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# **Molecular Diagnostics for Infectious Diseases**

Guest Editor:

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Deadline for manuscript submissions: closed (15 July 2022)

### Message from the Guest Editor

In recent times, we have seen an explosion in the laboratory usage and public profile of molecular microbiology tools in humanity's fight against the SARS-CoV-2 pandemic. Clinical laboratories have quickly adapted to high-volume RT-PCR testing of nasopharyngeal samples, and sequencing laboratories and bioinformaticians have stepped up with molecular epidemiological data and variant detection that have been essential to good public health advice.

In tackling some of these challenges in the context of COVID-19, current research has paved the way for innovation in all other areas of molecular diagnostics for infectious disease.

It is in this context of an explosion of change and new literature in molecular diagnostics that this Special Issue is being issued. We feel it is timely to provide this single source to showcase the highlights of this period of change, from all areas of veterinary and clinical molecular diagnostics for infectious disease.

We welcome submissions that include molecular diagnostics for either human or veterinary infectious diseases, including bacterial, viral, fungal, parasites, and protists.









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### **Editor-in-Chief**

#### Prof. Dr. Hinh Ly

Department of Veterinary & Biomedical Sciences, University of Minnesota, Twin Cities, MN, USA

### Message from the Editor-in-Chief

The worldwide impact of infectious disease is incalculable. The consequences for human health in terms of morbidity and mortality are obvious and vast but, when infections of animals and plants are also taken into account, it is hard to imagine any other disease that has such a significant impact on our lives—on healthcare systems, on agriculture and on world economics. *Pathogens* is proud to continue to serve the international community by publishing high quality studies that further our understanding of infection and have meaningful consequences for disease intervention.

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