

Special Issue

Personalized Approaches in Bladder Cancer Treatment: A Clinical and Translational Research Perspective

Message from the Guest Editor

Recent years have seen significant advancements in bladder cancer treatment, including the introduction of immune checkpoint inhibitors (e.g., atezolizumab, pembrolizumab, and avelumab) and antibody–drug conjugates (ADCs) such as enfortumab vedotin (EV) and sacituzumab govitecan (SG). Despite these advancements, platinum-based chemotherapy drugs remain a cornerstone treatment for patients with advanced BC. Intravesical instillations of Bacillus Calmette–Guérin (BCG) remain the treatment of choice for high-grade superficial BC, including carcinoma in situ (CIS). While the efficacy of BCG therapy is substantial, with 5-year recurrence-free survival rates ranging from 50% to 70%, patients who fail BCG treatment should undergo radical cystectomy to control the cancer. Therefore, new advances in both systemic and local (intravesical) therapies are necessary. Given the growing number of available treatment options for BC, personalized or tailored therapy has become a key focus in optimizing patient outcomes. This Special Issue aims at publishing up-to-date articles covering a broad range of basic, translational, and clinical research in the field of bladder cancer.

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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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