“How to Captivate Your Audience from the Podium”

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- Advisory Boards
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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.
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 $6 \pm 2$ 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.
<table>
<thead>
<tr>
<th>Study</th>
<th>Drug</th>
<th>HF Severity</th>
<th>Patients (n)</th>
<th>Follow-up (years)</th>
<th>Mean Dosage</th>
<th>Effects on Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIBIS</td>
<td>Bisoprolol*</td>
<td>Moderate-Severe</td>
<td>641</td>
<td>1.9</td>
<td>3.8 mg/day</td>
<td>All cause mortality (p=NS)</td>
</tr>
<tr>
<td>CIBIS-II</td>
<td>Bisoprolol*</td>
<td>Moderate-Severe</td>
<td>2,647</td>
<td>1.3</td>
<td>7.5 mg/day</td>
<td>All cause mortality ↓34% (P&lt;0.0001)</td>
</tr>
<tr>
<td>BEST</td>
<td>Bucindolol*</td>
<td>Moderate-Severe</td>
<td>2,708</td>
<td>2.0</td>
<td>152 mg/day</td>
<td>All cause mortality (p=NS)</td>
</tr>
<tr>
<td>MERIT-HF</td>
<td>Metoprolol succinate#</td>
<td>Mild-Moderate</td>
<td>3,991</td>
<td>1.0</td>
<td>159 mg/day</td>
<td>All cause mortality ↓34% (P=0.0062)</td>
</tr>
<tr>
<td>MDC</td>
<td>Metoprolol tartrate*</td>
<td>Mild-Moderate</td>
<td>383</td>
<td>1.0</td>
<td>108 mg/day</td>
<td>Death or Need for TX (P=NS)</td>
</tr>
<tr>
<td>CAPRICORN</td>
<td>Carvedilol</td>
<td>Mild</td>
<td>1,989</td>
<td>1.3</td>
<td>40 mg/day</td>
<td>All cause mortality ↓23% (P=0.03)</td>
</tr>
<tr>
<td>US Carvedilol</td>
<td>Carvedilol</td>
<td>Mild-Moderate</td>
<td>1,094</td>
<td>0.5</td>
<td>45 mg/day</td>
<td>All-cause mortality↑65% (P=.0001)</td>
</tr>
<tr>
<td>COPERNICUS</td>
<td>Carvedilol</td>
<td>Severe</td>
<td>2,289</td>
<td>0.9</td>
<td>37 mg/day</td>
<td>All-cause mortality ↓35% (P=0.0014)</td>
</tr>
</tbody>
</table>

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!