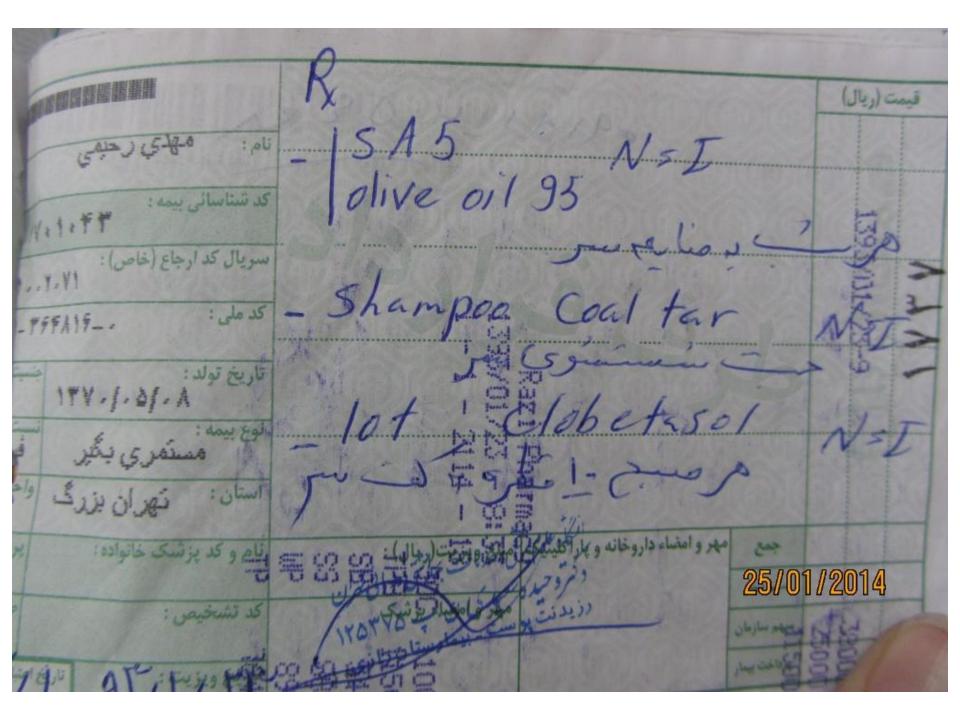
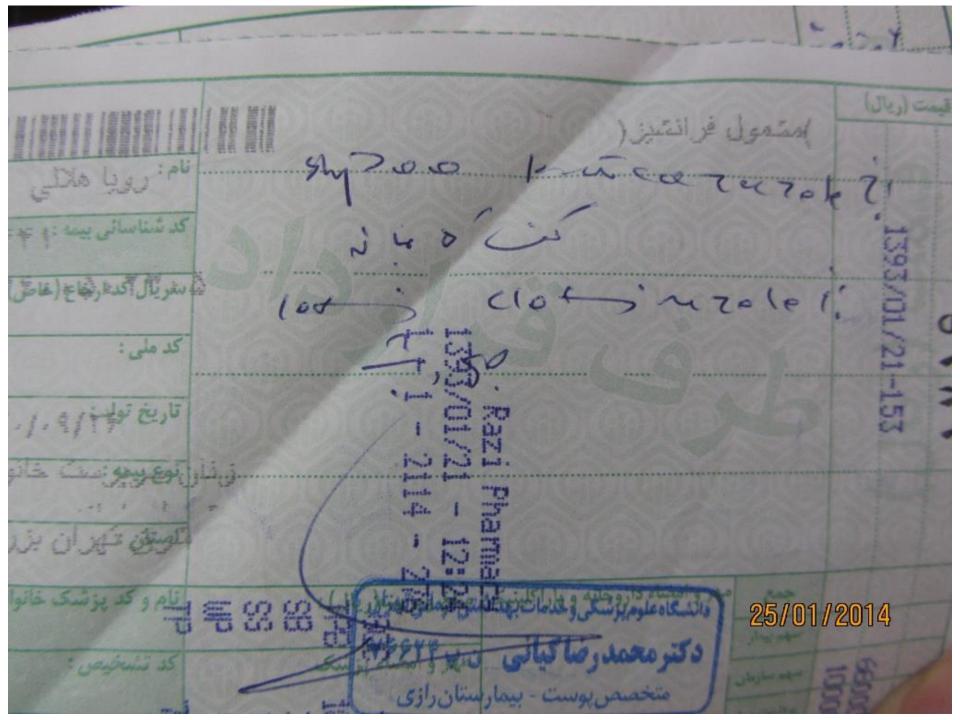
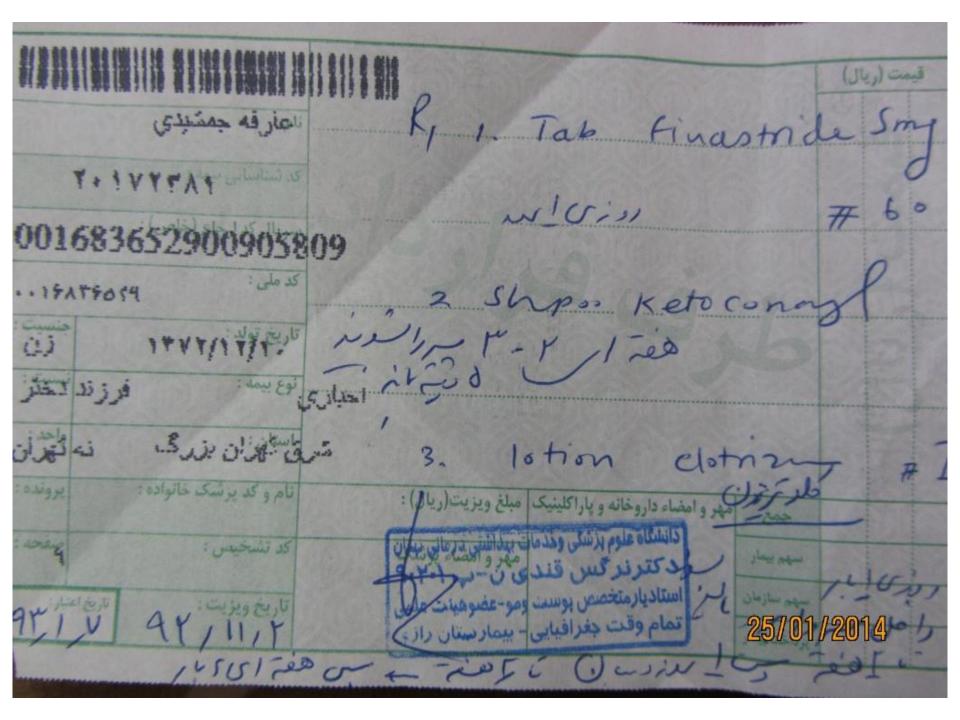
DERMATOLOGIC DISORDERS

H.R Aslani Pharm.D BCPS

- Antisolar. My tinted 15 (22 = 1.5 p) Spl 50 shampoo. ketoconazo! نام: مميه نصيري #1 2 (5 gin = 2, 45 0) me کد شناسانی بیمه: ۲ ۲ ۵ ۲ ۸ ۲ Shampoo. Selenium Subide المريال كم الجاع (خاص): (14 5-- - 2,05 cd Fre #1 کد ملی : 000 - Cream. Urea 101 SAH3N# فوع كيمه : ر وزی ۲۰ ر استانی نیران بزریگ د مان مهر من معالی میداشتی درمانی مهران د کترز هره خدانشنامی سو عنا القال نام و کد پزشک خانواده : 54 203 رزیدنت پوست - بیمارستان رازی كد تشخيص : سهم ييمار 25/01/2014 تاريخ ويزيت : 77,9,75







DANDRUFF

Chronic, <u>noninflammatory</u> scalp condition that result in <u>excessive scaling</u> of the scalp



PATHOPHYSIOLOGY

Hyperproliferative epidermal condition, characterized by an accelerated epidermal cell turnover (twice that of normal scalp) and an irregular keratin pattern, resulting in the shedding of large, nonadherent white scales

- The horny layer of the scalp normally consists of 25 to 35 fully keratinized, closely coherent cells per square millimeter arranged in an orderly fashion
- However, in dandruff, the intact horny layer has fewer than 10 normal cells per square millimeter, and nonkeratinized cells are common

Clinical Presentation

- Dandruff is diffuse rather than patchy and is minimally inflamma-tory
- Scaling, the only visible manifestation of dandruff, is the result of an increased rate of horny substance production on the scalp and the sloughing of large white or gray scales

• **Pruritus**, although not universal in all patients, is **common**.

TREATMENT GOALS

- Reducing the epidermal turnover
- Minimizing the cosmetic embarrassment of visible scaling
- Minimizing itching

Washing the hair and scalp with a generalpurpose nonmedicated shampoo every other day or daily

MEDICATED SHAMPOO

- Contact time is the key to effectiveness
- Massage the shampoo into the scalp with a scalp scrubber for five to ten minutes
- 2-3 times weekly for 2-3 weeks and then once weekly or every other week
- It is scalp not hair , that is being treated therefore
 scalp scrubber

Pyrithione zinc
Selenium sulfide
Coal tar
Salicylic acid
Sulfur

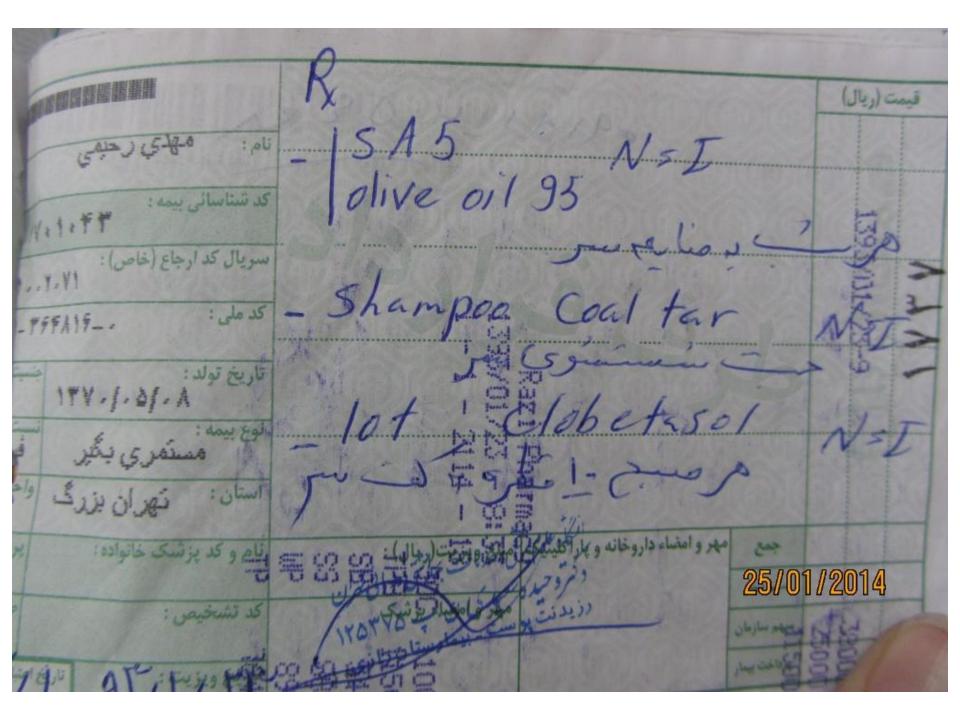
Ketoconazole?

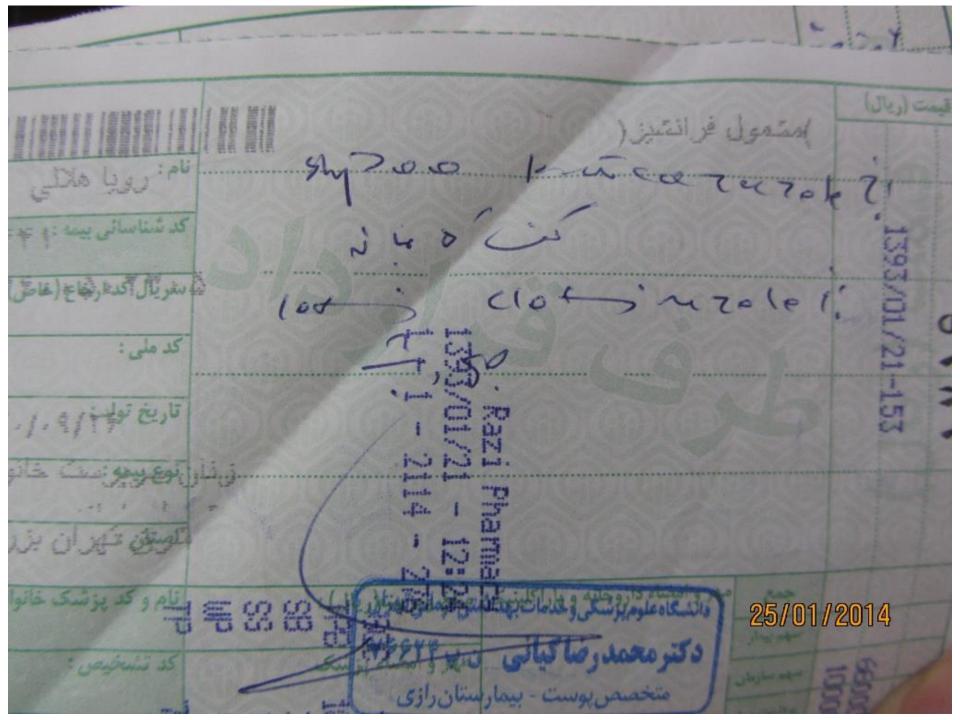
INFLAMMATION AND ITCHING

High potency topical corticosteroid shampoo, lotion, or foam applied once daily for two to four weeks Resistance after <u>4 to 8 weeks</u> <u>Refer</u>

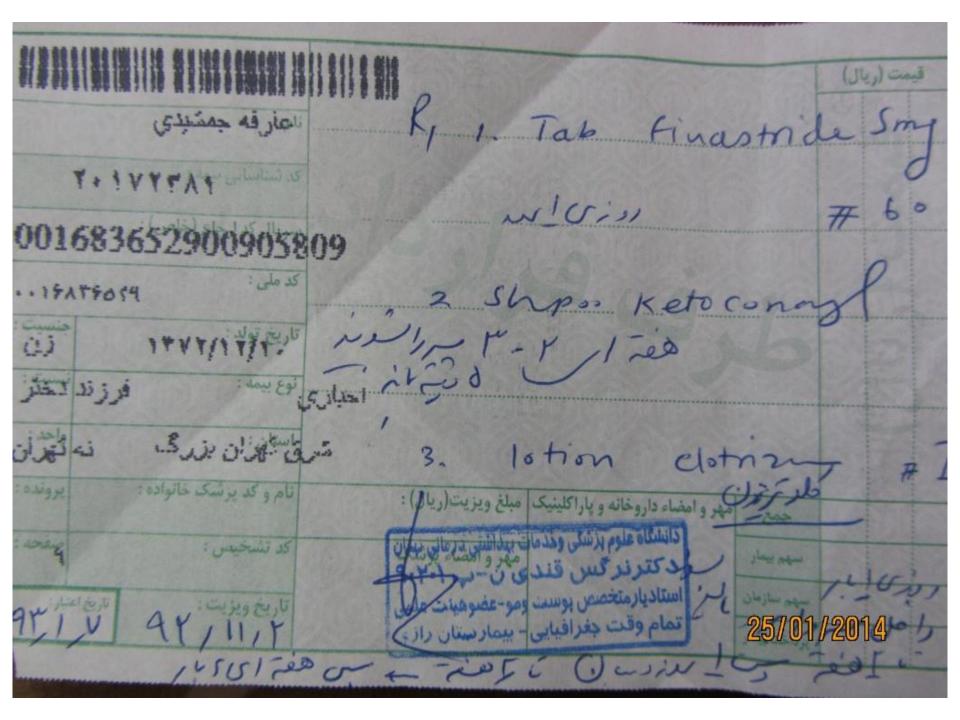
Higher concentration of Selenium sulfide, ketoconazole, or Coal tar

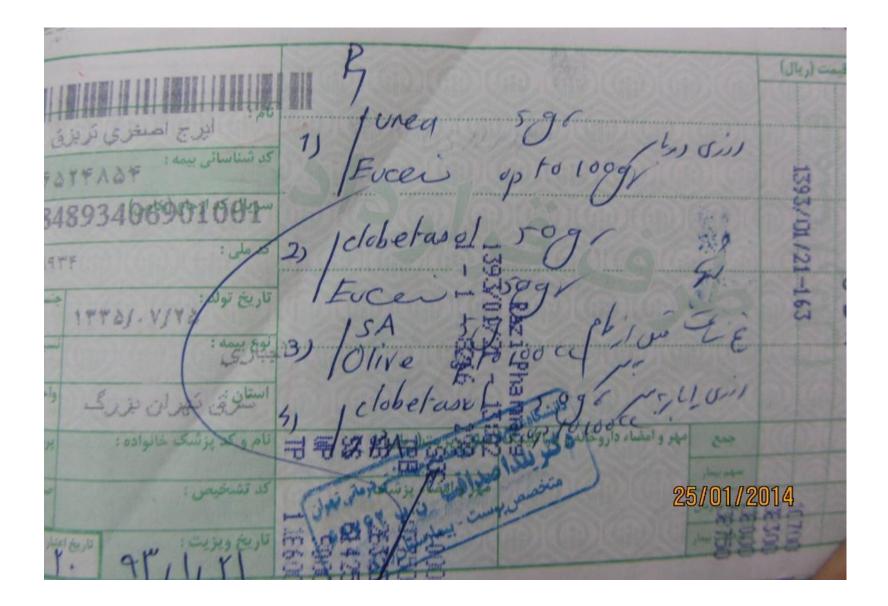
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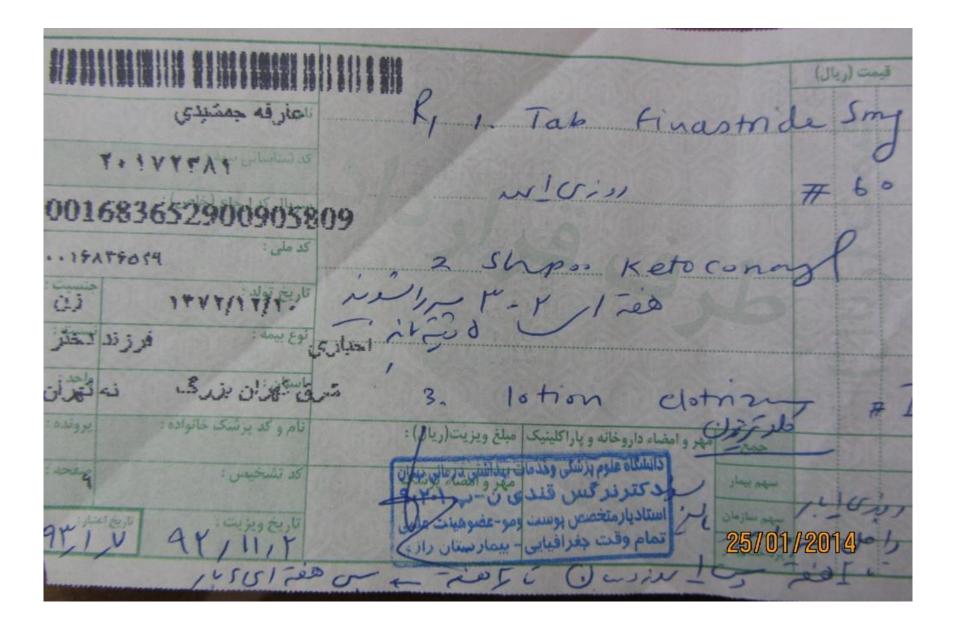


ALOPECIA

H.R Aslani Pharm. D BCPS

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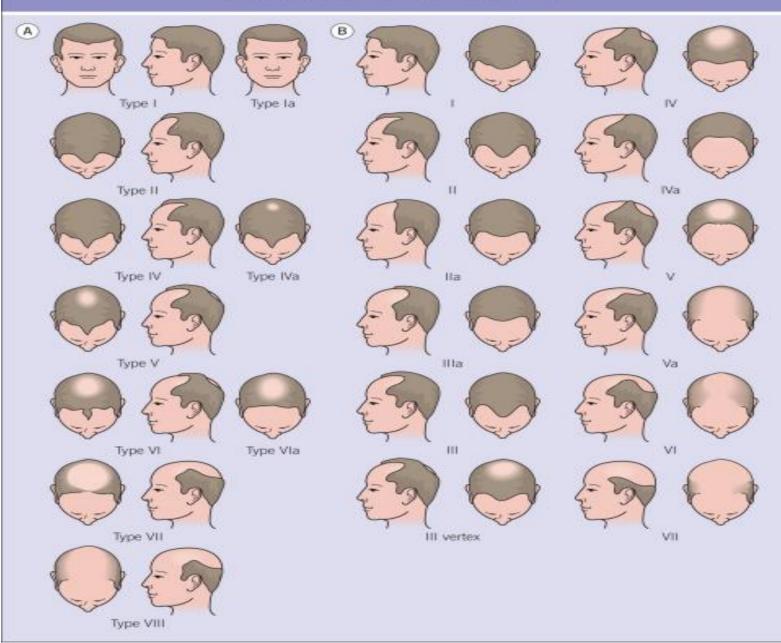
ی سیازمان بیمه خدمات درمانی نیروهای مسلح 1-1 רס אימייי אראראר وظيفه صفحه: تولد: جانبازى: 11-17-اعتبار: تاريخ: ٣٢ / ٢٢ / ٢٩ Dx: C.C: RA 1) Tab Multisitemin N=100 الا معد مل تو 27. Cr Mudapro C N= I vie Chio dentes se protopic N=I+Gra 3) Cr · مادر کل عنا ا مار ور . 4) Tab Finastride Ing N=100 in sectore. I. Salutioniconi Minario di Logito italia I i into the 6) sterial N=I مهر و امضاء تجویز کننده خد day agen



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- Male pattern hair loss is relatively easy to diagnose
- It is symmetric and progressive
- Hamilton classification
- Norwood classification

CLASSIFICATION OF MALE PATTERN BALDNESS



The most common pattern of FPHL is diffuse central thinning of the crown with preservation of the frontal hairline

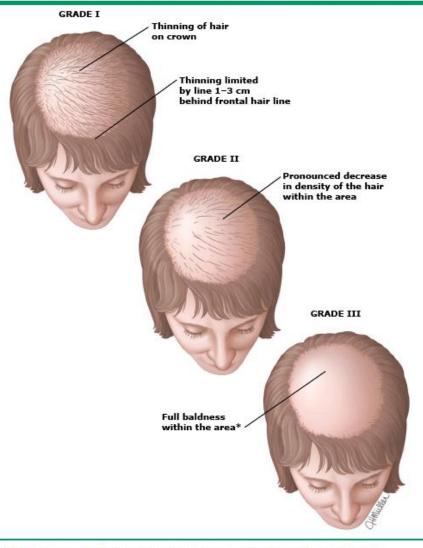
FPHL classification

- The Ludwig Scale
- The Sinclair Scale
- The Savin Scale
- The FPHL Severity Index

LUDWIG GRADE

- Ludwig grade I is associated with minimal widening of the part width
- grade II with moderate thinning
- grade III with significant thinning and widening of the part width

Ludwig scale for female pattern hair loss



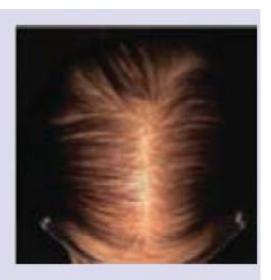
*Mild to marked decreases in hair density are the norm in female pattern hair loss. Female pattern hair loss manifesting with complete loss of hair fibers in the involved area is rare. Source: Ludwig E. Classification of the types of androgenetic alopecia (common baldness) occurring in the female sex. Br J Dermatol 1977; 97:247.



Sinclair scale







Stage 1

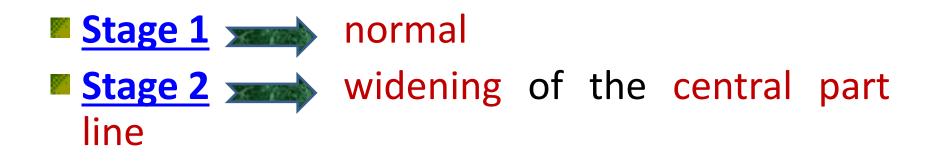


Stage 3









Stage 3 widening of the part line with translucency of the hairs at its border

Stage 4 seeded by development of a bald area anteriorly along the part line



Often there is frontal accentuation of the hair loss, creating a '<u>Christmas tree</u>' pattern

Examination of the central part width can be used to classify severity and it can be compared to the occipital part width



Androgenetic alopecia. Comparison of partline on the crown (A) and the occiput (B).

Women who develop balding in a pattern similar to men can be classified using the Hamilton/Norwood classification system Early-onset or severe patterned hair loss in women should suggest the possibility of pathologic hyperandrogenism, and appropriate screening laboratory tests (total and free testosterone, dehydroepiandrosterone sulfate, and 17-hydroxy-progesterone) should be performed

TREATMENT



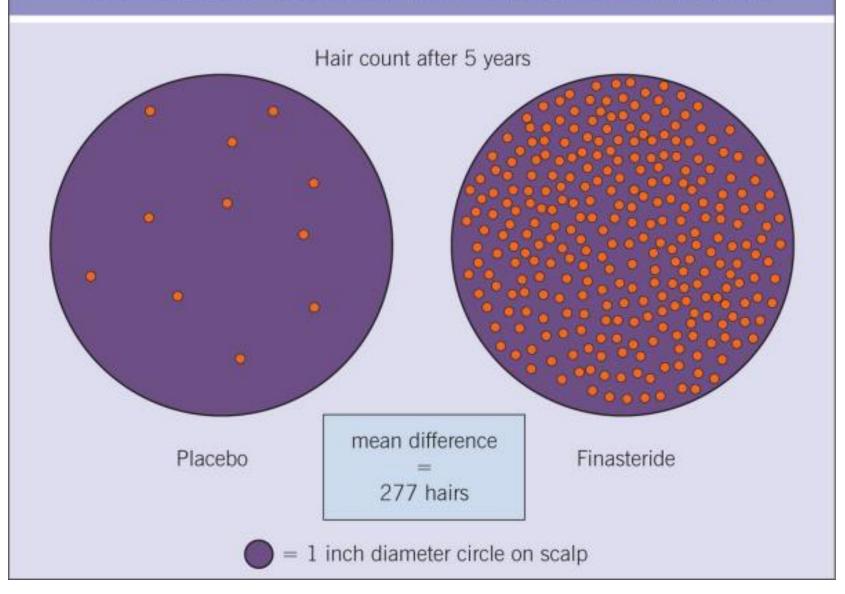
Topical minoxidil and oral finasteride

- Minoxidil is considered to be a biologic response modifier and 1 ml is applied to the affected area twice a day.
- The most frequently reported adverse reactions are mild scalp dryness and irritation, and, rarely, allergic contact dermatitis

Finasteride

 Finasteride therapy stops hair loss in 90% of men for at least 5 years, and hair can regrow in 65% of men

MEDICAL TREATMENT OF ANDROGENETIC ALOPECIA IN MEN – FINASTERIDE VERSUS PLACEBO FIVE-YEAR CLINICAL TRIAL



 Surgical hair replacement, specifically hair transplantation and scalp reduction, are other alternatives for the treatment of male androgenetic alopecia

- In the US, 2% topical minoxidil is approved for the management of FPHL (but 5% minoxidil is oftentimes prescribed)
- FPHL may occur with hyperandrogenemia, and when this is the case such women may benefit from <u>oral contraceptives</u> (to suppress ovarian androgen production), <u>spironolactone</u>, or, if appropriate, <u>finasteride</u> therapy

• Finasteride in women of childbearing age?

 In women of childbearing age, <u>finasteride</u> (and <u>spironolactone</u>) can lead to <u>feminization</u> of a male fetus If oral finasteride or spironolactone is used in women with child-bearing potential, <u>appropriate contraception</u> should be utilized, with oral contraceptives as the rational choice For patients who desire hair restoration surgery, medical therapy can stabilize their hair loss, thus necessitating less donor harvesting and also allowing the patient to maintain a more natural appearance over time • Dose of minoxidil and finasteride?

• How long these medications must continued?

• Finasteride in semen

Thank you