

## 2. What causes FPHL?

- It is due to genetic and hormonal factors.
- There is gradual thinning of scalp hair at the centre and increased shedding.
- Bald patches are uncommon in women.
- May be associated with conditions in which androgen (a group of hormones) levels are elevated such as polycystic ovarian syndrome (PCOS). Acne, increased facial hair, irregular periods and infertility are all signs of PCOS.

## 3. Is female pattern hair loss hereditary?

- Yes. It can be inherited from either or both parents.

## 4. How does FPHL manifest? When does FPHL manifest?

- There is wide spread thinning of the hair, mainly on the crown of the scalp. It may initially start as widening of the hair parting areas.
- In females, the hairline at the front of the scalp often remains normal unlike in men where receding of frontal hair line is observed.
- Hairs in the affected areas are initially thinner and shorter compared to hairs in unaffected areas, before they become absent.
- FPHL usually manifests after 40 years of age. Earlier onset may be seen in PCOS patients.

## 5. How is FPHL diagnosed? Are there any tests to diagnose FPHL?

- A dermatologist diagnoses FPHL chiefly on history and clinical examination; a simple test such as dermatoscopy aids in the clinical diagnosis.
- The diagnosis is usually based on the history of gradual thinning of hair or increased hair shedding on the top of the head, the pattern of hair loss and any family history of similar hair loss.
- Most FPHL patients do not have any underlying hormonal abnormalities except few cases where excess androgen levels are found.
- Sometimes tests are done to rule out PCOS and congenital adrenal hyperplasia.

## 6. Can FPHL be cured?

- FPHL can be controlled with appropriate treatment. However, it tends to progress very slowly, from several years to decades.

## 7. What are the treatment options in FPHL?

- Topical minoxidil and various hormonal treatments can be used to treat FPHL.

### Medical treatment

- 2% or 5% minoxidil solution is applied to the scalp to slow down the progression and partially restore hair in some women.
- Minoxidil solution should only be applied to the scalp. Any spillage to the forehead or cheeks should be cleansed to avoid increased hair growth in these areas.
- Minoxidil should be used for at least 6 months before any benefit may be noted.
- Oral treatments such as spironolactone, cyproterone acetate, flutamide and cimetidine can block the action of DHT (hormone) on the scalp, which may lead to some improvement in hair loss.
- Spironolactone and cyproterone acetate should be avoided in pregnancy since they can cause feminisation of a male foetus; both should be avoided during breast feeding. Flutamide carries a risk of damaging the liver.
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### Surgical treatments

- Hair transplantation is a procedure where hair follicles are taken from the back and sides of the scalp and transplanted onto the bald areas.

### Wigs and hair pieces

- Wigs, toupees and hair extensions can be helpful in disguising hair loss.

## 8. What are the effects of female pattern hair loss?

- FPHL is not only a cosmetic issue, but causes significant psychological distress.
- Women with FPHL have low self-esteem, depression, and feelings of unattractiveness.
- Appropriate treatment based on patient needs should be hence instituted.

#### Disclaimer:

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# ANDROGENETIC ALOPECIA

## INDIAN ASSOCIATION OF DERMATOLOGISTS, VENEREOLOGISTS AND LEPROLOGISTS

### MALE PATTERN HAIR LOSS

- What is male pattern hair loss?
- What are the causes of male pattern hair loss?
- Is male pattern hair loss hereditary?
- How does MPHL manifest? When does MPHL manifest?
- How is MPHL diagnosed? Are there any tests to diagnose MPHL?
- Can MPHL be cured?
- How can MPHL be treated?
- How long should one continue the treatment for MPHL?
- Can Leprosy be cured? Can Leprosy recur?
- Can a person with Leprosy marry?
- What are the misconceptions and stigma associated with leprosy? How can this be corrected?

### FEMALE PATTERN HAIR LOSS

- What is female pattern hair loss?
- What causes FPHL?
- Is female pattern hair loss hereditary?
- How does FPHL manifest? When does FPHL manifest?
- How is FPHL diagnosed? Are there any tests to diagnose FPHL?
- Can FPHL be cured?
- What are the treatment options in FPHL?
- What are the effects of female pattern hair loss?

Creative Partner



**Androgenetic Alopecia is the most common cause of hair loss seen in both men and women. It is due to genetic or hormonal causes. It is also called as common bald ness, male pattern hair loss, female pattern hair loss, premature baldness.**

## MALE PATTERN HAIR LOSS

### 1. What is male pattern hair loss?

- Male pattern hair loss (MPHL) is the most common type of hair loss in men.
- Baldness appears gradually on the crown of the scalp or as receding hairline at the frontal and thinning of hair over temple areas.
- It affects about 30% of men by the age of 30 and 50% of men over the age of 50.



### 2. What are the causes of male pattern hair loss?

- Both genetic and hormonal factors are responsible.
- Testosterone is naturally converted in the body to dihydrotestosterone (DHT) which causes a change in the hair follicles on the scalp. Increased levels of DHT have been found in the balding scalp.
- The hairs become progressively smaller in diameter, shorter in length and lighter in colour until eventually the follicles shrink completely and stop producing hair.

### 3. Is male pattern hair loss hereditary?

- Yes. It can be inherited from either or both parents.

### 4. How does MPHL manifest? When does MPHL manifest?

- A receding frontal hairline is the usual pattern and there may be loss of hair from the top of the head.
- Hairs in the affected areas are thin and short before they become absent.
- Men become aware of scalp hair loss or a receding hairline at any time after puberty but most of them become aware of it as they approach their thirties.
- Hair loss may cause significant psychological difficulties.

### 5. How is MPHL diagnosed? Are there any tests to diagnose MPHL?

- A dermatologist diagnoses MPHL chiefly on history and clinical examination; a simple test such as dermatoscopy aids in the clinical diagnosis.
- The diagnosis is usually based on the clinical examination and history of hair loss on the front/ top of the head or receding hairline, the pattern of hair loss and a family history of similar hair loss.
- The skin on the scalp looks normal on examination.

### 6. Can MPHL be cured?

- There is no cure but medical and surgical treatments which are available may improve the condition. However, it tends to progress very slowly, from several years to decades.
- An earlier age of onset may lead to quicker progression.

### 7. How can MPHL be treated?

- Male pattern baldness is progressive and it does not improve or reverse without treatment.
- Minoxidil and Finasteride are commonly prescribed medications which may restore the hair to some extent.

#### Minoxidil

- 5% minoxidil liquid or foam applied to the scalp may slow down the progression of hair loss and partially restore hair.
- It is applied to the affected scalp (not the hair) using a dropper or pump spray device and should be spread over the affected area lightly.
- Minoxidil can cause reactions such as dryness, redness, scaling and/or itchiness at the site of application and should not be applied if there are cuts or open wounds.
- At least 6 months of application is required to notice any benefit.
- Minoxidil solution may cause an initial hair fall in the first 2-8 weeks of treatment, and this usually subsides when the new hairs start to grow.

#### Finasteride

- Finasteride tablets reduce levels of DHT (hormone), which may slow hair loss and possibly help regrowth of hair.
- Continuous use for 3 to 6 months is required before a benefit is usually seen.
- Side-effects are decreased libido and erectile problems.

#### Surgical treatments

- Hair restoration surgery or transplantation is a procedure where hair follicles are taken from the back and sides of the scalp and transplanted onto the bald areas.

- Scalp reduction, where a section of the bald area is removed and the hair-bearing scalp stretched to cover the gap. Tissue expanders may be used to stretch the skin.

#### Wigs and hair pieces

- Wigs, toupees and hair extensions are helpful in disguising hair loss.

#### Skin camouflage

- Spray preparations containing small pigmented fibres are available and may help to disguise the condition in some individuals.
- These preparations may wash away if the hair gets wet i.e. rain, swimming, perspiration, and they only tend to last between brushing/shampooing.

#### Light therapy

- A variety of laser and light sources have been tried with varied success.

#### Future Directions

- Various growth factors and platelet rich plasma (PRP) have shown promising results in male pattern baldness.

### 8. How long should one continue the treatment for MPHL?

- Treatment of MPHL is effective only as long as treatment is continued.

## FEMALE PATTERN HAIR LOSS

### 1. What is female pattern hair loss?

- Female pattern hair loss (FPHL) is the most common type of hair loss seen in women usually occurring in the 40-60s years of age.

