



HAIR TRANSPLANTATION

What are the aims of this leaflet?

This leaflet has been written to help you understand more about hair transplantation. It tells you what hair transplantation is, who is suitable, what is involved, possible side effects, and where you can get more information about it.

What is hair transplantation?

Hair transplantation, also called follicular unit transplantation, is a surgical procedure that involves moving hair follicles from one part of the body (donor) to another area (recipient) where additional hair density is desired. Most cases involve moving scalp hair from the back and/or sides of the head to areas where it has been lost eg the front and top of the scalp in [androgenetic \(pattern\) alopecia](#).

How is it performed?

This procedure is performed as a day case under local anaesthesia. It involves removing hair follicles from the scalp by either removing a strip of skin and hair which is then dissected under a microscope (strip method) or by punching out individual hair follicle groupings (follicular units) one by one (follicular unit extraction or FUE). Hair transplantation often involves transplanting thousands of individual follicular units and is a very labour intensive procedure often taking the whole day.

Who is suitable?

If you have a form of hereditary hair loss known as [androgenetic \(pattern\) alopecia](#) then you are suitable for this procedure as long as you have enough donor hair to be transplanted to make a difference to your appearance. Other types of hair loss that can be treated by hair transplantation include: scars from accidents, scalp surgery scars, burns or chemical damage; traction alopecia from tight braiding. There are other conditions that may also be suitable and if in doubt its best to seek an opinion from a hairloss specialist dermatologist or hair transplant surgeon. It is also possible for hair from the scalp can be transplanted to eyebrows, eyelashes, moustaches and beards when injury or skin conditions have caused hair loss in these areas.

Who is not suitable?

Hair loss caused by conditions that are on-going or recurrent such as alopecia areata, thyroid disease, diabetes, anaemia, hair-pulling (trichotillomania); drug induced hair loss; and post-pregnancy hair loss to name a few. In addition, in order to get a satisfactory long lasting result it is desirable that the hairloss has stabilised before considering hair transplantation eg patients with a very early stage of [androgenetic \(pattern\) hairloss](#) may be directed to other treatments such as minoxidil or hormonal treatments rather than transplantation.

How many procedures will I need?

In androgenetic or pattern hair loss, the presence of hormone receptors to the male hormone known as dihydrotestosterone (DHT) predominantly affecting the top and frontal scalp (non-permanent areas) are stimulated by DHT and this results in hairloss in these areas in susceptible



individuals. No such receptors exist at the back of the scalp so these areas don't tend to lose hair and are so-called permanent areas. The number and location of these susceptible hairs is determined by inherited tendency derived from either one or both parents. [Androgenetic \(pattern\) hair loss](#) tends to be a progressive condition so repeat procedures may be required if the hair loss worsens.

Is it permanent?

The hairs that are removed from the back of the head have no DHT receptors, and even if they are moved they remain programmed to continue growing so such hair transplanted does not fall out.

Will I continue to lose hair?

This is very likely if you have [androgenetic \(pattern\) alopecia](#) although in some cases the hair loss does slow down and plateau after a certain age. Medical treatments can be used to slow down or stop ongoing hair loss but these only work as long as you continue to use them. If the cause of your hair loss is due to another condition such as an injury then it may not worsen over time but it is possible that you may develop superimposed hereditary hair loss as well.

What are the possible side effects of the surgery?

After surgery you will have small scabs in the transplanted area for up to 2 weeks. You may develop swelling in these areas, and have mild pain, or redness. Infection is very rare. In the donor area you will have a narrow scar (usually about 1mm wide) or small punch scars which can normally be hidden or disguised by your remaining hair.

Will I need to take time off work?

This will depend on your individual circumstances. From a physical fitness point of view most people feel well the day after surgery with only some mild discomfort in the donor region. However, there are scabs and possibly mild swelling in the recipient area that may be visible if you do not have enough remaining hair to cover over the transplanted hairs. Once the scabs fall off there is then nothing visible until new hairs start to grow through at 3-4 months. For the first week after surgery you should not carry out any strenuous physical activity nor work in any dusty or dirty environments.

Will the NHS pay for surgery?

Surgical hair restoration is considered a cosmetic treatment so is not normally offered under the NHS but has to be sought privately. Exceptions are sometimes made in cases of scalp or facial injury/burns, and occasionally other operations are necessary such as scalp skin flaps to cover large defects or areas of hair loss.

Where can I get more information about hair transplantation?

Web links to:

British Association of Hair Restoration Surgery www.bahrs.co.uk

International Society of Hair Restoration Surgery www.ishrs.org



This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Hair and Nail Group: its contents, however, may occasionally differ from the advice given to you by your doctor.