Alopecia is the medical term for hair loss. Alopecia areata causes a unique form of hair loss different to the more common age-related male and female pattern hair loss.

Alopecia areata is the most common autoimmune disease in humans. It causes partial or complete hair loss on the scalp and body. It can affect males and females and people of all ages including young children. It is believed to affect 2% of the population at some point in their lifetime.

Why have most people never heard about it?

There are two likely reasons. One is that it's embarrassing and distressing. Wherever possible, people try to hide it with clever hairstyles and cosmetic camouflage. The other reason is it often comes and goes, and once gone people would rather forget they ever had it. People only tend to see severe cases where people have lost all their hair. Even then people can mistake the condition for the hair loss seen after chemotherapy.

What is alopecia areata?

Alopecia areata is the medical term for hair loss. Alopecia areata causes a unique form of hair loss different to the more common age-related male and female pattern hair loss.

Alopecia areata can deeply affect self-image, self-esteem and mental health, hence, it is important to manage its emotional impact through support groups. The distress produced by alopecia areata can be severe, especially in people with short hair as this can make it more difficult to conceal the patches of hair loss.

What are the symptoms?

Alopecia areata varies from person to person. It produces circular patches of hair loss that appear suddenly. About 47% of people only ever get one patch. For the other 53% of affected individuals, more patches appear over time and eventually about 10-15% of people affected lose every hair on their body. This includes eyebrows, eyelashes and even nose hairs.

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Half the time, the alopecia patches will have stopped appearing and the hair will have grown back within 12 months. These people will eventually relapse at some stage in the future, either in the same place or on a previously unaffected part of the scalp or body. Sometimes the relapse will be within a year. Sometimes it won’t come until 20 years later.

For the other half who are still getting new patches at 12 months, or whose existing patches have not completely regrown, the alopecia areata will be chronic and likely to require systemic therapy or a wig.

What are the causes?
Alopecia areata occurs when the body’s immune system mistakes hair follicles as foreign and attacks them. This causes the hairs to fall out. This specific form of autoimmunity is a lifelong tendency that can be inherited from either parent.

More than 17 genes have been associated with alopecia areata and scientists expect there are still more genes to be discovered. While your genes are pretty much fixed from birth, alopecia areata tends to come and go, especially in the early stages. This suggests something in our environment triggers individual episodes. No convincing dietary or lifestyle modification has emerged that changes the risk of relapse.

While people regularly blame stress as a trigger, most dermatologists who are experienced in treating patients with alopecia areata think that stress is rarely if ever the cause of alopecia. In fact, it is more plausible that the hair loss causes the stress rather than the other way around.

What is the current treatment?
For 40 years, there has been little progress in its treatment and until recently there had been little prospect of a reliable cure for alopecia areata. Mild cases usually respond to cortisone injections into the bald scalp. Cortisone suppresses inflammation and stops white blood cells from attacking the hair follicles and promotes hair regrowth.

Some patients may respond to cortisone tablets or other anti-inflammatory [steroid sparing] tablets, however about 50% of initial responders will relapse on dose reduction or treatment cessation. Potential side-effects such as weight gain, mood disturbance, diabetes, hypertension and increased risk of infection also need to be considered.

Severe cases, where the scalp is completely bald [called alopecia areata totalis] or where every hair on the body vanishes [called alopecia areata universalis] rarely recover without treatment. These types of hair loss tend to be long lasting or even permanent. Current clinical trials show oral Janus Kinase inhibitors to be effective, well tolerated and safe in patients with severe alopecia areata.

References