

Cephalalgia

Impact Factor: 4.6

5-Year Impact Factor: 5.0

Submission guidelines



Submit manuscript

Please read the guidelines in full before submitting your manuscript. Manuscripts not conforming to these guidelines may be returned.

Submit Manuscript 

Manuscript Submission Guidelines: *Cephalalgia*

Please read the guidelines below before visiting the submission site!

[Submission site](#)

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Cephalalgia is a medical-neurological journal in the field of headache research, and is the official journal of the [International Headache Society](#).

This Journal is a member of the [Committee on Publication Ethics](#).

This Journal recommends that authors follow the [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#) formulated by the International Committee of Medical Journal Editors (ICMJE).

Please read the guidelines below then visit the Journal's submission site <http://mc.manuscriptcentral.com/cephalgia> to upload your manuscript. Please note that manuscripts not conforming to these guidelines may be returned. Remember you can log in to the submission site at any time to check on the progress of your paper through the peer review process.

Only manuscripts of sufficient quality that meet the aims and scope of *Cephalalgia* will be reviewed.

As part of the submission process, you will be required to warrant that you are submitting your original work, that you have the rights in the work, and that you have obtained and can supply all necessary permissions for the reproduction of any copyright works not owned by you, that you are submitting the work for first publication in the Journal and that it is not being considered for publication elsewhere and has not already been published elsewhere, and that you have obtained and can supply all necessary permissions for the reproduction of any copyright works not owned by you.

Cephalalgia may accept submissions of papers that have been posted on pre-print servers; please alert the Editorial Office when submitting (contact details are at the end of these guidelines) and include the DOI for the preprint in the designated field in the manuscript submission system. Authors should not post an updated version of their paper on the preprint server while it is being peer reviewed for possible publication in the journal. If the article is accepted for publication, the author may re-use their work according to the journal's author archiving policy.

The Journal requires that studies on headache and cervical pain adhere to the terminology, diagnostic disorders, and criteria within the ICHD ([Cephalalgia. 2018 Jan;38\(1\):1-211.](#)) and studies on facial pain adhere to the terminology, diagnostic disorders, and criteria within ICOP ([Cephalalgia. 2020 Feb;40\(2\):129-221.](#)).

If your paper is accepted, the author is requested to include the DOI link for articles posted to a repository.



If you have any questions about publishing with Sage, please visit the [Sage Journal Solutions Portal](#)

Contact *Cephalalgia* – email: editorial.cephalalgia@gmail.com

1. Open Access

Cephalalgia is an open access, peer-reviewed journal. Each article accepted by peer review is made freely available online immediately upon publication, is published under a Creative Commons license and will be hosted online in perpetuity. Publication costs of the journal are covered by the collection of article processing charges which are paid by the funder, institution or author of each manuscript upon acceptance.

There is no charge for submitting a paper to the journal.

For general information on open access at Sage please visit the [Open Access page](#) or view our [Open Access FAQs](#).

1.1 Cephalalgia Award

The Cephalalgia Award is awarded to the best paper selected by a panel of experts. All published articles in a two-year period are considered eligible for the Cephalalgia Award.

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2. Article processing charge (APC)

If, after peer review, your manuscript is accepted for publication, a one-time article processing charge (APC) is payable. The APC fee includes all article types except Letter to the Editor and Editorials. This APC fee covers the cost of publication and ensures that your article will be freely available online in perpetuity under a Creative Commons license.

	Article Processing Charge
Standard APC	\$3500
International Headache Society (IHS) members*	\$2000

*requires the first *AND* last author to be IHS members, and the designation selected at the of submission

The APC is subject to taxes where applicable. Tax-exempt status can be indicated by providing appropriate registration numbers when payment is requested. [Please see further details on tax-exempt status here.](#) Please note that PayPal is not available as a form of payment for APC.

Authors may be eligible for discounts to their APC via open access agreements that Sage has with participating institutions. Discounts depend on the terms of the agreement, find out if your institution is participating by [visiting Open Access Agreements at Sage](#). Eligibility is determined by the corresponding author's affiliation at acceptance matching an agreement.

Your article may be eligible for a full or partial waiver due to our participation in initiatives to increase accessibility to publication across the international academic community. [More information about discounts and eligibility.](#)

Corresponding Authors who are affiliated with institutions in countries, areas and territories in [Research4Life's Group A list](#) publishing in one of Sage's gold open access journals will automatically receive a full APC waiver. Corresponding Authors who are affiliated with institutions in countries, areas and territories in [Research4Life's Group B list](#) publishing in one of Sage's gold open access journals will automatically receive a 50% discount on the prevailing list price at the time of submission.

More information regarding Open Access can be found [here](#).

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3. What do we publish?

3.1 Aims & Scope

Before submitting your manuscript to *Cephalalgia*, please ensure you have read the [Aims & Scope](#).

3.1.1 Pre-Submission Inquiries

Effective immediately, we **will no longer be accepting pre-submission** inquiries regarding manuscripts. All submissions should follow the standard submission guidelines. Please refer to our Cephalalgia Author Guidelines for detailed information on manuscript preparation and submission.

3.2 Article Types

The journal provides an international forum for original research papers, review articles and brief communications.

The journal also offers a fast-track review option. For more information, please click [here](#).

The Journal considers the following kinds of article for publication:

Editorials

They are short, opinion pieces that discuss an issue of immediate importance to the International Headache Society community to Cephalalgia readers. Editorials are mostly invited but authors may contact the Editorial Office for proposals.

Editorials should have fewer than 1000 words total, no abstract, a minimal number of references up to 5 to a maximum of 10. One Figure or one Table can be added.

There is no Article Processing Charges for Editorials.

Viewpoints/perspectives

This type of article is an opinion piece grounded in evidence. It can be used to express an opinion on clinical, scientific, ethical, or policy issues backed by robust evidence. The articles should be a platform for debate and challenge current thinking. Although an opinion piece, the arguments should be presented in the context of a balanced review and discussion of the literature.

These articles should be 2,500 words in length (main text). An unstructured abstract up to 200 words in length is required. The reference should be selective, containing no more than 50 selected references. Articles should be illustrated with figures and tables (color figures are encouraged).

Debate

Debate articles present a focused and structured discussion on a contentious issue or topic within the field of headache and facial pain. These articles aim to provide a platform for contrasting viewpoints, fostering critical analysis and dialogue. Each piece should represent the opposing perspectives with balanced, evidence-based arguments, emphasizing areas of agreement and contention. Contributions should reflect a rigorous review of the existing literature to support the respective positions.

Debate articles should be 3,000 words in length (main text). An unstructured abstract of up to 200 words is required. References should be selective, containing no more than 60 entries. Figures, tables, and color illustrations are encouraged to support the arguments and enhance reader engagement.

Special Articles

This article type includes position statements, consensus documents or guidelines proposed by working groups, associations, and task forces. Papers outside the scope of the other article types can be considered as Special Articles.

The structure, word-count and other requirements are agreed on a case-by-case basis.

Review Articles

Cephalalgia allows two different types of reviews: narrative review or systemic review.

Review articles should be up to 5,000 words in length (main text). Longer articles may be acceptable in special cases but should be discussed with the Editor prior to submission. For systematic reviews we require a structured abstract whereas for narrative reviews we require an unstructured abstract. The abstract must be up to 400 words in length. The reference list should be selective, containing about 100 selected references, mostly papers published in the last five years. We encourage the use of high-quality figures and diagrams (colour encouraged) and Tables if needed. There is no strict upper limit of figures and tables allowed.

Systematic reviews must follow the PRISMA Reporting Guidelines, and in the case of meta-analysis, the MOOSE guideline. For details of the required checklist click [here](#) and refer to the Equator Network Website [<https://www.equator-network.org>]. The pertinent checklist must be completed and uploaded into the manuscript files system.

Original research papers

Articles that fall in this category report scientific results of original clinical, translational and basic research. Papers are evaluated on the importance of the research question, methodological soundness, robustness of the study, and transparency of reporting. Equal consideration is given to all papers, regardless of whether the results are positive or null.

Original research papers should be 4,000-4,500 words in length (main text). The paper should be organized in the following sections: Introduction, Methods, Results, and

Discussion. A structured abstract up to 400 words in length is required; the abstract should follow the following structure: Aim, Methods, Results, Conclusion. The reference list should be selective, containing no more than about 45 selected references. Articles should be liberally illustrated with figures and diagrams (colour encouraged). There is no strict upper limit of figures and tables allowed. Usually, up to 6-8 individual figures and tables can be included.

Based on the type of original research, the pertinent checklist must be completed and uploaded into the manuscript files system. For details of the required checklist click [here](#) and refer to the Equator Network Website [<https://www.equator-network.org>].

Brief communications

Brief reports are short articles that deals with: (i) re-analyse part of an article that has previously been published; (ii) present findings, or discuss issues of particular interest to the community, but are not suitable as a standard research article; (iii) case report or small case series.

Brief Communications should be in principle around up to 1,500 words in length (main text). The paper should be organized in the following sections: Introduction, Methods, Results, and Discussion. A structured abstract up to 200 words in length is required; the abstract should follow the following structure: Aim, Methods, Results, Conclusion. The reference list should be selective, containing no more than 20 selected references. Up to 2 figures and 1 table can be included.

Based on the type of original research, the pertinent checklist must be completed and uploaded into the manuscript files system. For details of the required checklist click [here](#) and refer to the Equator Network Website [<https://www.equator-network.org>].

Letter to the Editor

A Letter to the Editor should be a piece to discuss articles published in Cephalalgia. Cephalalgia does not accept Letters referring to papers published in other Journals. Different types of letters can be considered if the request is well motivated. In case of re-analysis of a previously published article in Cephalalgia or brief research findings, please use "Brief reports" instead.

Letters to the Editor should be up to 750 words in length, and no abstract is needed. The reference list should be selective, containing no more than 5 selected references.

There is no Article Processing Charges for Letters to the Editor.

3.2.1 Methodological/Statistical Guidelines

Ethics or Institutional Review Board Approval: Please clearly indicate that the study obtained appropriate approval (or a statement and explanation of why it was not required), including the name of the ethics committee(s) or institutional review board(s), the number/ID of the approval(s). For human studies, please also add a statement that participants gave informed consent before taking part.

Study Protocol: If your study protocol is registered (ClinicalTrial.gov, etc.), please provide the registration number (required for intervention studies). The trial registration number should appear in the manuscript following the abstract. We encourage the registration of observational study protocols.

Statistics

Describe statistical methods with enough detail to enable a knowledgeable reader with access to the original data to verify the reported results. General principles for reporting statistical results should follow the [SAMPL Guideline](#).

3.3 Writing your paper

The Sage Author Gateway has some general advice and on [how to get published](#), plus links to further resources. [Sage Author Services](#) also offers authors a variety of ways to improve and enhance their article including English language editing, plagiarism detection, and video abstract and infographic preparation.

3.3.1 Make your article discoverable

For information and guidance on how best to title your article, have a look at this page on the Gateway: [How to Help Readers Find Your Article Online](#).

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4. Editorial policies

4.1 Peer review policy

Identity transparency: Single-anonymized

Reviewer interacts with: Editor

Review information published: None

Your manuscript will undergo an initial evaluation. If it does not conform to the requirements laid out in these guidelines, it will be returned to you for amendments prior to peer review.

Manuscripts may be desk rejected without peer review at this point if they are out of scope of the journal or otherwise unsuitable.

After passing the initial evaluation, your manuscript will then be peer reviewed. You can log in at any time to check the status of your manuscript. We will notify you when a decision has been reached.

Cephalalgia operates a conventional single-anonymize reviewing policy in which the reviewer's name is always concealed from the submitting author.

The following manuscript types may not require two independent reviews to be accepted: Editorials.

To ensure the integrity of the peer review process we assign reviewers and cannot accept author recommendations.

All manuscripts are reviewed as rapidly as possible, while maintaining rigor. Reviewers make comments to the author and recommendations to the Associate Editor who then makes a recommendation to the Editor in Chief who makes the final decision on all manuscripts, including those appearing in a special issue. The Editor or members of the Editorial Board may occasionally submit their own manuscripts for possible publication in the Journal. In these cases, the peer review process will be managed by alternative members of the Board and the submitting Editor/Board member will have no involvement in the decision-making process.

The journal has an Editorial Board who serve the journal as external peer reviewers. Each member of the Editorial Board are active researchers in the field and selected based on strict criteria, ensuring they possess the necessary expertise and experience. The Editor(s) may use one Editorial Board Member as a reviewer for each manuscript and will then reach beyond this pool to include additional reviewers to meet the required number before a decision can be made. This ensures a comprehensive and robust peer review process, aligning with our commitment to publish the most credible and valid research. Care is taken not to invite any Editorial Board Member that has any potential conflict of interest with any author of the paper.

As a COPE member we engage with multiple forms of post-publication discussion in line with wider guidance from Sage: [Commentaries, Critiques and Responses](#).

You can view our [complaints and appeals policy](#) here.

Read [Sage's complete peer review policy](#).

4.1.1 Fast-track review

Cephalalgia provides a fast-track review option whereby two expert reviewers may review a manuscript within 72 hours and on-line publication occurs within 4 weeks of acceptance.

The cost of such rapid review is \$900 USD. This payment is to cover the time of the expert reviewers. Please note that this payment is strictly to facilitate the rapid review process and does not in any way guarantee acceptance or publication of your article.



If you wish to make use of this facility, please choose the 'fast track review' option in the article type dropdown menu when submitting your article. If you choose the 'fast-track' review option, you are agreeing to pay the \$900.00 USD for this service.

4.2 Authorship

Papers should only be submitted for consideration once consent is given by all contributing authors. Those submitting papers should carefully check that all those whose work contributed to the paper are acknowledged as contributing authors.

The list of authors should include all those who can legitimately claim authorship. This is all those who:

1. Made a substantial contribution to the concept or design of the work; or acquisition, analysis, or interpretation of data,
2. Drafted the article or revised it critically for important intellectual content,
3. Approved the version to be published,
4. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content.

Authors should meet the conditions of all of the points above. When a large, multicentre group has conducted the work, the group should identify the individuals who accept direct responsibility for the manuscript. These individuals should fully meet the criteria for authorship.

Author roles:

first authors:

* These authors contributed equally to this work. Role positions 1 and 2

last authors:

These authors share last authorship. Role positions are the last two authors from different institutions.

corresponding authors:

No more than two corresponding authors may be listed on the title page at the time of initial submission.

Acquisition of funding, collection of data, or general supervision of the research group alone does not constitute authorship, although all contributors who do not meet the criteria for authorship should be listed in the Acknowledgments section. Please refer to the [International Committee of Medical Journal Editors \(ICMJE\) authorship guidelines](#) for more information on authorship.

Please note that AI chatbots, for example ChatGPT, should not be listed as authors. For more [information see the policy on Use of ChatGPT and generative AI tools](#).

4.3 Acknowledgements

All contributors who do not meet the criteria for authorship should be listed in an Acknowledgements section. Examples of those who might be acknowledged include a person who provided purely technical help, or a department chair who provided only general support.

Any acknowledgements should appear first at the end of your article prior to your Declaration of Conflicting Interests (if applicable), any notes and your References.

Per [ICMJE](#) recommendations, it is best practice to obtain consent from non-author contributors who you are acknowledging in your paper.

4.3.1 Third party submissions

Where an individual who is not listed as an author submits a manuscript on behalf of the author(s), a statement must be included in the Acknowledgements section of the manuscript and in the accompanying cover letter. The statements must:

- Disclose this type of editorial assistance – including the individual’s name, company and level of input
- Identify any entities that paid for this assistance
- Confirm that the listed authors have authorized the submission of their manuscript via third party and approved any statements or declarations, e.g., conflicting interests, funding, etc.

Where appropriate, Sage reserves the right to deny consideration to manuscripts submitted by a third party rather than by the authors themselves.

4.3.2 Writing assistance

Individuals who provided writing assistance, e.g., from a specialist communications company, do not qualify as authors and so should be included in the Acknowledgements section. Authors must disclose any writing assistance – including the individual’s name, company and level of input – and identify the entity that paid for this assistance. It is not necessary to disclose use of language polishing services.

4.3.3 Medical Writers



Individuals who provided writing assistance, e.g., from a specialist communications company, do not qualify as authors and so should be included in the Acknowledgements section. Authors must disclose any writing assistance – including the individual’s name, company, and level of input – and identify the entity that paid for this assistance. It is not necessary to disclose use of language polishing services.

4.3.4 Artificial Intelligence

Cephalgia acknowledges that open AI products can be used to polish and/or translate texts and can help make a manuscript clearer and more comprehensible. The use of AI is allowed but must be clearly stated. The authors would add a disclosure in the acknowledge section including the AI name, source, and level of input. AI will not be considered as an author.

4.4 Funding

Cephalgia requires all authors to acknowledge their funding in a consistent fashion under a separate heading. Please visit the [Funding Acknowledgements](#) page on the Sage Journal Author Gateway to confirm the format of the acknowledgment text in the event of funding, or state that: This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

4.5 Declaration of conflicting interests

The journal requires a declaration of conflicting interests from all authors so that a statement can be included in your article. For guidance on conflict of interest statements, see our policy on conflicting interest declarations and the ICMJE recommendations.

If no conflict exists, your statement should read: The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

For guidance on conflict of interest statements, please see the ICMJE recommendations [here](#).

4.6 Research ethics and patient consent

Medical research involving human subjects must be conducted according to the [World Medical Association Declaration of Helsinki](#).

Submitted manuscripts should conform to the [ICMJE Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#), and all papers reporting animal and/or human studies must state in the methods section that the

relevant Ethics Committee or Institutional Review Board provided (or waived) approval. Please ensure that you have provided the full name and institution of the review committee, in addition to the approval number.

For research articles, authors are also required to state in the methods section whether participants provided informed consent.

Information on informed consent to report individual cases or case series should be included in the manuscript text. A statement is required regarding whether written informed consent for patient information and images to be published was provided by the patient(s) or a legally authorized representative. Please do not submit the patient's actual written informed consent with your article, as this in itself breaches the patient's confidentiality. The Journal requests that you confirm to us, in writing, that you have obtained written informed consent but the written consent itself should be held by the authors/investigators themselves, for example in a patient's hospital record. The confirmatory letter may be uploaded with your submission as a separate file.

Please also refer to the [ICMJE Recommendations for the Protection of Research Participants](#)

4.7 Clinical trials

Cephalgia conforms to the [ICMJE requirement](#) that clinical trials are registered in a WHO-approved public trials registry at or before the time of first patient enrolment. However, consistent with the [AllTrials campaign](#), retrospectively registered trials will be considered if the justification for late registration is acceptable. The trial registry name and URL, and registration number must be included at the end of the abstract.

4.8 Reporting guidelines

Your manuscript must follow the relevant EQUATOR Network (<https://www.equator-network.org/>) reporting guidelines, depending on the type of study. The EQUATOR wizard (<https://www.penelope.ai/equatorwizard>) can help identify the appropriate guideline. You will need to upload the appropriate checklist with your submission.

Other resources can be found at NLM's Research Reporting Guidelines and Initiatives (https://www.nlm.nih.gov/services/research_report_guide.html).

If your research involves animals, you will be asked to confirm that you have carefully read and adhered to the ARRIVE guidelines (<https://arriveguidelines.org/>).

Authors are expected to add a reporting guideline statement to the manuscript within the Methodology section - the journals preferred phrasing is:

This study is reported in accordance with the [insert checklist name; e.g. PRISMA, STROBE, CONSORT] guidelines for [insert study type; e.g., systematic review, observational study, randomized clinical trial].

4.9 Research data

The journal is committed to facilitating openness, transparency, and reproducibility of research, and has the following research data sharing policy. For more information, including FAQs please visit the Sage Research Data policy pages.

Subject to appropriate ethical and legal considerations, authors are encouraged to:

- Share your research data in a relevant public data repository
- Include a data availability statement linking to your data. If it is not possible to share your data, use the statement to confirm why it cannot be shared.
- Cite this data in your research

Peer reviewers may be asked to peer review the research data prior to publication.

- Peer reviewers may be asked to assess compliance with the research data policy
- Peer reviewers may be asked to assess research data files

If you need to anonymize your research data for peer review, please refer to our [Research Data Sharing FAQs](#) for guidance.

4.10 Appealing the publication decision

Editors have very broad discretion in determining whether an article is an appropriate fit for their journal. Many manuscripts are declined with a very general statement of the rejection decision. These decisions are not eligible for formal appeal unless the author believes the decision to reject the manuscript was based on an error in the review of the article, in which case the author may appeal the decision by providing the Editor with a detailed written description of the error they believe occurred.

If an author believes the decision regarding their manuscript was affected by a publication ethics breach, the author may contact the publisher with a detailed written description of their concern, and information supporting the concern, at publication_ethics@sagepub.com

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5. Publishing policies

5.1 Publication ethics

Sage is committed to upholding the integrity of the academic record. We encourage authors to refer to the Committee on Publication Ethics' [International Standards for Authors](#) and view the Publication Ethics page on the [Sage Information for Authors](#).

5.1.1 Plagiarism

Cephalalgia and Sage take issues of copyright infringement, plagiarism, or other breaches of best practice in publication very seriously. We seek to protect the rights of our authors and we always investigate claims of plagiarism or misuse of published articles. Equally, we seek to protect the reputation of the journal against malpractice. Submitted articles may be checked with duplication-checking software and an AI detector. Where an article, for example, is found to have plagiarised other work or included third-party copyright material without permission or with insufficient acknowledgement, or where the authorship of the article is contested, we reserve the right to take action including, but not limited to: publishing an erratum or corrigendum (correction); retracting the article; taking up the matter with the head of department or dean of the author's institution and/or relevant academic bodies or societies; or taking appropriate legal action.

5.1.2 Prior publication

If material has been previously published it is not generally acceptable for publication in a Sage journal. However, there are certain circumstances where previously published material can be considered for publication. Please refer to the guidance on the [Sage Author Gateway](#) or if in doubt, contact the Editor at the address given below.

5.2 Contributor's publishing agreement

Before publication, Sage requires the author as the rights holder to sign a Journal Contributor's Publishing Agreement. *Cephalalgia* publishes manuscripts under [Creative Commons licenses](#). The standard license for the journal is Creative Commons by Attribution Non-Commercial (CC BY-NC), which allows others to re-use the work without permission as long as the work is properly referenced, and the use is non-commercial. For more information, you are advised to visit [Sage's OA licenses page](#). Alternative license arrangements are available, for example, to meet particular funder mandates, made at the author's request.

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6. Preparing your manuscript

5.1 Formatting

The preferred format for your manuscript is Word. Word templates are available on the [Manuscript Submission Guidelines](#) page of our Author Gateway.

The text should **be double-spaced throughout** and with a minimum of 3cm for left- and right-hand margins and 5cm at head and foot. Text should be standard 10 or 12 point. The font colour is black, please do not use coloured font. SI units should be used throughout the text.

Only electronic files conforming to the journal's guidelines will be accepted. The preferred format for the **text and tables** of your manuscript is Word. **All figures/images and tables must be uploaded as separate files, whereas the figure legends remain in the main body file. Please note that Cephalalgia does not have a file category called "box". The file categories are main body, tables, figures, and supporting documents. Do not upload tables as screenshots.** Please also refer to additional guidelines on submitting artwork and supporting files below.

6.1.1 Title Page

The first page(s) of your manuscript no matter the submission category all manuscripts are required to include a title page with the following information:

1. Title,
2. All author names and affiliations,
3. Corresponding author(s) full name, affiliation, email address and ORCID ID.
4. Structured abstract (if applicable to manuscript type),
5. Trial Registration (if applicable to manuscript type),
6. Key words.

6.1.2 Structuring your abstract

Given that *Cephalalgia* is a journal devoted to headache and facial pain, readers are familiar with these diseases. The journal author guidelines require **a structured abstract using 3 or 4 paragraphs** without cite of references or abbreviations. Common headings of each paragraph include: Background/Hypothesis, Methods, Results, Conclusion/Interpretation. Word count is based on the types of articles and the information can be found in **1.2 Article Types. Any papers received without a structured abstract will be returned to the corresponding author(s).**

6.1.3 Study highlights bullet points

Cephalalgia publishes original papers on all aspects of headache and facial pain. **For original research papers, in the manuscript, you are required to include two to five bullet points with a word limit of 60 in total clearly summarizing the**



highlights of your research. These bullet points will appear at the end of your manuscript following the conclusion and prior to the reference list.

6.2 Artwork, figures and other graphics

For guidance on the preparation of illustrations, pictures and graphs in electronic format, please visit Sage's [Manuscript Submission Guidelines](#).

Please note that for *Cephalalgia* the **main body** of your article **should not contain figures or tables.**

Figures supplied in colour will appear in colour online and in the print issue. There is no charge for reproducing figures in colour in the printed version.

6.3 Supplemental material

This journal is able to host additional materials online (e.g., datasets, podcasts, videos, images etc) alongside the full-text of the article. For more information please refer to our [guidelines on submitting supplementary files](#).

6.4 Reference style

Cephalalgia operates a Sage Vancouver reference style. [Click here](#) to review the guidelines on Sage Vancouver to ensure your manuscript conforms to this reference style.

If you use [EndNote](#) to manage references, you can download the [Sage Vancouver EndNote output file](#).

Please include only one reference list. The source for any table and/or figures should be included in the main reference list and not as separate references.

All tables and figures should be numbered consecutively and cited in the text as Table 1, Table 2 etc. or Figure 1, Figure 2 etc. (Table and Figure should be spelled out in full, not abbreviated).

Examples: figures/tables should be referenced in the text as follows:

Figure 1, or Figures 1 and 2, or Figures 2 to 4, or Figure 1(a) and (b), or Figure 2(a) to (c).

Table 1, or Table 2 and 2, or Table 2 to 4, or Table 1(a) and (b), or Table 2(a) to(c).

Where the figure citation is not part of the sentence it should be placed in parentheses.

6.5 English language editing services

Authors seeking assistance with English language editing, translation, or figure and manuscript formatting to fit the journal's specifications should consider using Sage

Language Services. Visit [Sage Language Services](#) on our Journal Author Gateway for further information.

6.6 Accessibility Guidelines

Authors should familiarize themselves with [Sage's Accessibility Guidelines](#) to ensure their manuscripts meet recognized accessibility standards

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7. Submitting your manuscript

7.1 How to submit your manuscript

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