

Special Issue

Personalized Treatment and Diagnosis Strategies in Psychiatry

Message from the Guest Editor

There are complex and multiple dimensional mechanisms involved in psychiatric disorders. The bio-psycho-social factors such as genetic, social, neurobiological, or environmental factors could contribute to the heterogeneity in each psychiatric disorder. Updated and advanced original studies, commands, consensus, or narrative or systemic review should be sought in order to resolve this complex and important topic. This Special Issue, “Personalized Treatment and Diagnosis Strategies in Psychiatry”, is seeking original research, commentaries, and systemic or narrative reviews about the personalized treatment, diagnosis or evaluation of psychiatric disorders, including research criteria domain, genetic typing, imaging assistant diagnosis, and artificial intelligence evaluating. Well-designated interventions, such as theta burst form of repetitive transcranial magnetic stimulation, for a specific subtype of psychiatric disorders, such as major depressive disorder with melancholic feature or with seasonal pattern, are also welcome if they provide insight for personalized psychiatric intervention.

Guest Editor

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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).