Special Issue

Precision Medicine in Childhood Asthma

Message from the Guest Editors

Asthma is a highly complex and heterogeneous disease. Children and adults with asthma can be stratified into distinct clinical phenotypes, the treatment of asthma has traditionally focused on a one-size-fits all approach. We believe that three major advances are poised to revolutionize the treatment of childhood asthma. The first advance is the development of new therapies that target specific molecular pathways. The second advance is the advent of molecular profiling technologies. The third advance pertains to the development of sophisticated bioinformatics tools. Towards this goal, new studies are urgently needed that embed these ground-breaking technologies into pediatric asthma cohorts and/or clinical trials.

We are pleased to invite you contribute to this Special Issue on Precision Medicine in Childhood Asthma. This Special Issue aims to highlight the application of genomics and bioinformatics to elucidate childhood asthma phenotypes, obtain mechanistic insights into disease biology, and link these to targeted therapies. We welcome original research articles and reviews.

Guest Editors
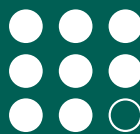
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Deadline for manuscript submissions

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About the Journal

Message from the Editor-in-Chief

Journal of Personalized Medicine (*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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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).