



EHC 26

9–12 December 2026
Berlin (DE) and online

20th European Headache Congress

headache-congress.org

Late-breaking abstract submission guidelines

Please read this information carefully before proceeding to the online submission form.

IMPORTANT DATES

Late-breaking deadline: 18 October 2026, 23:59 (CET)
Abstract review: October/November 2026
Abstract notification: November 2026

GENERAL

1. Please prepare your abstract in an extra e.g. Word-file before moving on to the online system.
The abstract outline must be as followed: Question/Objective - Methods - Results - Conclusions. The number of characters is limited to 2,000 (including spaces).
2. Abstracts can only be submitted online via the online abstract submission form.
3. Abstracts must be submitted in English.
4. Please fill in the conflict of interest disclosure form before submitting your abstract and upload it while the submitting process.
5. Abstracts sent by post or email will not be accepted. No exceptions will be made.

DEFINITIONS

Submitting author: Person who submits the abstract.
Presenting author: Person who will physically present the abstract at the congress and who is marked as the presenter in the programme.
Corresponding author: Person who will be included in all communications on the abstract.

PUBLICATION POLICY

Accepted abstracts will be published in the virtual format of the “The Journal of Headache and Pain”.
All accepted abstracts will be included in the online programme.

Please note that abstracts that have been published previously as full article cannot be published in the abstract booklet by the Journal of Headache and Pain.

CONTACT US

General enquiries
headache-congress@conventus.de

Abstract management
abstract@conventus.de
+49 (0) 3641 31 16-161



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TOPICS

Basic and Translational Science in Headache

Pathophysiology

- Neurobiology and Neurophysiology (Human)
- Neurobiology and Neurophysiology (Non-Human)
- Neuroinflammation and Immunology
- Genetics and Epigenetics
- Biomarkers and Hormones (e.g. GLP-1)

Therapies in Migraine and Tension Type Headache

- Pharmacology and Mechanisms of Therapeutics
- Neuromodulation Techniques
- Early Clinical Trials Phase I
- Clinical Trials Phase II–III
- Clinical Trials Phase IV

Cluster Headache and TACs

- New Imaging Findings
- Pathophysiological Advances
- Therapies (Pharmacological and Non-Pharmacological)

Clinical Outcomes and Metrics

- Real-World Evidence Studies and Burden of Headache
- Patient-Reported Outcomes and Quality of Life Metrics
- Long-Term Outcomes of Preventive Treatments
- Evaluation of Non-Pharmacological Interventions (e.g., Mindfulness, Acupuncture)
- Assessment of Combination Therapies
- Prevention Strategies for Migraine and Headache Disorders

Advances in Clinical Headache Care

- Standardization of Diagnostic Criteria and Tools
- Integration of Patient-Reported Outcomes in Routine Practice

- Strategies for Reducing Delays in Diagnosis and Treatment
- Integration of AI in Diagnosis and Treatment
- APPs and Wearables

Equity and Special Populations

- Sex and Gender Differences in Headache Care
- Pediatric and Adolescent Headache Research
- Headache Care in Vulnerable Populations
- Children and CGRP

Secondary Headaches – Imaging, Pathophysiology and Therapy (Human)

- Medication Overuse (Headache)
- News on Red Flags
- CSF and Headache
- Management in the Emergency Department

Comorbidity-Focused Headache Research

- Comorbid Psychiatric Disorders (Depression, Anxiety, PTSD) and Headache
- Sleep Disorders and Headache
- Migraine and Cardiovascular Disorders
- Migraine and Obesity
- Chronic Overlapping Pain Conditions

Environmental & Lifestyle Determinants

- Planetary Health and Headache Disorders
- Light Exposure and Circadian Disruption
- Urbanization, Sensory Load and Workplace Related Headaches
- Nutrition Science and Dietary Triggers
- Caffeine: Risks, Benefits, Dependence
- Physical Activity and Exercise Biology
- Climate Change and Headache Triggers
- Air Pollution and Neuroinflammation

Others

Your headache research that doesn't fit into any of the topics before.



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AFTER THE SUBMISSION

1. The reviewers will judge the abstracts according to the relevance to EHC26. They will assess the standard of English, objectivity of statements, description of the work, suitability of methods to aims, conclusions confirmed by objective results, ethics, scientific value, potential clinical value, originality of work and overall impression.
2. The submitting, presenting and corresponding authors will be notified in November 2026, whether the abstract has been accepted. Notifications will be sent via email to the email address provided during submission. It is the authors' responsibility to ensure that emails from EHC26 can reach them.
3. The **presenting author must be a registered participant**. Please note that the presenting author is not automatically registered by submitting an abstract. Regular registration is obligatory and binding and implies payment of the registration fee. For registration, please click [here](#).

PRESENTATION OF ABSTRACTS

1. Abstracts can be accepted either as ePoster or oral presentations.
2. If your abstract is accepted as an ePoster, you will be requested to be available for discussion during the corresponding moderated poster session.
3. Oral presentations will be given further information on length of lecture and presentation details closer to the meeting.
4. Full presentation guidelines will be sent after the final allocation of abstracts to the programme.

RULES

Failure to observe these guidelines may result in your abstract not being accepted.

1	An abstract can be submitted to the EHC26 if it has been presented or published previously, but cannot be published in the official abstract booklet in "The Journal of Headache and Pain".
2	The correct topic must be selected to ensure correct scoring. The content of the abstract must be topic related. The scientific programme committee reserve the right to re-categorise an abstract.
3	Abstracts must contain data and meet international ethical standards.
4	Abbreviations should be defined at first mention.
5	Trade names cannot be mentioned in the title. However, trade names in brackets will be accepted in the body of the text.
6	The presenter or one of the co-authors has a conflict of interest, this must be clearly stated (as per certification rules). An abstract cannot be accepted, if the "conflict of interest disclosure" has not been completed. Please use this template .
7	The abstract cannot contain more than 2,000 characters (approx. 250 words) – This count includes only the abstract itself (including blank spaces and punctuation) – not data of authors and any attachments.



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8	The abstract must be structured into the following sections: Question/Objective; Methods; Results; Conclusions.
9	Please use single line spacing, type the text unjustified, without hyphenating words at line breaks. Use hard returns only to end headings and paragraphs, not to rearrange lines.
10	Greek and other special characters may be included. If you are unable to reproduce a particular special character, please type out the name of the symbol in full
11	SI units should be used throughout (litre and molar are permitted, however).
12	Web links (URLs) should be provided in full, including both the title of the site and the URL, in the following format: Mouse Tumour Biology Database [http://tumor.informatics.jax.org/cancer_links.html]
13	Tables should be numbered (e.g. Table 1) with a short, descriptive title (Short title, maximum one sentence).
14	Tables must be cited/called out in the text.
15	Tables should be formatted using the "Table function" in a word processing program to ensure that columns of data are kept aligned when the file is sent electronically. Tables should not be created with tabs or submitted as images. No colour or shading should be added
16	Figures and illustrations should be numbered (e.g. Figure 1) with a short, descriptive title. This text must form part of the text file and not the figure file. Figures must be cited/called out in the text. You must have all necessary permissions to use figures.
17	Figures must be supplied electronically in the body of the text at 300 dpi minimum. Each figure must be inserted as a single, composite file (parts must not be separate graphical units). Don't include figures with embedded hyperlinks.
18	Acknowledgements: Brief acknowledgements may be included and should be placed after Conclusions and before the References. If the abstract is being presented on behalf of a study group, this information should be noted here rather than in the author list.
19	For all abstracts that include details, images, or videos relating to an individual person, written informed consent for the publication of these details must be obtained from that person (or their parent or legal guardian in the case of children under 18) and must be stated within the abstract. Please include a sentence within the abstract, that patient(s) gave their consent to publish their details in an open access journal.
20	All references should be cited/called out consecutively in the text, using numbers in square brackets. Only papers that have been published, or are in press, or are available through public e-print/preprint servers should be included in the reference list.
21	References should be laid out at the end of the abstract in Vancouver style and be preceded by the relevant reference number.



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| 22 | Once the abstract is submitted, it can be re-edited and modified until the submission deadline (18 October 2026, 23:59 /CET). The submitting author will be required to create a user account. In order to log back into the portal, please make a note of the username and password created during the process. |
| 23 | If you have successfully submitted your abstract, you will receive a confirmation number. If no confirmation number is received, the abstract cannot be considered as successfully submitted and accepted. |
| 24 | If you leave the system without saving the abstract all data is lost. The submitted/draft abstracts cannot be edited after the submission deadline (18 October 2026, 23:59 /CET). |
| 25 | Please ensure that your abstract does not contain spelling, grammatical or scientific errors. No corrections are possible after the submission deadline. The abstract will be reproduced exactly as submitted. No proof reading will be completed. |