Personalised Medicine

The Feiler et al. paper provides a critical examination of the promise, hype, and pitfalls surrounding the concept of "personalised medicine". The authors aim to stimulate intelligent debate and identify practical questions that need further examination. Additionally, the paper highlights several contrasting perspectives: Promise vs. Hype, Individual vs. Collective Goods, Molecular Stratification vs. Whole-Person Care, and Value, Equity, and Power.

There is vigorous debate about whether the promises of personalised medicine have been delivered or are likely to ever be delivered. Some argue the focus should shift more to public health approaches, while others see significant potential in personalised medicine. Further, there are tensions between individual notions of "my data" and the need to aggregate data into a knowledge common for personalised medicine to progress. The paper explores different views on data ownership and the balance between individual and collective goods.

In terms of molecular stratification versus whole-person care, one perspective emphasizes the biomedical, molecular understanding of "personalised medicine," while another sees personalised care as requiring attention to relational, values-based, and psychosocial aspects of the individual. Lastly, the paper examines how the pursuit of personalised medicine may risk concentrating resources and benefits on those with greater access and power, both nationally and globally. This raises questions of justice and the responsibility of researchers, clinicians, and policymakers.

Overall, there is some debate on what personalised medicine really means and if it is a good representative of what it entails. Personalised is not actually truly tailored to an individual person, rather it utilizes individual’s genetic profile to help guide treatment of certain diseases. In other words, it is an additional step which looks at specific markers groups of people with a certain disease may have. Stratified medicine has been thought to be a better representation of what “personalised medicine” genuinely means as it entails that there are groups of individuals who will benefit from this.

In my view, the paper rightly highlights the need to critically examine the assumptions, values, and potential unintended consequences underlying the push for personalised medicine. While the technology may hold promise, the authors demonstrate the importance of considering the broader social, ethical, and political implications. Ongoing interdisciplinary dialogue and a focus on practical, person-centered questions will be crucial as this field develops.

My research is focused primarily on determining the association of physical activity and sedentary behaviour in young patients post-treatment for hip pathologies compared to youth who have not had hip pathologies. Since personalised medicine emphasizes tailoring healthcare approaches to specific diseases, this research will contribute to understanding how post-treatment behaviors in certain patient populations could inform more individualized recovery plans and interventions to those specific pathologies, leading to better long-term outcomes for each patient based on their unique medical history.