Special Issue

Personalized Medicine in Retinal Diseases

Message from the Guest Editor

Retinal diseases are among the most common causes of irreversible blindness. In older adults, it is often the late stage of age-related macular degeneration (AMD), while in working-age individuals, diabetic retinopathy. chronic central serous chorioretinopathy, secondary neovascularizations, or a variety of genetic diseases are more frequently responsible. Since the introduction of anti-VEGF therapy, the prognosis for patients with neovascularizations has significantly improved. Especially with the development of new anti-VEGF agents, the identification of biomarkers that can enable more individualized therapy would be desirable. This also applies to patients with diabetic retinopathy and diabetic macular edema, as well as patients with secondary neovascularization, who are currently treated non-specifically with the same substances. Further identification of individual biomarkers could also improve therapy management here. This Special Issue of the Journal of Personalized Medicine aims to present outstanding research dedicated to the individualized investigation of biomarkers for disease progression or therapy response in retinal diseases.

Guest Editor

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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.

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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).

