

Special Issue

The Path to Personalized Pain Management

Message from the Guest Editors

The Path to Personalized Pain Management is evolving. New technology is expanding, ongoing, and changing established clinical surgical criteria, validated by meta-analysis and peer-reviewed publications, with eventual global acceptance. The intervertebral disc is the initial primary surgical source of pain in the cervical, thoracic, and lumbar spine, which can be readily confirmed with diagnostic and therapeutic injections. Soft tissue trauma will usually heal with time, but surgical pain care can speed up recovery. Successful surgical clinical outcomes can be personalized and achieved with the endoscopic visualization of pain generators, with patient verbal intraoperative feedback, on par with open or microsurgical decompression, but with less surgical morbidity. The future of personalized pain management is to focus on personal pain care and patient selection based on individual patient needs.

Guest Editors

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Deadline for manuscript submissions

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About the Journal

Message from the Editor-in-Chief

Journal of Personalized Medicine is one of the few journals that covers the diverse areas involved in the field, including research at basic, translational, and clinical levels. It focuses on “omics”-level studies that seek to define the basis of interindividual variation in susceptibility for a disease, its prognosis or definition of clinical subsets, and response to therapy (pharmacogenomics). We are also interested in systems biology as it relates to interindividual variation, and research on new methodologies, informatics, and biostatistics, in the aforementioned areas.

Editor-in-Chief

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manuscripts are peer-reviewed and a first decision is provided to authors approximately 25 days after submission; acceptance to publication is undertaken in 5.8 days (median values for papers published in this journal in the second half of 2025).