

EASL abstracts submissions guidelines

Here are the main guidelines and essential rules to follow when preparing your abstract for submission.

Title

- Title should be on a single line (no paragraphs)
Length is **50-250 characters** (including spaces)
- Do not use all capital letters
- Do not use any abbreviations in the title
- Do not put a period at the end of the title
- **Title should not have each word capitalised**
- Consider using the term alcohol-related liver disease instead of alcoholic liver disease

Examples:

✓ This is a correct example title for your abstract

✗ THIS IS AN INCORRECT EXAMPLE TITLE FOR YOUR ABSTRACT. (all caps)

✗ This Is An Incorrect Example Title For Your Abstract. (each word capitalised)

Topic

Choose your topic and subtopic so that it will be reviewed in the appropriate category.

Keywords

Please choose between 2 and 5 keywords that best correspond to your abstract submission.

Authors

- To add an author, please enter first a valid e-mail address
- Mandatory fields: Complete first name (not only the initials), last name, institution and country
- When copying/pasting names, make sure there is no space after the name
- Indicate the role of the authors (main and presenting authors)

Affiliations

- Institution/company, city and country are mandatory
- Do not use all capital letters and do not capitalise the first letter of each word
- When entering new author's affiliation, if the affiliation is the same, make sure it is written the exact same way.
Best is to use the "Select from your recent affiliations" button, in order to avoid duplicates.

Disclosure - Conflict of interest

- List ALL the conflicts of interest even if unrelated to the abstract, for all the authors
- Indicate the company(ies) for the different types of conflicts for each author
- If the type is not listed, use the “other” field and indicate the nature of the conflict
- In case of use of off-label products, disclose the name of the product and the manufacturing company

Trainees and Postdocs / Nurses and AHPs Bursaries

If you are aged 35 or under and/or still in training (at the time of the first day of the event), and you are an EASL member (at the time of the submission), you can apply for a travel bursary.

- Upload proof of age or proof of training or employment letter (Nurses and AHP)
- Provide your EASL membership number

Abstract body

The following blocks are available in the abstract body:

- **Background and Aims:**
- **Method:**
- **Results:**
- **Conclusion:**

IMPORTANT: Figures, tables or images are **NOT** allowed.

- In total, the number of block characters (including spaces) must be between 500 and 2500

Main formatting rules:

- Define all abbreviations at first use
- Decimal point should be a period (2.5)
- Put spaces between signs and number (2.5 = a)
- Significance value should be small ‘p’, not bolded nor italic ($p > 2.5$)
- Avoid using symbols (use “alpha”, not α). Never use the “symbol” font

Modifications

- Modifications on draft abstracts can be done on the platform until the submission deadline of the given event

Withdrawal

- After you submit your abstract, requests for withdrawal of an abstract must be received in writing to abstracts.easlcongress@easloffice.eu latest until the abstract submission deadline.
- No refund will be granted after the submission deadline.
- Any withdrawal requested after the abstract submission deadline will not be considered and the abstract will be published.
- Past the submission deadline, EASL cannot guarantee the withdrawal of an accepted abstract to all paper and/or electronic publication(s).

New NAFLD Nomenclature

Steatotic liver disease (SLD) is the new overarching term with metabolic dysfunction-associated liver disease (MASLD) replacing nonalcoholic fatty liver disease (NAFLD). To summarise:

- Steatotic liver disease (SLD) is the overarching term to encompass the various aetiologies of steatosis.
- Nonalcoholic fatty liver disease (NAFLD) will now be metabolic dysfunction-associated steatotic liver disease (MASLD). MASLD encompasses patients who have hepatic steatosis and have at least one of five cardiometabolic risk factors.
- A new category, outside pure MASLD, termed MetALD (pronunciation: Met A-L-D) was introduced to describe those with MASLD who consume greater amounts of alcohol per week (140 g/week and 210 g/week for females and males respectively).
- Metabolic dysfunction-associated steatohepatitis (MASH) is the replacement term for NASH.
- Those with no metabolic parameters and no known cause have cryptogenic SLD.

When submitting your abstract, always use the new nomenclature as long as feasible. If the outdated terminology is used in reference to an old or ongoing trial or in reference to a publication etc., this would be an exception.

Detailed information about the nomenclature consensus process is available in the [Journal of Hepatology](#)

Alcohol related liver disease Nomenclature

EASL recommends the use of the terms below instead of the term "alcoholic" to end the stigmatizing language in alcohol and liver disease.

Prior term	Recommended term
Alcoholism	Alcohol use disorder
Alcoholic	Person with alcohol use disorder
Alcoholic hepatitis	Alcohol-associated hepatitis or alcohol-related hepatitis
Alcoholic liver disease	Alcohol-associated liver disease or Alcohol-related liver disease
Alcoholic cirrhosis	Alcohol-associated cirrhosis or Alcohol-related cirrhosis

We encourage you to adjust your abstract accordingly where appropriate. Thank you!

Updated: 07.07.2025