ALOPECIA AREATA

What is it?

Alopecia means hair loss. Alopecia areata is a medical condition where hair falls out in round patches. This can occur on the scalp and elsewhere on the body. Depending on the type of hair loss, it can be known as:

- Alopecia areata (hair loss in patches)
- Alopecia totalis (lose all hair on the scalp)
- Alopecia universalis (lose all hair on the body)



Hair often grows back but may fall out again. Sometimes the hair loss lasts for many years.

What causes it?

Alopecia areata is an autoimmune disease, which means that the body's immune system attacks the body. In alopecia areata develops, the body attacks its own hair follicles. A person's genetic makeup, combined with other factors, triggers this form of hair loss. It most often occurs in otherwise healthy people and at any age.

Alopecia areata is associated with a higher risk for:

- Another autoimmune disease such as thyroid disease or vitiligo (patches of lighter skin appear)
- Asthma and allergies, mainly atopic dermatitis (more commonly called eczema) and hay fever (nasal allergies)
- Having relatives who have asthma, allergies, or an autoimmune disease such as type 1 diabetes

What are the symptoms?

If you have alopecia areata, you may have one or more of the following:

• Patchy hair loss.

Often begins with 1 or more coin-sized, round, smooth, bare patches where hair once was. Mostly on the scalp but it can involve eyebrows, eyelashes, beards

• Widespread hair loss.

With time, some patients go bald. Some lose all their body hair though this is not common. Also uncommon is a band of hair loss at the back of the scalp.

Nail problems.

Alopecia areata also can affect fingernails and toenails. Nails can have tiny pinpoint dents (pitting). They also can have white spots or lines, be rough, lose their shine, or become thin and split. Rarely nails change shape or fall off. Sometimes nail changes are the first sign of alopecia areata

How is it diagnosed?

Dermatologist can diagnose alopecia areata by looking at the hair loss. If the patch of hair loss is expanding, the doctor may pull out a few hairs and looked at under a microscope.

A skin biopsy can be done to confirm that the disease is alopecia areata. A small piece of skin is removed and looked at under a microscope.

If another autoimmune disease is suspected, blood tests may be carried out.

Treatment options

There is no cure for alopecia areata. Hair often re-grows on its own. A dermatologist may prescribe one or more of the following to help the hair re-grow more quickly:

• Corticosteroids.

This can be given as injections into areas with hair loss, or as a topical application. For adults with alopecia areata, injections are often the first treatment tried. Patients receive shots every 3 to 6 weeks. Hair growth begins about 4 weeks after the last shot. Sometimes, it takes longer. Topical corticosteroids are less effective and often the best treatment for children.

• Minoxidil.

A hair re-growth medicine, Minoxidil 5%, may help some patients re-grow their hair. Both children and adults can use it. It may take up to 3 months for hair to re-grow

• Anthralin.

A medicine that alters the skin's immune function.

• Diphencyprone (DPCP).

This medicine is applied to the bald skin.

Will it recur?

When a person has alopecia areata, the hair will start to re-grow when the body gets the right signals. Sometimes this happens without treatment. Even with treatment, new hair loss can occur. Everything depends on how the immune system reacts.

For some people, the disease never returns. Others lose and re-grow hair for many years. No one can predict when the hair might re-grow or fall out again.