

Carol Walker opens the door to her world of trichology in her series of columns in *SalonFocus*

Walker's World

Trichotillomania is an alarming compulsive condition that hairdressers need to understand, says Carol Walker

Sufferers of trichotillomania twist, pluck or pull out clumps of their own hair. It can lead to permanent hair loss if prolonged.

Hairdressers are in an ideal position to talk about trichotillomania to afflicted clients and to those who are worried about someone else who might suffer.

Your correct identification of trichotillomania could stop the destruction of the client's hair follicles just in time.

The condition is debilitating and isolating not only for the sufferer but also for their family and friends.

Giving help, support and guidance can, in some cases, reduce the stress that may itself be the cause or an aggravating feature of the problem.

You could offer help yourself or refer on to a trichologist.

TWISTING

Trichotillomania can start in children as young as two, usually evidenced by the twisting of the hair around the fingers or thumbs. It is thought that this twisting is done in place of thumb sucking.

If this is noted, it should be stopped as soon as possible before it becomes habit forming. The simplest treatment is to cut the child's hair short so that they cannot twist the hair around their fingers.

The child will soon adapt to short hair and the follicle will be allowed to reform new healthy hairs.

It is not always easy to convince parents this is necessary, but I cannot emphasise enough that if this condition is allowed to persist, then permanent damage will result.

STRESS

Trichotillomania can occur throughout life at times of stress; it is not uncommon that

the school environment can be stressful for children of any age. I have seen a number of young people who feel that pulling their hair out takes away the pain of feeling lonely and isolated at school, of having failing grades or not achieving parental expectations.

The same may be the case when students move away from home to attend higher education.

This condition is not confined to the young, however. I have in recent months seen a client who has started to pull out large amounts of hair due to a violent and emotional family life; the client is 60 years old and has never done this before.

The condition was so advanced that it was necessary to cover the head with a wig. This has been positive for the client in a number of ways; firstly, it stops the need to touch the hair and scalp which leads to the pulling; secondly, it hides the habit from the outside world as well as family and friends; thirdly, and most of all, it gives back a feeling of self-esteem and confidence.

SIGNS

Often self-confidence is low and may border on despair because the person hates what they have done and how they look.

As a hairdresser, you should be aware of the signs to look out for and to advise the concerned parent or friend. These are areas of thinning which can change in shape but not necessarily in size.

Such areas of sparse hair are more likely to be found at easily accessible sites such as side or temples. It may also show in plucking of the eyebrows or eyelashes. Hair pulling is usually carried out unconsciously, often at times of rest while reading or watching television but can be during any activity which leaves the hands free to move over the scalp.

Photograph by Stephen Goodwin

The area of thinning, on examination, will reveal hairs which appear as twisted and broken and, in some severe cases, the scalp may be clearly visible.

It is not unusual for sufferers to hide away once they have been confronted. They may also be in denial and become angry towards you for raising the issue. It is only when the person asks for help that the hard work can begin.

PAMPER

As the hairdresser, you can offer to pamper the hair by treating it to a conditioning treatment in order to style it in such a way as to disguise the loss, thin area while it is growing back.

The best thing that you are able to offer, however, is a supportive but firm approach, impressing on the person concerned that, if they do not stop, then they will do permanent damage to their hair and scalp.

It might also be sensible to suggest that a therapist input could help with the underlying psychological causes, but this will need to be handled delicately.

While a hairdresser and trichologist can help the physical aspects of the condition, the psychological issues that caused trichotillomania to arise in the first place will need addressing separately if the problem is not to recur or be swapped for another unwanted behaviour.

Go to <http://www.trichotillomaniasink.com/> for more information.

• Carol Walker is happy to answer questions of a trichological nature. Please address questions to her at cfid@salonfocus.co.uk putting "Carol Walker" in the subject box.