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Personalized medicine meets psychiatry

Robert J Hedaya

Georgetown University, USA

Despite significant advances in the last 60 years, traditional psychiatry leaves many patients ill, overmedicated and with dangerous co-morbidities. As an example, 30-50% of patients with mood disorders will develop MCI and Alzheimer's disease. Using clinical cases, author will show the audience how to combine a thoughtful personalized clinical assessment of psychiatric patients, with work at the deepest levels of the metabolome and genome to identify the precise sources of risk and the consequent personalized approaches to treatment and prevention.