

Special Issue

OMICS Revolution for Precision Medicine

Message from the Guest Editor

Advances in “omics” technologies (e.g., genome, transcriptome, proteome, epigenome, metabolome) and their correlation with the clinical phenotypes of the individual patient are enabling medicine to move from a “one-size-fits-all” approach toward a “personalized” model, helping to clarify the molecular mechanisms underlying human disease and to provide both potential biomarkers and pharmacological targets for a more detailed patient stratification and personalized treatments. In this Special Issue, the most significant contributions of omics technologies, highlighting how these approaches are revealing diagnostic, prognostic, and therapeutic targets for future personalized interventions, are warmly welcome.

We especially encourage the submission of interdisciplinary works and multi-country collaborative research. We welcome the submission of original research papers using different study designs and critical and relevant reviews, including systematic reviews and meta-analyses, methodological papers, and manuscripts that emphasize theoretical content.

Guest Editor

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Deadline for manuscript submissions

closed (20 May 2024)



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About the Journal

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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Author Benefits

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manuscripts are peer-reviewed and a first decision is provided to authors approximately 21.5 days after submission; acceptance to publication is undertaken in 3.5 days (median values for papers published in this journal in the first half of 2025).