

Hair Loss In Women

At least half of women in the U.S. will experience some form of hair loss by the time they are 50 years old. The most common types often occur with the greatest frequency at a time in life when women are experiencing other life stressors such as menopause, empty nest syndrome, and the aging of their parents. Hair loss can be frightening for women since it is often unclear how much hair will be lost when it begins. There are numerous causes of hair loss. We request that you to fill out our hair loss questionnaire to the best of your ability to help us correctly diagnose and treat your hair loss. It is important to note that hair breakage is NOT the same as hair loss. Hair breakage is caused by an inherited weakness of the hair shaft or over-processing.

There are 2 broad categories of hair loss (alopecia):

1. Non-scarring Alopecia - hair follicles are preserved.
2. Scarring Alopecia - hair follicles are destroyed.

Non-scarring alopecia is caused by many factors. In this type of hair loss, the follicle is preserved and the hair can potentially grow back. The most common causes of non-scarring alopecia are:

- a. Heredity - This type of hair loss occurs in both males and females. Women can get thin hair, especially on the vertex or crown of the scalp. The first thing you may notice is your part gets wide, but complete baldness is rare.
- b. Telogen Effluvium - Approximately three to five months after a sudden shock/change to the body (such as high fever, severe illness, major surgery, severe psychological stress, childbirth) large amounts of hair are shed. This shedding usually corrects itself without treatment within 1 year.
- c. Internal illness - Bloodwork is drawn by your primary care doctor to rule out systemic causes of hair loss. If abnormal, correcting the problem may result in hair regrowth.
- d. Alopecia Areata - An autoimmune disease in which the body rejects hair in round patches. You see round islands of complete balding within areas of normal hair. It can self-resolve or be treated with monthly corticosteroid injections and/or topical corticosteroids. Newer treatments are on the horizon. For more information contact the National Alopecia Areata Foundation, P.O. Box 150760, San Rafael, CA 94915, phone (415)472-3780, or web site www.naaf.org.
- e. Medication - We need a list of all medication (prescribed and over the counter) and which ones are new or discontinued recently.
- f. Rashes such as Seborrheic Dermatitis or Psoriasis - The combination of inflammation and scratching makes some hairs shed.

Scarring alopecia is caused by several factors. In this type of alopecia the hair follicle is destroyed and the hair loss is permanent. Treatment is targeted at preventing further scarring. The most common causes of scarring alopecia are:

- a. Diseases that scar the scalp - Diagnosed by physical examination and/or biopsy and/or bloodwork. Treatment of the disease hopefully will prevent further scarring.

- b. Overuse of hair chemicals/heat/chronic traction (pulling) of hair – These hair care practices gradually scar the scalp and cause progressive permanent hair loss. Even though you or your hairdresser may not have done anything wrong, chronic irritation of the scalp can cause scarring alopecia.

Treatment of hair loss:

1. Identify the underlying cause and correct it (if possible).
2. Decrease or stop hair chemicals, heat and/or traction to hair and scalp. Be gentle. Avoid tight braids, pony-tails, aggressive combing or washing, excessive drying, straightening, hot combing, and straight ironing.
3. **Rogaine** (minoxidil) 2% solution – applied to the scalp twice daily – this is FDA approved to treat hair loss in women. Must be used for at least 6 months to see results (regrowth of hair or prevention of further hair loss). Rogaine also has a 5% mousse that is applied once, rather than twice daily. Avoid the forehead. Rogaine works better on the crown of the scalp than the frontal scalp.
4. Intralesional injections of corticosteroids – This helps certain types of hair loss, only if it is active.
5. Medications for seborrheic dermatitis or psoriasis can make the scalp healthier and encourage normal healthy hair growth.
6. **Multivitamin** daily - in addition to following a healthy and well-balanced diet.
7. **Thickening shampoos** such as *Nioxin*, *Aveda Pure Abundance*, and *Pantene Pro-V Thick and Full*. (These specific product lines are designed to thicken individual strands of hair).
8. **Anti-dandruff shampoos** such as *Head & Shoulders* or *Selsun Blue* to reduce inflammation. If needed, ketoconazole 2% shampoo is prescribed.
9. Another option is concealer products such as Infinity Hair Loss Concealing Fibers, TOPPIK Hair Building Fibers, Caboki Hair Loss Concealer, Samson Hair Building Fibers, and Viviscal Hair Building Fibers (among many others). Conceal hair loss and blend in with your natural hair.
10. **Reduce stress** and avoid going on and off medications – especially hormonal medications such as birth control pills and hormone replacement therapy as that can trigger and exacerbate hair loss.
11. Results from implementing the above measures will vary from patient to patient. All measures should be tried for **AT LEAST 6 MONTHS**. Female pattern hair loss rarely causes complete baldness and stabilizes over time. For severe hair loss that does not respond and continues to progress, some patients prefer wigs. *Paula Young Wig Company* provides a wide variety and high quality of wigs and can be found over the internet. Finally, hair transplantation may be an option for certain patients.