

Special Issue

Personalized Medicine for Hypertension: Diagnosis, Prevention and Treatment

Message from the Guest Editors

Medical treatment based on the recommendations that current guidelines for hypertension management provide successfully reduces the cardiovascular risk of patients. However, blood pressure is the driving force for tissue perfusion, and excessive lowering of the blood pressure can result in the hypoperfusion of vital organs. The optimal degree of blood pressure reduction may depend on demographic, genetic, physiological and clinical characteristics, and it is expected that the individualized diagnosis, prevention and treatment of hypertensive patients would be more effective than the current general management. This Special Issue invites reviews and original research manuscripts in the field of personalized medicine for hypertension. The articles may explore physiological or clinical aspects of the personalized management of hypertension. This Special Issue also invites manuscripts on hypertension management that relate to other demographic, physiological and clinical characteristics of the individual patient. Manuscripts describing the utilization of advanced analysis techniques in personalized blood pressure medicine are particularly welcome.

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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).