SOCIAL IMPACT OF HAIR LOSS IN MEN AND ITS MANAGEMENT

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ABSTRACT

The study aims to evaluate the social impact of hair loss in men and the success of medical and surgical treatments for hair loss. Hair is considered as one of the most important and defining aspect of human appearance. Androgenetic alopecia or male pattern baldness (MPB) is responsible for the vast majority of hair loss in men. MPB sufferers actually inherit hair follicles with a genetic sensitivity to Dihydrotestosterone (DHT). A structured data collection form was designed with open and close ended questions and a retrospective study was conducted on 111 patients, aged between 18 to 65 years from March 28th – May 2nd, 2012. After evaluation of data, it was found that MPB did have a negative effect on social lives of men. They became more depressed, introverted, less confident and in some way their career was affected too. The results showed that success rate of hair transplantation was more than medicines, as people were reluctant to use them. Minoxidil spray was used more than the finasteride tablets. Quality of life of patients was significantly improved. Role of Pharmacists was not very significant. The patients should be made aware of the existence of pharmacists as they can ensure rational use of medicines.

KEY WORDS: Androgenetic alopecia, Quality of life, DHT, Social impact, Pharmacist, MPB.
INTRODUCTION

Hair is known to be the symbolic meanings for many cultures and societies. Hair is symbol of identity, personality, appeal, and kindness. Sometimes hair reflects the social, political and religious beliefs.\(^1\) Male Pattern Baldness (MPB) or androgenetic alopecia is a hereditary characteristic of hair loss.\(^2\) Alopecia can affect both sexes and all age groups.\(^3\) MPB affects half of the adult population (male) and produce discomfort in their lives.\(^4\) Although the knowledge of hair follicle, anatomy of scalp and the dynamics of hair cycle is very important but the histopathology is uncertain about the MPB or androgenic alopecia.\(^5\) Androgenetic alopecia is the thinning of hair in susceptible males.\(^6, 7\) This thinning starts between the age of 12 and 40 years.\(^8, 9\) The people worried about their MPB have four options as to do nothing, use a wig, go for medical treatment or have surgery.\(^10\) Patients with some types of hair loss can be treated by the two drug which are approved as minoxidil and finasteride, which promote hair growth by increasing diameter and length of already present hairs.\(^11\) Interest is developed in the potential role of laser or light based therapy for androgenetic alopecia. There is no scientific data supporting the claims of centers and market claiming high success rate in hair loss treatment by laser or light.\(^12\) The MPB has fewer physical effects but it has major psychological effects like severe depression and anxiety. Limited effectiveness of medical treatment with no proper cure can lead the patient very distressed.\(^13\) Alopecia has negative effect on patient’s daily life and specially affects patient’s self-pride.\(^14\)

Methodology

A structured data collection form was formulated

Inclusion Criteria

Only people who had hair loss problem and those who had received hair transplant were included in the study. Ages between 18-60 years were selected. Only Male patients were included in the study.

Exclusion Criteria

Only patients with male pattern baldness (MPB) were included in the study, other patients with different types of hair fall were not included.
Area of study
This study was conducted at 2 hair transplant centers in Lahore. 1) International Laser and Hair transplant Centre 2) Hair club.

Study design
A retrospective study was conducted on total of 111 patients. Study was conducted from 28th March-2nd May 2012. Information was collected by from their medical files and from the patients as well. A data collection form was designed by using standard methods. Age, socioeconomic background, family history, past medical history was also taken. Social impact on their lives and career was recorded in the form. Data analysis was performed using SPSS version 16.0. Cross tabulation was used in the form of frequencies and Chi-square test. Results are shown in the form of bar graphs and tables.

RESULTS AND DISCUSSION
Baldness doesn’t seem to be a very big problem, but it is leading to psychological and social problems in men of different ages.

In this study, it was seen that Androgenetic alopecia or MPB, was first noticed in ages between 18-25 years. But, some patients did experience hair loss in 15-18 years of age. Hair loss can begin at 12 years of age as well. The next sharp peak of hair loss is seen at 35-40 years of age (Fig.1). 73.9% patients felt that their hair loss was worsening and 24.3% were of the view that it was not worsening (Fig.2) It was seen that the cause of androgenetic alopecia was hereditary, because cases from paternal side were (84.7%) and from maternal side were (9.9%). 65.8% people were found to be under severe amount of stress which can be a cause of hair loss.

Alopecia can make people anxious about their personalities and (55.9%) were very anxious with this problem and (29.7%) were somewhat anxious, (11.7%) were extremely anxious about it. (p- value was found to be 0.067). (Fig.3)

Hair loss can have an adverse impact on relationships with others. 68.5% patients were of the view that their relationship with their family was a little affected and wasn’t bad (p-value 0.557), (94.6%) patients had same relationship with their friends and (55.9%) said that it had made things difficult at times (p-value 0.912). In (88.3%) patients, hair loss had made things difficult for them at their work places or with their co-workers (p-value 0.942). (Fig.4)
Figure 1: Decrease in hair count at different age groups

Figure 2: Age groups when the hair loss sorses

Figure 3: How anxious do you feel when you think about baldness
The results show that most of the people did not use any kind of medication for hair loss. Few men used minoxidil spray and/or Genesis tablets between 18-41 years of age, (p-value obtained 0.426). Hair spray was mostly used by people as it is more convenient, according to the people(Fig.5). Above mentioned medicines were prescribed mostly by the doctors (33.7%), by pharmacists (2.7%), and 7.2% patients were on self-medication; (1.8%) people learned about these medicines through internet (p-value obtained was 0.47) and the rest of them did not use any kind of medicines for alopecia (Fig.6). 55.9% of the patients did lose confidence to face people while 44.1% people did not lose their confidence level(Fig.7).
(94.6%) patients had a little effect on relationship with their friends and (55.9%) said that it had made things difficult at times (p-value 0.912)(Fig.8)

**Fig.9** shows that hair transplant was more useful than medicines.33.3% people were of the view that hair transplant is useful whereas 7.2% people used medicines and found them effective. As, medicines take quite a long time to show their effects people were more inclined towards the hair transplantation surgery.
CONCLUSION

Androgenetic alopecia or male pattern baldness can have significant impact on the social lives of people who are affected by it. They experience different psychological problems such as depression and introversion. Most of the people do take antidepressants for these conditions. Their relations with their families, friends and co-workers can be adversely affected. Hair loss, if not treated, can lead to serious changes in the personality of the affectee. Hair loss can be treated very effectively in 21st Century by the use of medicines and through a better option of Hair transplantation. Results are permanent and very effective. The success rate of hair transplantation was found to be much more than the use of medicines. Medicines are effective when people continue them for a longer period of time and if people use it for a proper duration remaining hair can be saved.
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