

Special Issue

Personalized Management of Heart Failure: From Biomarkers to Clinical Practice

Message from the Guest Editor

Heart failure (HF) remains a leading cause of morbidity and mortality worldwide, representing one of the most pressing challenges in cardiovascular medicine.

This Special Issue aims to cover a wide range of contemporary topics in heart failure, including, but not limited to, the following:

- Advances in guideline-directed medical therapy (GDMT), including SGLT2 inhibitors, ARNIs, MRAs, and novel potassium binders.
- Precision medicine approaches and the role of genetics, biomarkers, and imaging in risk stratification.
- New perspectives on HF phenotypes, particularly HFpEF, HFmrEF, and their overlap with metabolic and renal syndromes.
- Digital health and artificial intelligence applications for remote monitoring, prognosis, and treatment optimization.
- Device therapy and interventional strategies, such as LV assist devices, percutaneous valve interventions, and remote hemodynamic monitoring.
- Global challenges in HF management, including implementation science, health policy, and equity of care.

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.

Editor-in-Chief

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High Visibility:

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CiteScore - Q1 (Medicine (miscellaneous))

Rapid Publication:

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).