

MALE PATTERN HAIR LOSS

Men, are you concerned and want to know a little more about thinning hair?

For many years, male pattern hair loss was always referred to as male pattern alopecia (MPA). Nowadays it is more frequently diagnosed as androgenic hair patterning. These terms can be used interchangeably.

There are many types of hair loss and so, it is important to identify what you are suffering from. Having a detailed examination of your scalp by a registered trichologist can help ascertain if there are active follicles present on the scalp to support hair growth. The trichologist will then be able to advise on treatment.

So, what is the cause of androgenic patterning (MPA)?

When levels of testosterone in the blood increase, more of it is converted to dihydrotestosterone (DHT) by enzyme 5-alpha reductase. This hormonal process has a destructive action on the hair follicles within the vertex (top), crown, frontal and temporal margins.

The hormonal changes in the pattern area usually appear slowly. Every growing hair is in a growth phase called Anagen. Without the presence of DHT, this phase for each hair can vary between 5 and 11 years, dependent on individual factors. Some people have more hair which stays in this phase for longer than others do. Hence some people can grow their hair longer than others. When the individual hair ceases to grow, the hair follicle will then go into a resting phase called Telogen and the existing hair will then be shed. The telogen phase lasts until a new hair is formed within the follicle. The level of DHT influences the lifespan and quality of this new hair and can cause it to have a shorter lifespan (a shorter anagen phase) and to be finer in texture. This cycle will then be repeated with each subsequent new hair having a shorter life, leading eventually to the individual follicle shutting down causing complete and permanent hair loss in the affected areas.

As this condition is cumulative and irreversible, it is important to seek advice in the early stages so that treatment may be offered which may be able to extend the anagen phase in each cycle of the hair follicle, therefore delaying the complete loss in that follicle. The older you are, then the outcome is likely to be poor and any topical or oral treatments will be ineffective. However, if you are just noticing that your hair is getting thinner in the pattern areas, this may be the ideal time to try a topical treatment (a DHT inhibitor) before there is significant atrophy. If you do find the treatment to be effective in delaying hair loss (and this will take 12 months of daily applications to be sure), then you will need to continue that treatment indefinitely as, if you cease, the DHT will resume its effect on shortening the lifespan of hairs and the pattern loss will

57 The Ridgeway, Burntwood, Staffordshire. WS7 4SP
cpw@birminghamtrichology.co.uk
WWW.birminghamtrichology.co.uk
Tel: 01543 670717

Published July 2020



start to progress again. You therefore need to consider the ongoing cost implications of using this treatment.

If you are concerned about any of the issues raised above regarding hair loss, then you should seek a consultation with a registered Trichologist.

Carol Walker FIT LCGI Cert.Ed
Consultant Trichologist
Fellow of Institute of Trichologist (London).

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