



# Multidisciplinary Symposium on Childhood Cancer

**40 YEARS OF PROGRESS | November 3-4, 2023, Pan Pacific Toronto**

## 2023 POGO SYMPOSIUM – ABSTRACT SUBMISSION GUIDE

### POGO SYMPOSIUM GENERAL INFORMATION

**Dates:** November 3-4, 2023

**Location:** Pan Pacific Hotel, Toronto

#### Registration Fees:

	Early-Bird (before Sept. 29)	Regular	Fellows/ Students
Symposium *	\$350.00	\$450.00	\$175.00
Pre-Symposium Nursing Day only	\$125.00	\$150.00	\$50.00
BUNDLE - Pre-Symposium Nursing Day and Symposium *	\$400.00	no bundle	\$200.00
Celebratory Dinner only	\$100.00	\$100.00	\$100.00

\* Celebratory dinner ticket included - registrants will have to indicate at the time of registration whether they want to attend the dinner.

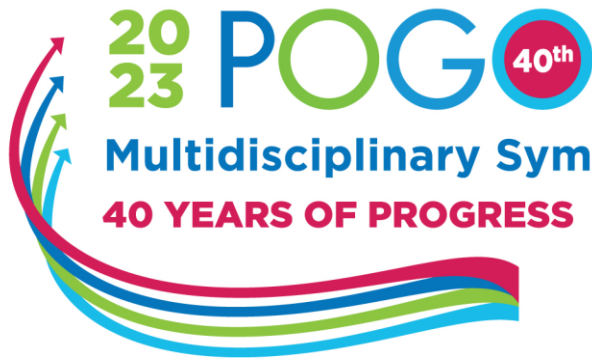
For more information and to register: <https://reg.eventmobi.com/pogosymposium>

### ABSTRACT SUBMISSION CRITERIA

Abstracts are encouraged in all areas related to care and control of malignant disease in children. Submissions may cover ANY dimension of childhood cancer care and control including research, innovative program delivery, data management, and education and policy development. All disciplines are encouraged to submit posters. Accepted abstracts will be provided in PDF format to all Symposium attendees via the conference app.

### ABSTRACT SUBMISSION DEADLINE

**Abstracts must be submitted by Friday, September 29<sup>th</sup> at 11:59 pm EST.**



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### SUBMITTING AN ABSTRACT

All abstracts must be submitted online via this link:

<https://pogopediatric.wufoo.com/forms/2023-pogo-symposium-abstract-submission/>

### REVIEW PROCESS

1. Abstracts must be submitted online by **Friday, September 29<sup>th</sup> at 11:59 pm EST.**
2. All submitted abstracts will undergo a blind peer review.
3. Authors will be notified of the final decision of abstract acceptance by **Friday, October 6<sup>th</sup>.**

### ABSTRACT FORMATTING REQUIREMENTS

Abstracts must adhere to the formatting requirements:

1. Your abstract may not exceed 600 words **including** title, author information and references.
2. Use **Arial or Helvetica Font, Size 10-12.**
3. Your abstract should be single-spaced.
4. The title of your abstract should be capitalized and bolded, centred in the middle of the page:

**EXPLORING THE EFFECTS OF CARING FOR A CHILD WITH CANCER ON THE PARENTAL COUPLE: SYSTEMATIC LITERATURE REVIEW**

5. Enter author information in the following format:

*Burns W<sup>\*1,2</sup>, Péroquin K<sup>1</sup>, Sultan S<sup>1,2</sup>*

6. Enter author's institution, city and province/state in the following format:

<sup>1</sup> *Université de Montréal, Montreal, QC*  
<sup>2</sup> *CHU Sainte-Justine, Montreal, QC*

7. Denote the presenting author with (\*), as above and list that author first.



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8. Each **section title** of your abstract should be left justified, **bolded** and followed by a colon (:), followed by the content of that section, single-spaced.

**Objective:** Although the effects of cancer, its trajectory, treatment, and burden have been explored in parents (Vrijmoet et al., 2008) considered as individuals, the impact of cancer on the parental couple is a relatively novel area of research which has received little attention (cf. Da Silva, Jacob, & Nascimento, 2010; Long & Marsland, 2011). The aim of this research is to perform a systematic literature review of the research which explores the impacts of pediatric cancer on marital functioning in parents.

9. Each section of your abstract should be separated from the one before and after it with a space.

**Please refer to the sample abstract included at the end of this document to ensure you have formatted your submission correctly.**

### POSTER DISPLAY INFORMATION

- **Poster dimensions must not exceed 48" high and 72" wide**
- Posters will be mounted by presenter on freestanding boards provided by POGO
- Posters must be on display for the duration of the Symposium (Friday, November 3<sup>rd</sup> @ 7:30 am until Saturday, November 4<sup>th</sup> @ 2:20 pm)
- Specific designated poster viewing times are:
  - Friday, November 3<sup>rd</sup>, 7:30 am – 8:20 am; 10:35 am – 11:05 am; 3:25 pm – 3:55 pm
  - Saturday, November 4<sup>th</sup>, 9:40 am – 10:00 am
- Presenters who are competing for a poster award must be at their posters during designated judging periods, which will align with the times above and be communicated in advance of the Symposium.
- Accepted abstracts (in PDF format) will be accessible by Symposium attendees via the Symposium conference app.

### POSTER AWARDS

**POGO will award \$250.00 for one outstanding abstract/poster submitted by a Fellow/Trainee in each of the following categories:**

- Nursing
- Clinical Medicine
- Medical Sciences
- Behavioural Disciplines



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### ORAL PRESENTATION

Six poster presenters will be selected to present their work on the main stage; **each presenter will have three minutes to summarize their poster in just one PowerPoint slide.** A multi-disciplinary selection committee will select the strongest abstracts to take part in this **timed session**. If you do not want your abstract to be considered for oral presentation, you can indicate this at the time of submission.

### POGO CONTACT INFORMATION

Questions? Please contact Clara Jordan - Manager, Education and Engagement • [cjordan@pogo.ca](mailto:cjordan@pogo.ca)



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**SAMPLE ABSTRACT**

**EXPLORING THE EFFECTS OF CARING FOR A CHILD WITH CANCER ON THE PARENTAL COUPLE: SYSTEMATIC LITERATURE REVIEW**

Burns W<sup>\*1,2</sup>, Péroquin K<sup>1</sup>, Sultan S<sup>1,2</sup>

<sup>1</sup>Université de Montréal, Montreal, QC

<sup>2</sup>CHU Sainte-Justine, Montreal, QC

**Objective:** Although the effects of cancer, its trajectory, treatment, and burden have been explored in parents (Vrijmoet et al., 2008) considered as individuals, the impact of cancer on the parental couple is a relatively novel area of research which has received little attention (cf. Da Silva, Jacob, & Nascimento, 2010; Long & Marsland, 2011). The aim of this research is to perform a systematic literature review of the research which explores the impacts of pediatric cancer on marital functioning in parents.

**Method:** A systematic literature review was conducted through the following databases: *PsycInfo*, *Web of Science*, *Pubmed*, *CINAHL*. Emphasis was placed on selecting cancer-related articles which described how the child's illness affected the parental couple.

**Results:** Overall, several factors appear to be associated with marital functioning in the context of pediatric cancer. For instance, discordance between partners' reaction to cancer, such as anxiety following diagnosis, is one predictor of marital distress (Dahlquist et al., 1993). Research also shows that mothers and fathers tend to use different coping strategies at diagnosis; with fathers using active-problem focused strategies while mothers use support seeking strategies (Hoekstra-Weebers et al., 1998). The perceived marital quality of the couple is also said to change following the child's illness. Some couples report deteriorations in marital dimensions (e.g., sexual relationships) while others report improvements (e.g., communication and interpersonal trust). The duration of their child's cancer also impacts perceived marital quality, with longer illness (four years or more) being related to gradual deteriorations (Lavee & Mey-Dan, 2003). Regardless of how the couple copes and adjusts to their child's illness, both partners' self-reported quality of life is affected and childhood cancer is said to have the same effect on both mothers and fathers (Goldbeck, 2001; Lavee & Mey-Dan, 2003).

**Conclusion:** Overall, research has demonstrated that the impact of childhood cancer extends beyond the patient to include the family and couple systems. Childhood cancer needs to be viewed systemically in order to properly understand its impact on all members of the family. Examination of parental couples' dynamics, such as interpersonal trust, communication, sexual relationships etc, is crucial in determining marital functioning, and subsequently providing appropriate resources. Fostering the overall resources of the family system is key in rehabilitation and prevention in child care. And having optimal marital functioning within the parental couple can be seen as a core resource.