Special Issue

Personalized Treatment Strategy in Early Breast Cancer

Message from the Guest Editor

Treatment for early breast cancer usually involves a combination of surgery, radiation therapy, chemotherapy, hormone therapy, and/or HER2-targeted therapy based on the breast cancer subtype. Neoadiuvant therapy (chemotherapy, HER2-targeted) therapy, or endocrine therapy) is a well-known treatment strategy mainly in cases of locally advanced tumor, as well as triple-negative or HER2 positive breast cancer. The timing of chemotherapy around surgery does not affect survival outcome, but it is well known that patients who achieve a complete pathological response have better long-term outcomes. Moreover, neoadjuvant chemotherapy is an optimal setting for studying both breast cancer biology and the upcoming drug resistance due to the pressure of therapies. Finally, based on tumor response to preoperative therapy, adjuvant treatment can be tailored for every patient. This Special Issue will highlight the current state of the art in neoadjuvant treatment of breast cancer and will focus on the possibility of tailoring the best treatment strategy for every patient based on tumor biology and/or patients' characteristics.

Guest Editor

Dr. Giovanni Tazzioli

Oncologic Breast Surgery Unit, Department of Medical and Surgical Sciences for Mother, Child and Adult, University of Modena and Reggio Emilia, Azienda Ospedaliero-Universitaria Policlinico, 41125 Modena, Italy

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Journal of Personalized Medicine Editorial Office MDPI, Grosspeteranlage 5 4052 Basel, Switzerland Tel: +41 61 683 77 34 jpm@mdpi.com

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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

Prof. Dr. Kenneth P.H. Pritzker

Department of Laboratory Medicine and Pathobiology, Department of Surgery, University of Toronto, 6 Queens Pk Crescent W.F, Toronto, ON M5S 3H2. Canada

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