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Personalized Therapy and Clinical Outcomes for Chronic Pain

Guest Editor:

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Message from the Guest Editor

Dear Colleagues,

Chronic pain (CP) is a substantial healthcare challenge with prevalence rates between 11% and 40% and considerable economic costs. Recently, the International Association for the Study of Pain has proposed that three subtypes of CP may be differentiated based on unique causal mechanisms: 1. nociceptive, which is associated with an ongoing input from real or threatened tissue injury; 2. neuropathic, caused by injury or disease affecting the peripheral or central nervous system; 3. nociplastic, which is a new descriptor of CP and includes conditions that arise from altered nociception despite no clear evidence of actual or threatened tissue damage. Pain is a dynamic consequence of a host of biological, psychological, and social factors: hence, guidelines have recommended interdisciplinary treatment, which ideally makes use of a personalized approach. The new era of personalized medicine calls to the importance of tailoring medical and interventions psychological on individual patient characteristics. The Special Issue will aim to collect contributions on personalized therapy and outcomes for any kind of CP.

Dr. Federica Galli Guest Editor







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Message from the Editor-in-Chief

Journal of Personalized Medicine (JPM; ISSN 2075-4426) is an international, open access journal aimed at bringing all aspects of personalized medicine to one platform. JPM publishes cutting edge, innovative preclinical and translational scientific research and technologies related to personalized medicine (e.g., precision medicine, pharmacogenomics/proteomics, systems biology, 'omics association analysis). JPM is covered in Scopus, the Science Citation Index Expanded (SCIE), PubMed, PMC, Embase, and other databases.

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