

## Hair Loss Research Priority Setting Partnership

### Form A: Long list of research question

#### Hair Loss Disorders (excluding Alopecia Areata)

The uncertainties listed on this form have been gathered from a survey, last September, in consultation with people with hair loss, their parents/carers and healthcare professionals.

You are being asked to choose and rank 10 of these uncertainties.

The questions have been grouped into categories to make the document easier to follow. This grouping is for presentation only and will not influence which questions get prioritised.

**Please read through the list of questions to identify your top 10, then link to Form B (see SurveyMonkey web link below) to rank the top 10 that you would like to see prioritised for research.**

*(A glossary of medical terminology is at the end of this document)*

All Types of Hair Loss	
1	In all types of hair loss, do certain diets or nutritional supplements (for example vitamin D) prevent or improve hair loss?
2	In all types of hair loss, do any hair styling practices (washing, styling, cutting or colouring hair) reduce hair re-growth/ increase hair loss?
3	In all types of hair loss, does stress cause hair loss?
4	In all types of hair loss, does raising ferritin levels/replacing iron improve hair growth? And what is the optimal level of ferritin?
5	In all types of hair loss, are psychological therapies effective in improving patient outcomes?
6	In general practice, what is the best method of assessment of hair disorders (for example- are blood tests helpful)?
7	How aware are GPs of the early signs of hair loss and their management?
8	In all types of hair loss, what outcome measures should be used to assess severity of hair loss, progression and impact on the individual?
9	In all types of hair loss, how aware are General Practitioners (GPs) regarding the psychological impact of hair loss?
10	In all types of hair loss, how long should topical steroids be used for?

Chemotherapy-induced hair loss	
11	How common is permanent Chemotherapy-induced hair loss and how can permanent loss be prevented?
12	In Chemotherapy-induced hair loss, are any treatments effective in helping hair re-growth?
13	In Chemotherapy-induced hair loss, why does hair grow back a different colour or texture?

Female pattern hair loss (androgenetic alopecia)	
14	What are the causes of female pattern hair loss?- for example- genetic, hormonal and childbirth, autoimmune, dietary, other medical conditions, environmental factors.
15	How can female pattern hair loss be prevented?
16	In female pattern hair loss, does hormone replacement therapy(HRT) halt progression of the hair loss compared to placebo?
17	What is the cause of post-menopausal hair loss and how can it be prevented?
18	In female pattern hair loss, are natural anti-androgen remedies as effective as treatment with Minoxidil?
19	How can female pattern hair loss be diagnosed early?
20	In female pattern hair loss, can any factors predict future hair loss?
21	Is spironolactone helpful in managing female pattern hair loss?

Folliculitis decalvans / Tufted folliculitis	
22	What is the most effective treatment for folliculitis decalvans?

Frontal fibrosing alopecia	
23	What are the causes of frontal fibrosing alopecia?- for example- dietary, genetic, autoimmune, medications, hormonal, environmental, vaccination, infection.
24	What is the most effective treatment for frontal fibrosing alopecia?
25	Can frontal fibrosing alopecia be prevented?
26	What are the early signs of frontal fibrosing alopecia and can detecting these signs prevent further hair loss?
27	In frontal fibrosing alopecia, do cosmetics/sunscreen/daily products cause hair loss?
28	In frontal fibrosing alopecia, why is hair lost from the frontal area of the scalp?
29	In frontal fibrosing alopecia, what is the association with lichen planus? Are they the same condition?
30	In frontal fibrosing alopecia, does homeopathic treatment stop further hair loss compared to placebo?
31	In frontal fibrosing alopecia, do steroids applied to the skin stop further hair loss compared to placebo?
32	In frontal fibrosing alopecia, does minoxidil lotion stop further hair loss compared to placebo?

Scarring alopecia	
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33	Are intralesional steroids effective in the treatment of scarring alopecia?
34	What is the natural history of scarring alopecia?
35	In scarring alopecia, does surgery to remove scarred or inflamed areas stop further hair loss compared to no surgery?

<b>Lichen planopilaris</b>	
36	What are the causes of Lichen planopilaris? Is it genetic?
37	What is the most effective treatment for Lichen planopilaris?
38	How can Lichen planopilaris be prevented?
39	Can Lichen planopilaris put you at a higher risk of developing other diseases?
40	How can Lichen planopilaris be diagnosed earlier?
41	Does hydroxychloroquine work better than placebo in treating Lichen planopilaris?
42	Do corticosteroid tablets work better than placebo in treating Lichen planopilaris?
43	In lichen planopilaris, how long should a treatment be given before deciding how well the treatment has worked?

<b>Male pattern hair loss (androgenetic alopecia)</b>	
44	What are the causes of male pattern hair loss? For example genetic, diet.
45	How can male pattern hair loss be prevented?
46	Could genetic reprogramming of hair follicles help to treat male pattern hair loss?
47	In male pattern hair loss, what factors affect the age of onset?

<b>Telogen effluvium</b>	
48	What factors predispose individuals to developing telogen effluvium?
49	What is the best treatment for telogen effluvium?
50	In diffuse hair loss, what is the best way to distinguish between telogen effluvium and diffuse alopecia areata?
51	How can telogen effluvium be prevented?

<b>Pattern hair loss (male and female)</b>	
52	In male and female pattern hair loss, is standard therapy combined with agents to reduce scalp inflammation (e.g. topical corticosteroids) better than standard therapy alone?
53	In pattern hair loss, do over the counter treatments improve hair re-growth compared to placebo treatments?
54	In male and female pattern hair loss, is minoxidil combined with treatment to reduce androgen activity (e.g. 5 $\alpha$ -reductase inhibitors) better than minoxidil alone?
55	In male and female pattern hair loss, does low level light therapy improve hair regrowth compared to placebo?
56	How effective are platelet rich plasma injections in treating male and female pattern hair loss?

Please use the web link below for Form B where you can rank your top ten:

<https://www.surveymonkey.com/r/hairlosspsp2015>



**Androgens** – the group of male hormones that includes testosterone.

**Anti-androgens** – therapies that reduce or inhibit the action of male hormones.

**Autoimmune** – the immune system protects the body from disease and infection; an autoimmune disorder occurs when the body's immune system attacks and destroys healthy body tissue by mistake.

**Corticosteroids/steroids** – medicines used to reduce inflammation and suppress the immune system.

**Diffuse alopecia areata** – non-patchy alopecia areata resulting in widespread hair loss.

**Environment** – outside influences on health such as social circumstances, diet, drugs etc.

**Female pattern hair loss** – also known as female androgenetic alopecia. Inherited type of hair loss that causes some hair follicles to gradually become smaller, resulting in reduced hair volume and widening partings, particularly over the mid-frontal scalp.

**Ferritin** – protein that stores iron in the body's cells.

**Folliculitis decalvans** – inflammatory pustular scalp condition that leads to permanent scarring hair loss.

**Frontal fibrosing alopecia (FFA)** – inflammatory scarring alopecia causing the frontal, and sometimes entire, hairline to recede, often with loss of eyebrows.

**Genetic** – characteristics that are inherited.

**Homeopathic** – alternative medicine based on a claim that a substance that causes the symptoms of a disease in healthy people, could be diluted and used to cure similar symptoms in sick people.

**Hydroxychloroquine** – medication that can be used to suppress the immune system in autoimmune hair loss disorders.

**Intralesional steroids** – injection of a steroid solution into abnormal skin.

**Lichen planopilaris** – inflammatory progressive scarring alopecia that results in patchy permanent hair loss on the scalp.

**Lichen planus** – non-infectious skin disorder that can occur on several body sites.

**Male pattern hair loss** – also known as male androgenetic alopecia. Inherited type of hair loss that causes miniaturisation of hair follicles in a well-defined pattern resulting in varying degrees of balding.

**Minoxidil** – medication that can be applied to the scalp to promote hair growth, mainly used in the treatment of male or female pattern hair loss.

**Outcome measure** - the standard against which the end result of the intervention is assessed.

**Patient outcomes** – assessing the quality of care delivered to NHS patients from the patient perspective.

**Placebo** – dummy treatment or treatment without specific activity for the condition being treated.

**Scarring alopecia** – also known as cicatricial alopecia, refers to a collection of hair loss disorders that cause permanent hair loss.

**Spironolactone** – anti-androgen medication.

**Telogen effluvium** – increased hair shedding caused by the early entry of hair follicle into the telogen (resting) phase.

**Topical steroids** – creams, gels, lotions or ointments applied to the skin, containing corticosteroids.

**5 $\alpha$ -reductase inhibitors** - are a class of drugs with anti-androgen effects.