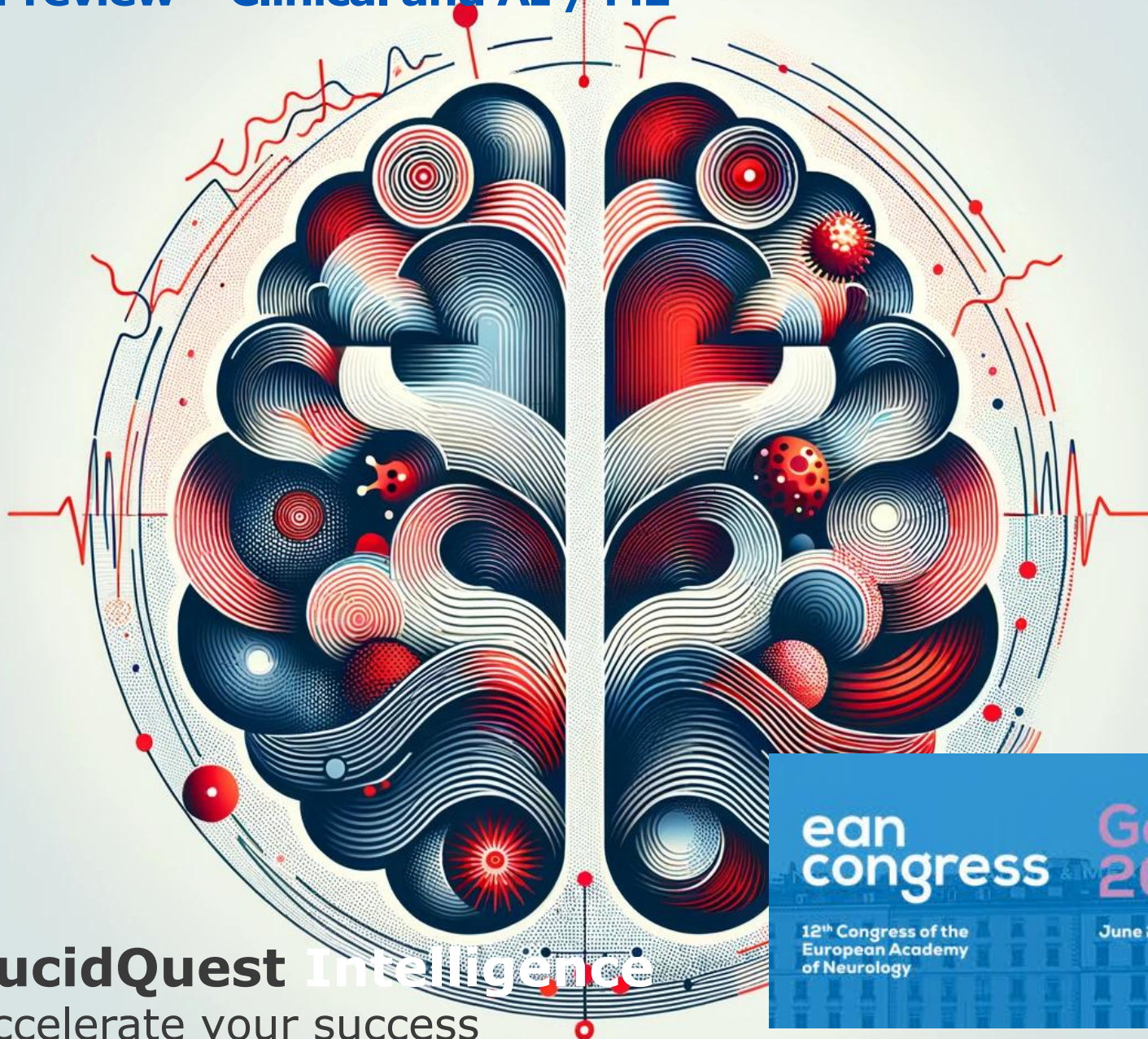


EAN 2026 Preview – Clinical and AI / ML



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EAN 2026 – New Trends in Neurology Treatment Strategy (1/4)



• **Will immune-pathway selection become the central question in gMG?**

- EAN 2026 will place generalized myasthenia gravis across multiple immune mechanisms, including FcRn blockade, C5 inhibition, CD19+ B-cell targeting, and BAFF/APRIL inhibition with telitacicept. The strategic question will be whether treatment choice will be driven by antibody status, speed of response, route of administration, durability, or prior biologic exposure



• **Can BTK inhibition create a credible MS progression story?**

- Multiple sclerosis sessions will test whether BTK inhibition, including fenebrutinib and tolebrutinib, can move the field beyond relapse control toward disability accumulation and progression biology. The focus will be whether BTK inhibitors can differentiate against established anti-CD20 therapy, S1P modulation, and immune-reconstitution approaches without being limited by safety and monitoring concerns



EAN 2026 – New Trends in Neurology Treatment Strategy (2/4)



• **Will Alzheimer's treatment adoption depend more on diagnostics than drug efficacy?**

- Alzheimer's sessions will focus on amyloid-targeted therapy, lecanemab real-world outcomes, APOE ε4 stratification, pTau217, blood-based biomarkers, and digital cognitive assessment. The key question will be whether blood-based testing and referral-pathway redesign will be sufficient to move eligible patients from early detection into treatment and monitoring



• **Is advanced Parkinson's care shifting from oral optimization to delivery-system selection?**

- Parkinson's sessions will examine continuous subcutaneous dopaminergic therapy, intestinal gel infusion, apomorphine infusion, COMT inhibition, adaptive DBS, MR-guided focused ultrasound, and on-demand therapy. The unresolved issue will be when patients should move from oral levodopa optimization to device-aided or infusion-based approaches, and which clinical triggers will define that transition



• **Can migraine differentiation move beyond CGRP-class positioning?**

- Migraine sessions will include preventive and acute-treatment decision-making, Vyepti positioning, anti-PACAP therapy with bocunebart / Lu AG09222, and mechanistic work on KATP and HCN activity. The competitive question will be whether non-CGRP mechanisms and route-based strategies can create meaningful differentiation in patients who cycle through existing acute and preventive options



• **Will CIDP remain IVIG-centered or become a segmented immune-modulation market?**

- CIDP and immune-neuropathy sessions will focus on IVIG, FcRn blockade, immune-mechanism diversity, diagnostic confidence, and therapy tailoring. The strategic tension will be whether newer immune approaches will displace IVIG in defined patient subgroups or mainly compete on administration burden, response durability, and convenience





- **Will digital neurology influence care decisions or remain validation-stage evidence?**

- AI and digital-health sessions will include MS-DETECT digital biomarkers, machine-learning phenotype prediction in MS, DaTScan-based deep learning in Parkinson's disease, AI-supported patient-video diagnosis, and MyClusters headache analytics. The question will be whether these tools will support treatment selection, monitoring, and triage, or remain limited to retrospective model validation



Key Sessions To Watch (1/2)

Date	Session Title (short)	Type	Author / Institution	Why Watch
27 Jun 2026	DNX-2440 in recurrent glioblastoma	Oral Presentation	Jaime Gállego Pérez-Larraya / Pamplona, Spain	This will test whether intratumoral oncolytic adenovirus DNX-2440 will remain a niche neuro-oncology signal or support broader immunotherapy interest
27 Jun 2026	Migraine via KATP vs HCN activity	Oral Presentation	Zixuan Alice Zhuang / Glostrup, Denmark	Session will help frame whether vascular KATP channel activation will become a sharper translational mechanism in migraine
28 Jun 2026	MS-DETECT digital biomarkers	Oral Presentation	Patrick Vermersch / Lille, France	Discussion will indicate whether real-world digital biomarkers will correlate closely enough with clinical standards to affect MS monitoring strategy.
28 Jun 2026	NIO752 tau-targeting ASO in PSP	Oral Presentation	Carmen Serban / Basel, Switzerland	This will give a rare oral-stage readout linking Phase I data with Phase III design for a tau-targeting antisense oligonucleotide
28 Jun 2026	Efgartigimod ADAPT JR in juvenile gMG	Oral Presentation	Anna Kostera-Pruszczyk / Warsaw, Poland	Presentation will test whether FcRn blockade with intravenous efgartigimod will extend convincingly into juvenile gMG
29 Jun 2026	Foslevodopa / foscarnidopa real-world advanced PD	Oral Presentation	Giulia Pinola / Varese, Italy	This will add a prospective real-world lens to continuous subcutaneous dopaminergic infusion in advanced Parkinson's disease



Key Sessions To Watch (2/2)

Date	Session Title (short)	Type	Author / Institution	Why Watch
29 Jun 2026	Rituximab in CASPR2-associated disease	Late-Breaking Oral	Bastien Joubert / Lyon, France	This will clarify whether B-cell depletion with rituximab will have a stronger role in CASPR2-associated autoimmune disease management
29 Jun 2026	Fenebrutinib vs ocrelizumab in PPMS	Asset-watchlist ePoster	Amit Bar-Or / Wynnewood	This Phase III FENTrepid readout will be a direct competitive test of BTK inhibition versus anti-CD20 therapy in primary progressive MS
29 Jun 2026	Lecanemab real-world LEADER study	Late-Breaking ePoster	Courtney Adams / Fort Thomas	Discussion will inform how lecanemab outcomes may differ in APOE ε4 heterozygotes and non-carriers in real-world care
29 Jun 2026	Bocunebart / Lu AG09222 anti-PACAP in migraine	Late-Breaking ePoster	Andrew Blumenfeld	This Phase 2 program will test whether anti-PACAP can create a differentiated migraine narrative after prior preventive treatment failures

Industry-Sponsored Sessions & Focus Areas – EAN 2026





EAN 2026– Competitive Landscape at a Glance (1/2)

Name	Sessions	Companies / Assets	Why It Matters
gMG immune-mechanism segmentation	Multiple	Johnson & Johnson, argenx, UCB, Alexion, Amgen, Merck, Vor Bio / FcRn blockers, C5 inhibitors, CD19+ B-cell targeting, telitacicept, efgartigimod PH20 SC	EAN will test whether gMG strategy will shift from broad disease control to mechanism-based sequencing
BrMS progression, BTK, and DMT risk	Multiple	Sanofi, Roche-associated assets, ponesimod, fenebrutinib, ocrelizumab, ofatumumab, frexalimab, cladribine, tolebrutinib	The MS sessions will put disability accumulation, infection risk, and BTK differentiation into the same competitive frame
Alzheimer's treatment-readiness and biomarkers	Multiple	Eisai, Eli Lilly, Roche, The Global CEO Initiative on Alzheimer's Disease / amyloid-targeted therapies, lecanemab, pTau217, blood-based biomarkers	Competition will move beyond drug efficacy toward diagnostic control, biomarker access, and care-pathway throughput
Advanced Parkinson's delivery and devices	Multiple	AbbVie, Britannia Pharmaceuticals, Zambon, Bial, Merz, Medtronic, Insightec / foslevodopa-foscarbidopa, apomorphine infusion	The field will test whether continuous delivery and device-aided care can be moved earlier in the advanced PD journey



EAN 2026– Competitive Landscape at a Glance (2/2)

Name	Sessions	Companies / Assets	Why It Matters
Migraine acute and preventive positioning	Multiple	TEVA, AbbVie, Pfizer, Lundbeck / Vyepti, bocunebart / Lu AG09222, anti-PACAP, KATP, HCN	The crowded migraine field will need mechanism, route, and timing differentiation rather than another broad prevention message
CIDP and peripheral immune modulation	Multiple	argenx, Grifols, Octapharma / FcRn blockade, IVIG, complement, immunomodulation	CIDP will become a test case for whether newer immune mechanisms can displace or segment established IVIG use
Digital biomarkers and AI-enabled diagnostics	Multiple	MS-DETECT, MyClusters, DaTScan deep learning, AI patient-video analysis, machine-learning MS prediction	EAN will show whether digital neurology will move from model performance to clinically usable decision support



Key Industry-Sponsored Sessions at EAN 2026 (1/5)

- **AbbVie:**

- Focus Areas: Advanced Parkinson's Disease, Subcutaneous Therapy, Migraine Acute and Preventive Care
- Presentations will focus on earlier recognition of advanced Parkinson's disease, patient selection for device-aided or subcutaneous therapy, and case-based decision-making when oral therapy is no longer enough. AbbVie will also use migraine sessions to frame acute and preventive treatment around avoiding repeated treatment failure cycles

- **Sanofi:**

- Focus Areas: Multiple Sclerosis, Disability Accumulation, Progression Biology
- Sessions will focus on subtle disability accumulation in MS and the biological mechanisms underlying progression. Sanofi is expected to reinforce the view that competition in MS should extend beyond relapse control, with greater emphasis on detecting and preventing disease progression



Key Industry-Sponsored Sessions at EAN 2026 (2/5)

✓ • **Johnson & Johnson:**

- Focus Areas: Generalized Myasthenia Gravis, FcRn Blockade, Sustained Disease Control
- Presentations will focus on connecting gMG pathophysiology with immunotherapy and integrating FcRn blockers into treatment pathways. Johnson & Johnson will be signaling that gMG competition is moving toward sustained control and real-world treatment decisions, rather than episodic symptom management alone. The session choice positions FcRn blockade as a pathway-level competitor to complement inhibition and broader immune modulation

✓ • **Amgen:**

- Focus Areas: CD19+ B-Cell Targeting, gMG, NMOSD
- Presentations will focus on the role of CD19+ B cells in NMOSD and gMG, including clinical evidence for an anti-CD19 monoclonal antibody in immune-mediated conditions. Amgen will be signaling a B-cell-depletion strategy that competes mechanistically with FcRn blockade and complement inhibition



Key Industry-Sponsored Sessions at EAN 2026 (3/5)

✓ • **Merck:**

- Focus Areas: Myasthenia Gravis, Disease Drivers, Disease Control
- Presentations will focus on whether current MG management is doing enough beyond symptom control and whether new strategies should rethink disease control. Merck will likely advocate for a broader view of MG treatment success, highlighting intervention on underlying disease biology alongside symptomatic improvement

✓ • **Eli Lilly:**

- Focus Areas: Alzheimer's Disease, Amyloid-Targeted Therapies, Diagnostic Pathway Design
- Discussions will focus on amyloid-targeted therapies, patient selection, efficacy, safety management, digital cognitive assessments, blood tests, and the general-practitioner-to-specialist diagnostic pathway. Eli Lilly will be signaling that Alzheimer's competition will depend as much on diagnostic flow and patient identification as on drug-level efficacy. The session set frames early diagnosis, blood testing, and treatment implementation as commercial bottlenecks





Key Industry-Sponsored Sessions at EAN 2026 (4/5)

✓ • **Roche:**

- Focus Areas: Alzheimer's Disease, pTau217, Blood-Based Biomarkers
- Presentations will focus on pTau217 and the integration of blood-based biomarkers into Alzheimer's clinical workflows. Roche will be signaling a diagnostics-led position in Alzheimer's disease, where control of biomarker testing may shape which patients move into amyloid-targeted treatment pathways. The competitive question will be whether pTau217 becomes a practical workflow tool or remains concentrated in specialist settings

✓ • **Lundbeck:**

- Focus Areas: Migraine Prevention, Vyepti, Multiple System Atrophy Recognition
- Presentations will focus on raising the threshold for preventive success in migraine, earlier switching, patient-centered variability, and Vyepti as early intentional IV therapy. Lundbeck will also use an MSA forum to emphasize timely recognition and referral in atypical parkinsonism. The migraine signal will be route and timing differentiation, while the MSA signal will be diagnostic pathway ownership



Key Industry-Sponsored Sessions at EAN 2026 (5/5)



- **TEVA:**

- Focus Areas: **Migraine, Untreated Disease Burden, Treatment Decision Simplification**
- Presentations will focus on the untreated years of migraine, delayed treatment, simplifying treatment decisions, and practical solutions for difficult migraine. TEVA is expected to highlight that migraine competition is not solely about delivering superior efficacy, but also about addressing unmet needs in diagnosis, access, and treatment continuity



- **Pfizer:**

- Focus Areas: **Migraine, Acute Treatment, Preventive Treatment, Evidence-Based Decision-Making**
- Presentations will focus on using evidence to guide acute and preventive migraine treatment decisions through patient-case framing. Pfizer centers its migraine strategy on treatment selection and decision support rather than a single-product narrative





AI / Digital Health Angle at EAN 2026 (1/2)

- **AI and digital health will be a relevant signal at EAN 2026 because it will include applied neurology tools across MS, Parkinson's disease, headache, epilepsy, Alzheimer's disease, stroke, gMG, and neuroinformatics. The strongest signal will not be general AI adoption; it will be whether digital biomarkers, machine-learning models, and AI-enabled diagnostic tools can support practical decisions such as monitoring, triage, diagnosis, treatment escalation, or referral timing**
- **The MS-DETECT session will be important because it will test whether real-world digital biomarkers can align with clinical standards in multiple sclerosis monitoring**
- **The DaTScan deep-learning and Remepy digital-biomarker sessions will be relevant in Parkinson's disease because they will address motor decline prediction and wearing-off detection, both of which could influence escalation to advanced therapy**
- **In headache and migraine, MyClusters and machine-learning diagnostic-classification sessions will test whether AI can improve patient segmentation beyond symptom-based assessment**



AI / Digital Health Angle at EAN 2026 (2/2)

- **Key sessions include:**

- Correlation of real-world digital biomarkers with clinical standards, findings from the MS-DETECT study
- Artificial intelligence analysis of patient videos for neurological diagnosis: A systematic review
- Does DaTScan have a prognostic value for motor decline in Parkinson's disease patients? A multimodal deep learning study
- Machine Learning-Based Statistical Interpretation of Headache Pattern Data: Insights from the MyClusters Application
- Digital Biomarkers for Detecting Wearing-off in Parkinson's Disease: A Pilot Study of the Remepy Mobile Platform
- Computer-Aided Localization in Neurology: Integrating Structured Digital Assessment with Machine Learning for Automated Diagnostic Support
- ME&MGTM digital biomarkers to monitor generalized Myasthenia Gravis symptoms: DOMYA, a validation study
- Passive and active digital biomarkers for comprehensive monitoring of generalized Myasthenia Gravis: design of the HARMONY 360 study
- Applications of machine learning in predicting valproic acid pharmacokinetics, safety and treatment response in epilepsy



What We're Watching for Post-EAN 2026

- Whether BTK inhibitor data, especially fenebrutinib and tolebrutinib, will strengthen the MS progression story against established DMTs such as anti-CD20 therapy, S1P modulation, and cladribine
- Whether gMG sessions will clarify treatment sequencing across FcRn blockade, C5 inhibition, CD19+ B-cell targeting, and BAFF/APRIL inhibition with Telitacicept
- Whether Alzheimer's disease discussions around lecanemab, pTau217, blood-based biomarkers, and digital cognitive assessment will define a workable path from early diagnosis to treatment initiation
- Whether Parkinson's disease sessions will sharpen escalation logic from oral levodopa optimization to subcutaneous therapy, intestinal gel infusion, apomorphine infusion, adaptive DBS, or MR-guided focused ultrasound
- Whether migraine data around Vyepti, anti-PACAP bocunebart / Lu AG09222, and KATP / HCN biology will support differentiation beyond CGRP-centered positioning
- Whether CIDP and immune-neuropathy sessions will show a shift away from IVIG-centered care or mainly reinforce segmentation by mechanism, convenience, and treatment burden



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