online Program Planner. If you select "No," your abstract will be EXCLUDED from publication in the online *Circulation* supplement, the Mobile App and the online Program Planner.

- If you submitted an abstract to Scientific Sessions 2025 general abstract submission (April–June) that has the same focus as the abstract submitted to the LBS program, it may only be accepted in one format on the Scientific Sessions 2025 program. If accepted in both the general abstract submission and the LBS submission, please let Mary.Lu.Hare@heart.org know via email so that we can withdraw the abstract accepted in the general program.

If you submitted an abstract(s) with separate/complementary analyses apart from this trial/presentation, that is acceptable. An abstract submitted to the general abstract submission for consideration in the general program that includes information other than the primary data from the clinical trial may be considered for presentation in the regular program at Scientific Sessions on a case-by-case basis. Please notify Mary.Lu.Hare@heart.org if another abstract based on the clinical trial was submitted via the regular abstract submission process.

Use of Automated Assistive Writing Technologies and Tools

- The use of automated assistive writing technologies and tools (commonly referred to as artificial intelligence or machine learning tools) is permitted provided that their use is documented, and authors assume responsibility for the content. As with human-generated content, authors are responsible for the accuracy, validity and originality of computer-generated content. Automated assistive writing technologies do not qualify for authorship as they are unable to provide approval or consent for submission.
- If the use of these technologies has involved the research design, the tools should be documented in the Methods. For additional information, see the World Association of Medical Editor recommendations.
- For your abstract submission, you will need to indicate the use of these tools.

Featured Science: During Late-Breaking Science submission, you have the option to select if your abstract may be considered for a Featured Science Session. This means if your abstract is not selected to be presented in a Late-Breaking Science Sesssion at Scientific Sessions 2025, it may be considered for presentation in a Featured Science Session as an oral presentation. The embargo policy for presentation in a Featured Science Session remains the same as a Late-Breaking Science Session.

Note: Industry announcements required by the SEC (Security Exchange Commission) must be approved by the AHA prior to release and any level of information released without approval will be considered an embargo break.

AHA/ACC/ESC Acceptance/Embargos: Abstracts related to a clinical trial submitted for consideration for presentation at the American Heart Association, American College of Cardiology and European Society of Cardiology cannot be presented at the other two meetings. After acceptance by one of the organizations, that organization's specific embargo guidelines prevail. An embargo means that results from the trial cannot be presented or announced in any forum prior to presentation at the meeting to which it has been accepted. Violators will be banned from participating in the clinical trials for two full cycles or for two of each organization's meetings (AHA, ACC or ESC).

AHA Embargo Policies:
Clinical trial results are prohibited from being released until the date and time of the AHA designated embargo time. For late-breaking science and featured science presentations, the embargo time is the date and time of the presentation at Scientific Sessions 2025. Clinical trial sponsors must comply with embargo guidelines established by the American Heart Association.

You are prohibited from sharing written embargoed information with anyone outside of the AHA except for journal manuscript submission. Important Note: Industry announcements required by the SEC (Security Exchange Commission) must be approved by the AHA prior to release and any level of information released without approval will be considered an embargo break. However, you may conduct one-on-one embargoed media interviews as long as the reporter agrees to abide by the embargo policy.

Failure to honor embargo policies will result in the trial being withdrawn on site and barred from presentation. Failure to honor this embargo policy may also jeopardize future acceptance of clinical trials and presentations at Scientific Sessions. Therefore, it is essential to recognize that presentations at unofficial satellite meetings or unofficial press conferences before the scheduled AHA embargoed media briefings are not allowed. This embargo policy will be strictly enforced.