

**Newsletter Physiotherapy SIG / International Headache Society  
December 2025**

Dear all who have shown an interest in following our activities,

The last month of the year is always a good time to recap what has happened in 2025 and to make plans for the coming year.

This first year of our Special Interest Group has been very exciting — and lots of fun, too! We were overwhelmed by the interest from health professionals all over the world and by your willingness to participate in our activities.

**Two main events took place:****1. Kick-off online meeting (April)**

In April, we held our kick-off online meeting, where we presented our plans and ideas. More than 100 people attended, which reassured us that we are doing the right thing at the right time. We are extremely grateful to the IHS for having us as their official group. The well-respected name and the support are extremely helpful in promoting our activities.

**2. Hybrid meeting at the International Headache Conference (São Paulo, September)**

Our second event was a hybrid meeting, for which we were provided with a physical meeting room at the International Headache Conference in São Paulo in September. It was attended by approximately 60 physiotherapists in person and joined by about 50 attendees online. The results from this meeting were sent to you in our last email.

---

**Surveys**

We also conducted two surveys — one focusing on education about headaches and another on current treatment approaches for patients with headaches. Here is a summary of both:

**Survey 1: Educational Needs Assessment****Participant Profile:**

The survey attracted 194 physiotherapists from 29 countries (including Australia, Brazil, Spain, Italy, UK, Switzerland, Denmark, Canada, and Germany), with 74% having over 10 years of clinical experience and 82% holding postgraduate qualifications. The majority (73%) work in private practice, with 20% in research/academic roles. Notably, 25% of respondents reported that headache patients comprise more than half of their clinical workload.

### **Current Gaps in Headache Education:**

*Undergraduate Level:* Respondents identified the need for comprehensive introductory-level content covering fundamental headache topics, including ICHD, the common forms of headache, pain mechanisms related to headache, structured clinical assessment, differential diagnosis including red flags and serious pathology screening, treatment approaches and research updates about headache management.

*Postgraduate Level:* At the postgraduate level, participants called for in-depth coverage of all headache-related topics with greater emphasis on treatment approaches and complex case management. Specific areas identified as currently missing include: medications for headache, interdisciplinary management approaches, chronic pain concepts, neuroscience education, postural control and balance, comorbidities, lifestyle factors, and advanced management strategies such as graded exposure and non-invasive neuromodulation.

These findings highlight significant educational gaps and will inform our development of educational standards and curriculum recommendations for physiotherapy programs worldwide.

---

## **Survey 2: Current Headache Treatment**

### **Participant Profile:**

The survey attracted 104 physiotherapists and osteopaths from 26 countries across six continents.

- 19% held a Bachelor's degree
- 43% a Master's degree
- 26% a PhD (10% other qualifications)

Most respondents reported seeing cervicogenic headaches and migraine very often in clinical practice, tension-type headaches often, and headaches associated with temporomandibular disorders or trauma/whiplash sometimes.

### **Current Treatment Approaches:**

Manual therapy, education, and exercise are used equally often for cervicogenic headache and TMD, while manual therapy is used somewhat less for migraine and tension-type headaches. Other approaches such as electrotherapy and mind–body methods were mentioned less frequently across all headache types. The specific types of education, manual therapy, and exercise varied widely across responses and headache categories.

### **Referral Pathways:**

Most referrals came from neurologists or directly from patients themselves. General practitioners, pain specialists, and other physiotherapists referred patients occasionally. Neurologists were the only health professionals that participants often or very often referred their patients to. Psychiatrists/psychologists, pain specialists, GPs, and dentists were mentioned as professionals to whom participants sometimes referred patients. Almost all respondents stated that multidisciplinary care is important or extremely important for patients with headaches.

---

### **Next Steps**

We still need to analyse the open-ended responses from Survey 2, particularly the question about whether clinicians approach different headache types differently. Once this is done, the data will be prepared for publication.

Data from Survey 1 will be used to initiate a Delphi survey aimed at developing educational standards for undergraduate and postgraduate education about headaches. For this, we will need to identify educators teaching headache-related content, and we will ask for your help in finding them.

Your enthusiasm during the meeting in São Paulo also inspired us to explore an international, non-laboratory treatment study. This idea is still developing and will require ethical approval, but we aim to launch it in early 2026. That means we can all collaborate on a research project together! Ambitious? Absolutely!

Meanwhile, we will begin drafting position statements on the evaluation and treatment of patients with different types of headaches, based on available evidence and published guidelines.

---

A **BIG THANK YOU** to all of you who contributed to the surveys, attended the meetings, and corresponded with us in between. We hope to maintain this energy and look forward to what lies ahead!

All the best and a wonderful festive season – here's a photo from the São Paulo event with the four of us surrounded by lots of happy headache people!

*Kerstin & Debora & Zhiqi & Gwen*

