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newest micrografts for male and female baldness

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1. BACKGROUND:

The various micrografts techniques allows an esthetic and definitive achievement of most hair alopecia. A combining treatment with minoxidil lotion, finasteride, anti-androgens or platelet rich plasma (PRP) derived stem cells are sometimes required.

The main medical complaint is male androgenetic alopecia (MAGA) and female androgenetic alopecia (FAGA) and more cicatricial alopecia.

Hair micrografts or follicular unit grafts techniques are so far being proposed, namely Follicular Units Extraction (FUE) or Follicular Unit Long Hair (FUL).

Newest research in cellular therapy with follicular cell implantation,

2. MATERIALS AND METHODS:

In MAGA or FAGA, hair thinning appears to follow and evolve according to a particular pattern. **Dynamic multifactorial classification** allows, for both sex, an evaluation of various parameters.

The surgical restoration of MAGA or FAGA consists on transplanting an adequate number of hairs (1000 to 4000 hair/session). Micrografts or follicular units (1-3 hair) are recommended.

Two techniques are currently available:

- **The follicular Unit extraction (FUE):** the scalp is previously shaved. Hairs are harvested with 1 mm punches. FUE has in fact few indications for female baldness due to the decreased density of the donor area. This procedure is recommended to patients who shave their scalp.

- **The Bouhanna follicular unit long Hair (FUL):** the scalp is not previously shaved. Long hairs are harvested with a strip followed by a special "trichophytic closure" which allows an undetectable linear scar. The implantation of 1-3 long hair graft aims at restoring a natural aspect. Long hair implanted may fall 15 days after the session and have a complete and definitive regrowth 6 to 9 months later. In that way the patient and the surgeon have with this technique an immediate preview of the result. (The "wait and see" of the conventional FUT procedure is replaced by the "see and wait")

Micrografts transplantation can be combined with either minoxidil 2% or 5% solution, and/or oral finasteride 1 mg for male and cyproterone acetate for female. The aim of these treatments is to preserve the remaining residual hairs between the grafts, to prevent the transient hair loss of the transplanted hairs and to initiate the re-growth of grafted and non grafted hairs.

3. RESULTS:

The best choice upon each procedure will be developed according to the age (young or older patient), to the ethnic variations (Afro-americans, Asians...), to their psychological profile and their own esthetic desire.

The others indications for female are definitive traction alopecia especially on Afro-American, post-lifting scars, post radiotherapy alopecia.

References:

- a. Bouhanna P. Androgenetic alopecia: combining medical and surgical treatments. Dermatol Surg, 2003; 29: 1130-1134.
- b. Bouhanna P. Hair research and the newest micrograft techniques. Prime, 2011, 1 (2) ; 44-57.