

Special Issue

Personalized Medicine in the ICU

Message from the Guest Editors

Critical Care Medicine has been dealing with the most vulnerable patient—the critically ill. Pathophysiologic mechanisms of disease and response to disease, monitoring issues and individualized treatment approaches are distinct compared to regular patients and vary considerably between critical care patients. ICUs hospitalize patients with a wide diversity of diseases requiring different management approaches (neurosurgical, thoracic-surgical, general surgical, medical, COVID-19 patients).

More than ever, in the pandemic era, scientists have realized the rationale to personalized medicine, especially for critically ill patients. Multiple subphenotypes have been identified concerning the presence of ARDS, sepsis, hyperinflammatory syndrome or multiorgan involvement. The underlying different pathophysiologic, cellular, and molecular pathways called for the individualization of treatments. The “one size does not fit all” approach is translated into precision medicine.

Under this perspective, we are calling for **review articles** and **original contributions** covering all aspects of how personalized medicine can improve critically ill patients' management.

Guest Editors

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Deadline for manuscript submissions

closed (10 August 2023)



Journal of Personalized Medicine

an Open Access Journal
by MDPI

CiteScore 6.0
Indexed in PubMed



mdpi.com/si/120794

*Journal of Personalized
Medicine*
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[mdpi.com/journal/
jpm](https://mdpi.com/journal/jpm)





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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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