



ABSTRACT GUIDELINES

CASES invites abstracts in the following sport and exercise science-related themes.

1. Biomechanics and Motor Behaviour
2. Pedagogy
3. Physical Activity for Health
4. Physiology and Nutrition
5. Psychology
6. Sport and Performance.

The **deadline** for all abstract submissions (free communication presentation, poster and 5 slides in 5 minutes free communication presentation) is **10am Monday 2 February 2026**.

We welcome abstract submissions from students and professionals currently undertaking projects who do not have results available at this time but will be in a position to present the results at the time of the conference.

Abstracts should be no more than 350 words, containing no tables or figures, sub-headings or paragraph breaks. Word counts are calculated using the word count tool in Word. Abstract title, authors and institutions are not considered in calculating the wordage.

Studies using qualitative and/or quantitative methods are invited.

Meta-analyses and systematic reviews are invited, but literature reviews are not permitted.

On the on-line submission form the presenting author, on behalf of all of the authors, needs to declare that the material submitted is original and unpublished, and that it is not under consideration for presentation elsewhere.

All accepted conference abstracts will be published in an online supplement of the *Journal of Sports Sciences*. Free-access will be available upon publication of the supplement, until 31 August 2026, at www.tandfonline.com/rjss. From 1 September 2026 onwards, CASES members, (who may not already have access via their institution) can gain online access to the supplement, as well as the current volume of the *Journal of Sports Sciences*, by subscribing at the discounted rate of: £80 for regular member; and £40 for student members.

Published in affiliation with CASES, *Journal of Sports Sciences* publishes articles of the highest standard.

2024 Impact Factor: 2.5. Ranking: 43/136 (Sport Sciences)
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TYPES OF ABSTRACTS

Two types of abstracts are available:

1. **Scientific communication.** A scientific communication is an opportunity to share findings from scientific research.
2. **Applied practice.** An applied practice presentation is an opportunity to share findings from applied practice. The presentation could include findings from or reflections on applied work. These sessions should be particularly useful for practitioners and those members on supervised experience and/or seeking re-/accreditation. The aim of such abstracts is to allow practitioners to broadcast evidenced-based practice. As such, there should be clear evidence that the work is underpinned by theory and research. The needs analysis undertaken to determine the client's (or similar) requirements and the content of the resulting support/intervention package should be explained. The results should be presented in a format that is not only practically relevant but academically defendable. Authors are encouraged to explain how the results of the work have contributed to knowledge and practice in the field.

FORMAT OF PRESENTATION

Three presentation formats are available:

1. **Free communication presentation** - a 10-minute presentation of your work followed by questions, in a chaired session with other presenters. For programming reasons, slots for free communication presentations are limited and preference will be given to those demonstrating excellence in terms of originality, significance and rigor.





2. **Poster presentation** - your poster will be grouped according to disciplines, with the session chaired to allow a two-minute oral presentation of the poster with Q&A.
3. **5 slides in 5 minutes free communication presentation** - this presentation format entails a 5-minute presentation of empirical results followed by 2 minutes of questions in a chaired session of short communications.

NUMBER OF SUBMISSIONS FROM EACH PERSON AND RESEARCH TEAM

To assist with programming, each person is only permitted to submit an abstract as first named author for **one** free communication **or** 5 in 5 free communication presentation and one poster presentation. Normally only two abstracts from any **one research group** may be presented.

The first named author must present the abstract.

Presenters must pay the delegate fee for the conference by the specified deadlines. Otherwise, their abstracts will be withdrawn from the conference programme. Abstracts will be published in the online supplement of the Journal of Sports Sciences following the conference. Abstracts will not be published if the presentation is not delivered at the conference.

ABSTRACT PROOFS

After the conference, authors of accepted abstracts and who presented at the conference will be sent abstract proofs for minor amendments before their abstract is published. Corrections, to be returned by a deadline, must be limited to answers to queries, typographical and essential corrections only. Once the deadline has passed then changes cannot be made to the abstract.

ABSTRACT REVIEW PROCESS

Abstracts will be reviewed and authors will be notified of one of the following decisions:

1. Accept
2. Accept with minor amendments
3. Reject.

1. Abstract format guidelines

- 1.1 The following guidelines are designed to assist authors prepare their abstracts. Because of the differences across research methods, there is no one prescribed format for an abstract. Authors are encouraged to use a format most appropriate for the methods used.
- 1.2 Authors must adhere to the Journal of Sports Sciences guidelines for authors, extended guidelines are available here: <https://bit.ly/3T4qe6y>
- 1.3 Some important style points include:
 - British English spelling and punctuation is required.
 - Please use double quotation marks, except where "a quotation is 'within' a quotation".
 - Present dates in the format: 20 December 2023.
 - Abbreviations, units and symbols should conform to *Système International d'unités* (SI units).
 - For all abbreviations other than units, write the word or words to be abbreviated in full on the first mention followed by the abbreviation in parentheses.
 - Avoid the use of non-standard abbreviations within the text.
 - Use capital and italic "P" for p values; use "years" not "yrs"; use "min", "h", "s" for minutes, hours, seconds. See extended style guidelines online for more information.
- 1.4 Authors are encouraged to include social media contact details, such as X handles, as part of their correspondence details.



1.5 An example abstract is provided overleaf for a scientific communication abstract. The format of an applied practice abstract can be tailored to suit the context of the work being submitted. It is anticipated that most abstracts will follow the format of:

- A *title* that should be concise and reflect the work being described. Only the first word begins with a capital letter, unless a proper noun is used. Do not include any acronyms in the title.
- Author names and affiliations* formatted as per the example abstracts. Please also provide an email for the corresponding author and a social media handle here if they wish for this to be associated with the abstract.
- A brief introduction* in which the authors need to present the theoretical and/or empirical framework that the study or area of practice builds upon, or is related to.
- Abstracts have an *aim/purpose*, which should outline the principal objectives and scope of the study or work. For a quantitative research design that tests a specific hypothesis, it might be: "Therefore, the purpose of this study was to investigate the influence of A on B". Hypotheses may not be relevant to qualitative research, such as in the second abstract example.
- The *methods* section describes the sample, experiments and how data were collected and analysed so that other researchers could repeat the research. Please use the term 'participants' (not 'subjects'). There needs to be a statement indicating that ethical approval was granted for studies involving human or animal participants. For example, "With institutional ethics approval..." Applied practice abstracts should outline the context and nature of the practice being reported.
- Authors must provide a clear explanation of their *results* or applied outcomes and are encouraged to use the most appropriate format to do this. Quantitative researchers should report effect sizes and *P* values (e.g. $P = 0.048$). $P < 0.01$ is appropriate for values exceeding 3 decimal places (e.g. $P = 0.000021$). Qualitative researchers are encouraged to use themes and/or quotations to illustrate their findings.
- In the *conclusion* authors must conclude the relevance of their findings in relation to existing knowledge. This could be theory, research, and/or practice. Authors are encouraged to provide clear recommendations on the value of their work and reflect on the extent to which findings relate to one or more educational, professional development or applied issues for sport and exercise scientists.

- The font should be Arial size 12. Statistical abbreviations should, normally, be italicised.
- References must be kept to an absolute minimum and must be used only if essential. When used, any references must be incorporated into the text of the abstract. The required style of referencing for abstracts is shown in section 2.

2. Referencing

Referencing must follow the APA reference guide provided at: www.tandf.co.uk/journals/authors/style/reference/tf_APA.pdf

The following are examples illustrating the referencing method to be used.

- The resultant hand forces were calculated and projected onto the forward direction (propulsive force) for each phase of the stroke (Schleihauf, A.A., 1979, In J. Terauds & W. Bedingfield (Eds.) *Swimming III* (pp. 300-316). Baltimore, MD: University Park Press). [This illustrates the citation of a paper or chapter in a book].
- A 1% treadmill grade was used, after the recommendations of Jones and Doust (1996, *Journal of Sports Sciences*, 14, 321- 327). Our findings were similar to those previously reported (e.g. Jones & Doust, 1996). [This illustrates the first and second citations of a journal paper].
- Propelling efficiency was defined as ... (Toussaint, 1988, *Mechanics and energetics of swimming*. Amsterdam: Rodopi). [This illustrates the citation of a book].
- The differences between groups for the nine release parameters from Best *et al.* ([1993]. *Journal of Sports Sciences*, 11, 315-328) ... [This illustrates the citation of a source, here a journal paper, with more than two authors].

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Influence of cold-water immersion on indices of muscle damage after prolonged intermittent shuttle running

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Start of introduction, 1.5c

Cold-water immersion (cryotherapy) can aid recovery from muscle-damaging exercise (Eston and Peters, 1999, *Journal of Sports Sciences*, 17, 231-238). Participation in sports that involve prolonged periods of variable-speed running frequently result in damage that is reflected in delayed onset of muscle soreness. Therefore, the aim of this study was to assess effects of cold-water immersion on indices of muscle damage after the completion of the Loughborough Intermittent Shuttle-Running Test (LIST) (Nicholas and Nuttall, 2000, *Journal of Sports Sciences*, 18, 97-104). Participants performed six 15-min blocks of activity that included walking, jogging, cruising and sprinting in a pattern that is common in sports such as football. Completion of the LIST results in muscle damage and soreness (Thompson, Nicholas and Williams, 1999, *Journal of Sports Sciences*, 17, 387-395). With institutional ethics approval, 20 men (mean age: 22.3 ± 3.3 years; stature: 1.80 ± 0.05 m; body mass: 83.7 ± 11.9 kg) (mean \pm s) completed 90 min of the LIST protocol. After exercise, participants were randomly assigned to either 10 min cold-water immersion (10 ± 0.5 °C) ($n = 10$) or a non-immersion control group ($n = 10$). Ratings of perceived soreness, changes in muscle function and efflux of intracellular proteins were assessed before exercise, during treatment and at regular intervals up to 7 days after exercise.

Start of aim/purpose, 1.5d

Correct referencing method, do not use abbreviated Journal Titles (see section 2 for examples)

Exercise resulted in severe muscle soreness, temporary muscle dysfunction, and raised serum markers of muscle damage. All peaked within 48 h after exercise. Cryotherapy administered immediately after exercise reduced muscle soreness at 1, 24, and 48 h ($P < 0.05$). Decrements in isometric maximal voluntary force of the knee flexors were less after cryotherapy at 24 ($12 \pm 4\%$) and 48 h ($3 \pm 3\%$) than without ($21 \pm 5\%$) and mean $14 \pm 5\%$ (mean \pm sx) respectively; ($P < 0.05$). Exercise-induced increases in serum myoglobin concentration and creatine kinase activity peaked at 1 and 24 h, respectively ($P < 0.05$). Cryotherapy had no effect on the creatine kinase response, but reduced myoglobin 1 h after exercise ($P < 0.05$). The results suggest that cold-water immersion immediately after prolonged intermittent shuttle running reduces soreness and indices of exercise-induced muscle damage and could be a useful aid to recovery.

Start of method, 1.5e

There should be a statement indicating that ethics approval was granted

Start of main measurements

Start of results, 1.5f

Start of conclusions and recommendations, 1.5g



AN EXAMPLE ABSTRACT



Co-design of a Physical Activity and Sedentary Behaviour Intervention for Adults with Fabry Disease

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Start of introduction, 1.5c

Fabry disease is an inherited metabolic disorder. It is caused by a genetic fault in the alpha-galactosidase A enzyme, which is responsible for catalysing the breakdown of glycoproteins and glycolipids (primarily globotriaosylceramide) in the lysosomes of cells. Individuals with Fabry disease experience a build-up of globotriaosylceramide which results in multi-organ disease, most notably affecting the brain, heart and kidneys. Fabry disease can also have a profound impact on mental health and quality of life. Currently, treatments for Fabry disease are pharmacological and predominantly focus on the physical symptoms of the disease. Non-pharmacological interventions that help to improve mental health and quality of life in Fabry disease are scarce. In the general population and individuals with disabilities, increasing physical activity and reducing sedentary time is associated with improved mental health and quality of life. Therefore, the aim of this study is to codesign a physical activity and sedentary behaviour intervention tailored to the needs of adults with Fabry disease. With university and NHS ethical approvals, views and experiences of physical activity and sedentary behaviour were explored via focus groups with 13 adults with Fabry disease, eight family members, and six MPS Society (charity) staff. Semi-structured interviews were also conducted with 10 healthcare professionals (consultants, registrars, clinical nurse specialists, and a physiotherapist). The information gathered from the focus groups and interviews informed participatory workshops (with adults with Fabry disease) to test intervention concepts and define the intervention design. Data is being analysed using the Framework Method, combining both inductive and deductive coding. Themes generated from the focus groups and interviews suggest that the intervention would comprise of five components: (1) an initial assessment of baseline physical activity levels and sedentary behaviour, and goal setting with a healthcare professional, (2) tailored feedback on physical activity and sedentary time, (3) online education covering the importance of engaging in physical activity and limiting sedentary behaviour, and examples of adaptable physical activities, (4) a wearable device that tracks physical activity and sedentary time, and (5) peer support. Workshops are currently being planned to test and refine intervention concepts. This study has identified intervention strategies to promote physical activity and limit sedentary behaviour in adults with Fabry disease. The feasibility, acceptability and effectiveness of the codesigned intervention will be subsequently evaluated, which could help to optimise the management of Fabry disease in the future.

Start of aim/purpose, 1.5d

Start of methods

There should be a statement indicating that ethics approval was granted

Start of results, 1.5f

Start of conclusions and recommendations, 1.5g

CHECKLIST

- The abstract is no more than 350 words, contains no tables or figures, sub-headings or paragraph breaks.
- Abstract title.
- Author names (no titles such as Prof/Dr/FBases).
- Authors' affiliations/institutions.
Please don't include departments.
- Corresponding author's email address.
- Corresponding author's social media handle (optional).
- The abstract contains: a brief introduction to the study; aim/purpose; participants, design and methods and treatment; main measurements; results (effect sizes and confidence intervals of difference/change are preferred to *P* values); conclusions and recommendations.
- A statement indicating that ethics approval was granted.
- References are in the correct format.