

Asthma: From Phenotypes to Personalized Medicine

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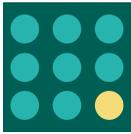
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Message from the Guest Editor

Asthma is a heterogenous disease of the airways with a high prevalence worldwide and characterized by chronic inflammation. The aim of asthma management is the control of the disease, and the cornerstone of asthma treatment is inhaled corticosteroids. As asthma becomes less well-controlled and more severe (moderate-to-severe), medications are more or less effective in particular phenotypes. Phenotypes and endotypes are known, respectively, as pathologic and molecular features that might not be directly associated with each other but may define a better response to treatment, and that is important from a clinical point of view. Accordingly, it has become necessary to define the phenotype of an asthmatic patient mainly based upon biomarkers and clinical features, and this has led to treatable traits and personalized medicine. Each asthmatic, and especially severe ones, is evaluated in terms of their phenotype, followed by the initiation of a treatment regimen that would be more effective in improving symptoms and/or reducing exacerbations, both of which are considered measures of control.

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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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