

*6th International Symposium on*



# **Hepatitis C & Related Viruses**

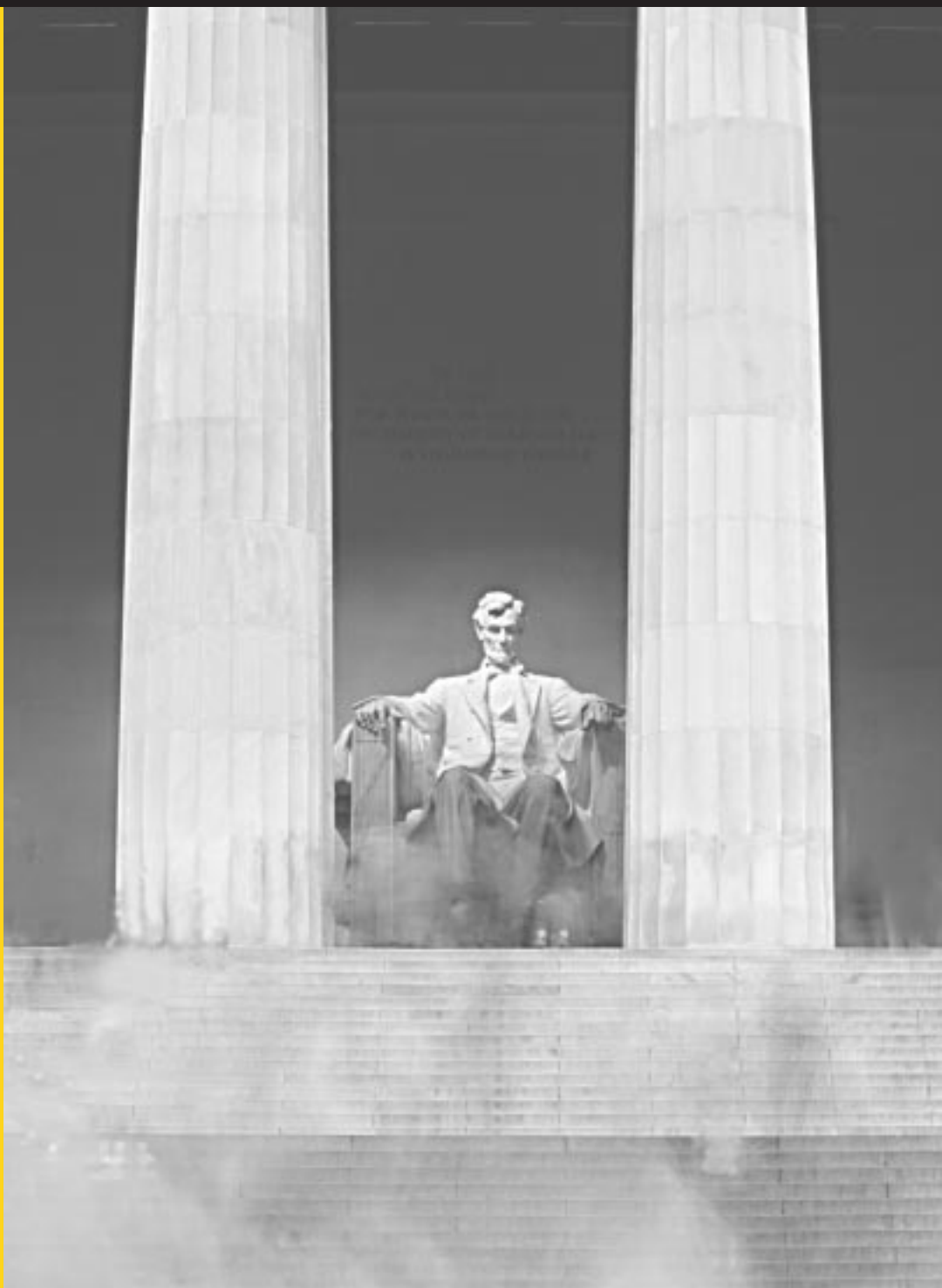
*Molecular Virology and Pathogenesis*

**Natcher  
Conference  
Center**

**National  
Institutes  
of Health**

**Bethesda,  
Maryland**

**June 6–9,  
1999**



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## Organization

### Program Chairs

T. Jake Liang  
Jay H. Hoofnagle

### Local Committee

Harvey Alter  
Jens Bukh  
Suzanne Emerson  
Stephen Feinstone  
John Gerin  
Leslye Johnson  
Thomas Kresina  
Robert Purcell  
Barbara Rehmann  
Leonard Seeff  
Edward Tabor

### Conference Manager

Tracy Morgan  
Computer Craft Corporation  
6701 Democracy Boulevard  
Suite 401  
Bethesda, MD 20817

Tel: (301) 493-9674  
Fax: (301) 530-0634

E-mail:  
[morgan@computercraft-usa.com](mailto:morgan@computercraft-usa.com)

### International Committee

Ferruccio Bonino  
Marc Collett  
Eric Gowans  
Michael Houghton  
Tatsuo Miyamura  
Charles Rice  
Kunitada Shimotohno  
Heinz-Jurgen Thiel

# Overview



*The Sixth International Symposium on Hepatitis C Virus and Related Viruses Molecular Virology and Pathogenesis will convene international scientists from various disciplines with a research interest in HCV and related viruses, including hepatitis C virus, pestiviruses and flaviviruses. The aim is to provide an open forum for the exchange of up-to-date knowledge on the basic science and translational research of these viruses and their associated diseases.*

*Topics will include:*

- **Molecular Virology**
- **Enzymology**
- **Cell Biology**
- **Immunology**
- **Pathogenesis**
- **Model Systems**
- **Vaccine and Antiviral Development**

*While the focus of the symposium is on basic science, translational research and clinical investigation with strong bench-to-bedside components are also emphasized. In addition, patient-oriented studies with little or no laboratory components, such as clinical trials, epidemiology, natural history, and outcome research will be featured in a satellite symposium.*

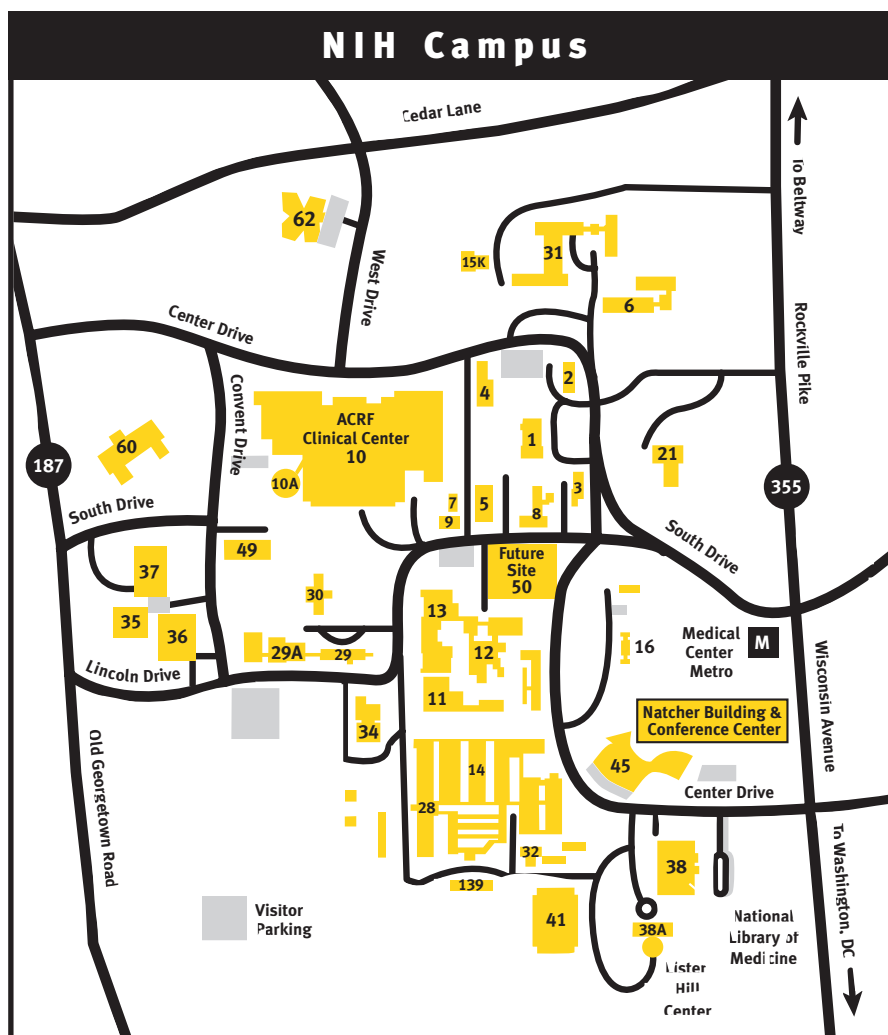
# General Information

**Dates** Sunday, June 6 to Wednesday, June 9, 1999

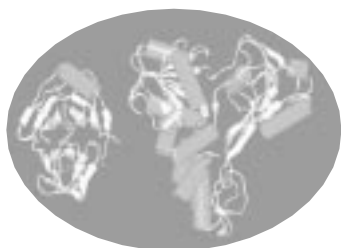
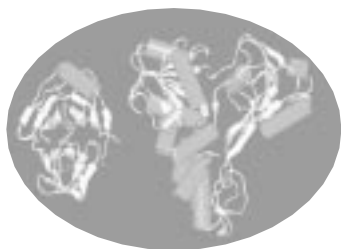
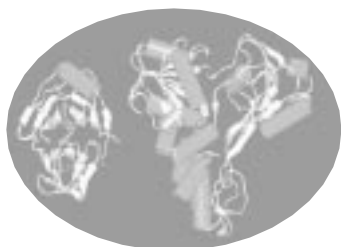
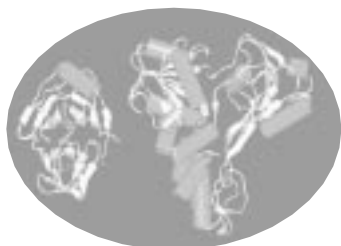
**Venue** Natcher Conference Center, Building 45

**Location** National Institutes of Health  
Bethesda, Maryland, USA  
(Outside Washington, DC)

**Conference Manager** Tracy Morgan  
ComputerCraft Corporation  
(301) 493-9674  
[morgan@computercraft-usa.com](mailto:morgan@computercraft-usa.com)



# Preliminary Program



## Sunday, June 6, 1999

### Oral Session 1

*Structural Proteins:  
Biogenesis, Assembly and  
Receptor Interaction*

### Oral Session 2

*Non-Structural Proteins:  
Functions in Replication*

### Poster Session 1

Dinner/Reception

## Monday, June 7, 1999

### Keynote Lecture 1

**Oral Session 3**  
*Translation and  
RNA Replication*

**Oral Session 4**  
*Model Systems*

**Oral Session 5**  
*Virus-Cell Interactions*

### Poster Session 2

Dinner/Reception

## Tuesday, June 8, 1999

### Keynote Lecture 2

**Oral Session 6**  
*Pathogenesis and  
Carcinogenesis*

**Oral Session 7**  
*Immunology*

**Oral Session 8**  
*Vaccine Development*

### Poster Session 3

**Satellite Symposium:**  
*Therapy and Diagnostics*

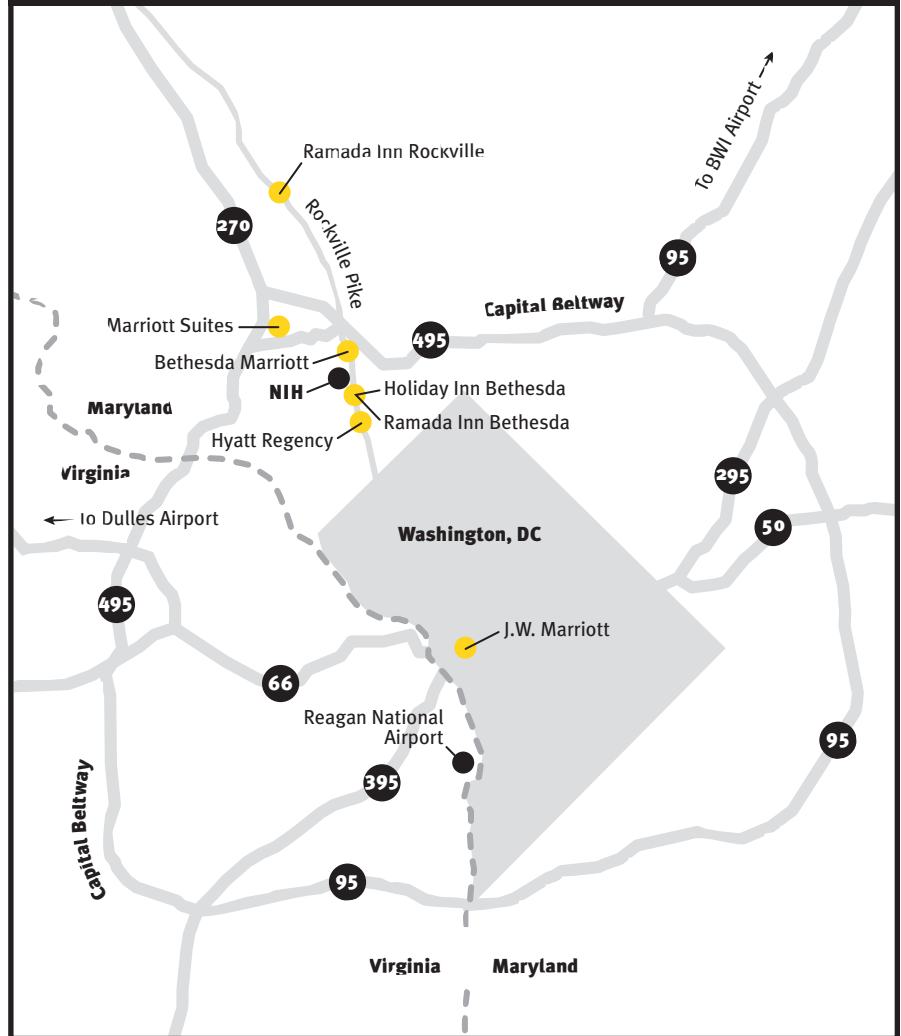
## Wednesday, June 9, 1999

### Keynote Lecture 3

**Oral Session 9**  
*Antiviral Development  
and Therapy*

**Oral Session 10**  
*Epidemiology and  
Natural History*

## Hotel Map



# Hotel Accommodation

The meeting organizer, ComputerCraft Corporation has negotiated various room rates at a variety of local hotels. All participants must make their own individual hotel arrangements directly with the hotel and will be responsible for their own accounts. To obtain the special rate participants must state that they will be attending the *International Hepatitis* meeting.

**The Hotel reservation deadline is Monday, May 3, 1999.**

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## **J.W. Marriott Hotel**

1331 Pennsylvania Avenue  
Washington, DC 20004-1796  
Phone: (202) 393-2000  
Fax: (202) 626-6915

**Rate Per Night: \$199**

*Approx. Miles from NIH: 12*

## **Bethesda Marriott Hotel**

5151 Pooks Hill Road  
Bethesda, MD 20814  
Phone: (301) 897-9400  
Fax: (301) 897-4156

**Rate Per Night: \$150**

*Approx. Miles from NIH: 1*

## **Ramada Inn Bethesda**

8400 Wisconsin Avenue  
Bethesda, MD 20814  
Phone: (301) 654-1000  
Fax: (301) 986-1715

**Rate Per Night: \$119**

*Approx. Miles from NIH: 1*

## **Hyatt Regency Hotel**

One Bethesda Metro Center  
Bethesda, MD 20814  
Phone: (301) 657-1234  
Fax: (301) 657-6411

**Rate Per Night: \$139 Single  
\$164 Double**

*Approx. Miles from NIH: 1*

## **Holiday Inn Bethesda**

8120 Wisconsin Avenue  
Bethesda, MD 20814  
Phone: (301) 652-2000  
Fax: (301) 652-3806

**Rate Per Night: \$112.50 Single  
\$122.50 Double**

*Approx. Miles from NIH: 1*

## **Ramada Inn Rockville**

1775 Rockville Pike  
Rockville, MD 20852  
Phone: (301) 881-2300/  
(800) 255-1775  
Fax: (301) 881-9047

**Rate Per Night: \$126**

*Approx. Miles from NIH: 4*

## **Marriott Suites**

6711 Democracy Boulevard  
Bethesda, MD 20817  
Phone: (301) 897-5600  
Fax: (301) 530-1427

**Rate Per Night: \$164**

*Approx. Miles from NIH: 2*



# Miscellaneous

## Passport

Every foreign participant must hold a current and valid passport to enter the United States of America. The Visa waiver program will allow a stay in the United States for up to 3 months.

## Banks

Business hours:  
Monday to Friday, 9:30–15:00

Limited service on Saturdays,  
9:30–12:00

Closed Sundays

## Currency

The U.S. dollar is used throughout the United States and the use of other foreign currencies is limited.

## Traveler's Checks and Credit Cards

Traveler's checks are widely accepted in stores, hotels and restaurants for the payment of goods when accompanied by a passport.

All major credit cards are accepted.

## Evening Functions

### Sunday, June 6, 1999

A crab feast dinner to be held at the National Institutes of Health. Further information to follow.

### Monday, June 7, 1999

A special evening reception to be held at the Smithsonian Institution's National Air and Space Museum in Washington, DC. Further information will follow on registration.

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All electrical appliances run on 120 volts.

Lower priced accommodations are available if required. Please contact Tracy Morgan at:

[morgan@computercraft-usa.com](mailto:morgan@computercraft-usa.com)



# Transportation

**Airport:** The area is serviced by three major airports: Reagan National Airport (15 miles from Bethesda), Washington Dulles International Airport (25 miles from Bethesda), and Baltimore-Washington International (BWI) Airport (35 miles from Bethesda).

**Train:** Amtrak services from New York, Philadelphia and Baltimore.

**Metro:** Local rail transportation is provided by Metrorail

**Symposium Shuttle Services:** Transportation will be provided from the hotels to the NIH campus where the meeting is to be held. A bus shuttle schedule will be presented to you when you check in at the hotel.



# Abstract Information

To secure your place in the symposium you **must submit an abstract** and a completed registration form and registration fee. All other participants will be on a first-come first-serve basis due to space limitations.

Abstracts must be submitted typed and composed within the limits indicated on the attached form and a copy faxed to the attention of:

Tracy Morgan  
ComputerCraft Corporation  
Fax (301) 530-0634

The original must be submitted on a **PC formatted disk in MS Word**.

Alternatively you may **E-mail the abstract** to:

Tracy Morgan  
morgan@computercraft-usa.com

and **fax a hard copy** to:  
(301) 530-0634.

All abstracts must be received by **Friday, February 19, 1999** and because of space limitation, it is recommended that you **register at the same time**.

Notice of abstract acceptances will be sent out to all registered participants before **April 23, 1999**.

**Registration Deadline:**  
**Friday, April 16, 1999**

Each participant will receive a Program and Abstract book that

will be available at the symposium.

## Abstract Guidelines

**Title:** The title should be brief and clearly capitalized. Omit author degrees, titles and institutional appointments. Underline the authors names; initials precede last names. Specify name and location of institute where research was conducted.

## Abstract Structure

The abstract should be a maximum of **350 words** and structured as follows:

- A sentence stating the purpose of the study
- A brief description of the methods involved, if pertinent
- A concise summary of the results
- A statement of the conclusions reached.

## Abstract Style

- Begin the body of the abstract on a new line that is indented three spaces
- Short abstracts should be centered within the page
- Leave no top or left margins
- Please use fonts from 10–12 points in size

Based on the categories below, please specify on the abstract form the category in which you would like your abstract to be considered:

## Topic Categories

1. Structural Proteins:  
Biogenesis, Assembly and Receptor Interaction
2. Non-Structural Proteins:  
Functions in Replication
3. Translation and RNA Replication
4. Model Systems
5. Virus-Cell Interactions
6. Pathogenesis and Carcinogenesis
7. Immunology
8. Vaccine Development
9. Antiviral Development and Therapy
10. Epidemiology and Natural History

## Junior Investigator Stipend

A limited number of stipends will be available to junior investigators from academic institutions (less than or equivalent to Assistant Professor) to attend the meeting. These will be awarded based upon the quality of the abstract submitted. A letter from the applicant's department or laboratory head confirming his/her academic status must accompany the abstract.

# Abstract Form

6th International Symposium on

## Hepatitis C & Related Viruses

Molecular Virology and Pathogenesis

June 6-9, 1999

National Institutes of Health

Bethesda, Maryland

Abstract Submission Deadline:  
Friday, February 19, 1999

Registration Deadline:  
Friday, April 16, 1999

*Because of space limitation, it is recommended that you register when submitting an abstract*

### A. Category Number *(See page 12 for list)*

1st Choice \_\_\_\_\_

2nd Choice \_\_\_\_\_

### Preference for Type of Presentation *(Check one only)*

- ☐ Oral Presentation  
☐ Poster Presentation  
☐ Oral or Poster Presentation

### B. Awards

Please check the box if abstract is to be  
considered for the **Junior Investigator**  
**Stipend**

☐

Please consider my abstract for an award  
*Based on eligibility and accompanying letter*  
*(See page 12)*

### C. Submission Format

☒ *(Please refer to page 12 and check one)*

**E-mail** file and **fax** hard copy

☐ (Submit both at same time)

**Fax** hard copy and **mail** disk

### D. Abstract Presenter

\_\_\_\_\_

*(If different from corresponding author please print)*

### E. Corresponding Author

\_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

*(For office use)* ☐ Proofed ☐ Categorized ☐ Checked against hard copy

# Registration Information

Updated information regarding this meeting is available through ComputerCraft Corporation's Web site:

**[www.computercraft-usa.com](http://www.computercraft-usa.com)**

## Registration Fee

**\$175 per person**

## Registration Fee Payment

The registration fee payable in U.S. dollars may be paid in one of two ways:

**By Check:** Made payable to *International Hepatitis*. Please enclose a copy of the registration form with the check.

**By Credit Card:** Please enter your credit card details on the registration form and fax the form and mail the original to:

*6th International Symposium on Hepatitis C and Related Viruses*

c/o ComputerCraft Corporation  
6701 Democracy Boulevard  
Suite 401  
Bethesda, MD 20817  
Fax: (301) 530-0634

## Cancellation and Refunds

Cancellation must be made in writing to the meeting organizer, ComputerCraft Corporation. A refund of the registration fee will be governed by the following conditions:

*Cancellations received by*  
Friday, April 30, 1999: 50%

*Cancellations received after*  
Friday, April 30, 1999: No refund

All refunds will be issued after the symposium.

# Registration Form

*Please print or type*

**Registration Deadline: Friday, April 16, 1999**

Name \_\_\_\_\_

Degree \_\_\_\_\_

Title \_\_\_\_\_

Department \_\_\_\_\_

Division \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

E-Mail \_\_\_\_\_

☐ Please check here for attendance to the dinner on Sunday, June 6, 1999 (included in the registration fee)

Guest attendance to the dinner on Sunday, June 6, 1999 (Additional \$20 per person) If yes, \_\_\_\_\_ person(s)

☐ Please check here for attendance to the banquet on Monday, June 7, 1999 (Additional \$25 fee)

Guest attendance to the banquet on Monday, June 7, 1999 (Additional \$35 per person) If yes, \_\_\_\_\_ person(s)

**Registration fee: \$175 Payable either by Check, or Credit Card**

**Credit Card Payment** *(please check one)*

☐ Visa ☐ Mastercard ☐ Amex Total \$ \_\_\_\_\_

Card Number \_\_\_\_\_

Expir. Date \_\_\_\_\_

Signature \_\_\_\_\_

Please fax this form and mail the original with the payment to:

*The 6th International Symposium on Hepatitis C and Related Viruses*

c/o ComputerCraft Corporation

6701 Democracy Boulevard, Suite 401

Bethesda, MD 20817

Fax: (301) 530-0634

*If you have any questions, please contact:* Tracy Morgan, Conference Manager  
at (301) 493-9674 or E-mail: [morgan@computercraft-usa.com](mailto:morgan@computercraft-usa.com)