

“How to Captivate Your Audience from the Podium”

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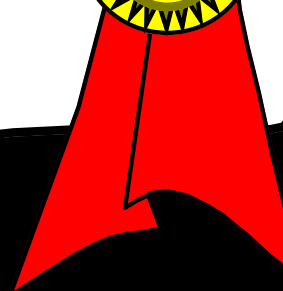
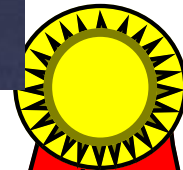
Financial Disclosures

- Advisory Boards
 - sanofi-aventis
 - Merck
 - Novo-Nordisk
- Grants
 - sanofi-aventis
- Educational Venues
 - CCMD
 - Cardiometabolic Health Congress

Podium Presence 101

- Know your material
 - What are the *take home messages*
- Know your podium
- Know your audience
 - Make eye contact
 - No reading
- Know your time
- Vary your tone and speed
- Relax and enjoy
 - *You're the expert*

Bierman's Rules



Edited in 1994 by:

- **John Brunzell**
- **Alan Chait**
- **Bob Eckel**
- **Andy Goldberg**
- **Bob Schwartz**

Bierman's Rule #1

**Design your experiment so
that no matter what the
outcome, the results are
publishable.**

Bierman's Rule #2

**Always plot your data
before performing
statistical analysis.**

Bierman's Rule #3

**If you would not have the
experiment performed on
yourself, don't do it on
others.**

Bierman's Rule #4

**As a post-doctoral fellow,
choose one project that is
innovative even if risky,
and another project that is
less novel, but a sure
thing.**

Bierman's Rule #5

**Use the copy of
Strunk and White's
"Elements of Style"
that I gave you when you
became a fellow.**

Bierman's Rule #6

If a biological response is proportional to the basal value, consider adjusting the response for the basal value, i.e. use the Law of Initial Values”.

Bierman's Rule #7

**Don't ask your colleagues
from home questions at
regional, national, or
international meetings –
rather talk to them privately
or at home.**

Bierman's Rule #8

It's OK to be nervous when presenting at meetings or site visits. The best way to overcome this problem is to have practiced extensively beforehand.

Bierman's Rule #9

If you want to be a clinical Investigator, come to the Metabolism, Endocrinology and Nutrition Division at the UW; if you want to be a clinical endocrinologist, go to the Mayo Clinic.

Bierman's Rule #10

As an MD fellow with limited research experience, expect to be depressed by 6 ± 2 mo. However, by 24 mo you will be overwhelmed with excellent ideas and too excited and busy to be depressed.

Bierman's Rule #11

Don't read your talk or take written materials to the podium with you.

Bierman's Rule #12

Do not make final slides before you practice your talk in front of your colleagues, because you invariably will have to make many changes.

Bierman's Rule #13

**One slide per
minute!**

Bierman's Rule #14

**All slides should be horizontal,
otherwise they look strange
or project off the screen.**

Bierman's Rule #15

**Keep slides simple, and use
white against a blue
background.**

Bierman's Rule #16

**Keep it simple. Don't try to
make more than 1 or 2
points per slide.**

Bierman's Rules #17

Keep your Summary slide free standing and separate from your Conclusions slide.

Bierman's Rule #18

**Tables are good for
publications, but lousy for
slides.**

β-blocker Evidence: Benefit in HF and/or LVSD

Study	Drug	HF Severity	Patients (n)	Follow-up (years)	Mean Dosage	Effects on Outcomes
CIBIS	Bisoprolol*	Moderate -Severe	641	1.9	3.8 mg/day	All cause mortality (p=NS)
CIBIS-II	Bisoprolol*	Moderate -Severe	2,647	1.3	7.5 mg/day	All cause mortality ↓34% (P<0.0001)
BEST	Bucindolol*	Moderate -Severe	2,708	2.0	152 mg/day	All cause mortality (p=NS)
MERIT-HF	Metoprolol succinate#	Mild-Moderate	3,991	1.0	159 mg/day	All cause mortality ↓34% (P=0.0062)
MDC	Metoprolol tartrate*	Mild-Moderate	383	1.0	108 mg/day	Death or Need for TX (P=NS)
CAPRICORN	Carvedilol	Mild	1,989	1.3	40 mg/day	All cause mortality ↓23% (P =0.03)
US Carvedilol	Carvedilol	Mild-Moderate	1,094	0.5	45 mg/day	All-cause mortality† ↓65% (P=.0001)
COPERNICUS	Carvedilol	Severe	2,289	0.9	37 mg/day	All-cause mortality ↓35% (P =0.0014)

HF=Heart failure, LVSD=Left ventricular systolic dysfunction, NS=Not significant, TX=Transplant

*Not an approved indication

†Not a planned end point.

#Not approved for severe HF or mortality reduction alone

**Have fun – this is
your life!**