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HAIR DISORDERS

HISTOPATHOLOGY PEARLS FOR FRONTAL FIBROSANT ALOPECIA DIAGNOSIS

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Introduction: Frontal fibrosing alopecia (FFA) is a scarring-type alopecia whose incidence is increasing world-wide. It presents mainly in women > 50 years-old and is characterized by a loss of the frontotemporal hairline. Histological findings in FFA are very similar to lichen planopilaris, but some features could serve as clues for its histopathologic diagnosis.

Objective: To describe the main histopathology features of FFA.

Materials and methods: One to three scalp biopsies were performed in 15 women with a first clinical diagnostic impression of FFA. We present the most relevant histopathologic features described in guided scalp biopsies obtained from such patients.

Results: Fifteen women were included, with ages ranging from with ages ranging from 51 to 64 years (average: 57 years). Main histopathology features of FFA were: 1- Follicular dropout with atrophy or absence of the sebaceous glands and lichenoid lymphohistiocytic infiltrate with concentric layered fibrosis around the isthmus and infundibulum. 2-Histological findings are similar to lichen planopilaris (LPP) but deeper inflammation involving the lower follicular levels, more apoptosis and fewer inflammatory infiltrates are more common in FFA than in LPP. 3- The inflammatory infiltrates simultaneously affect the terminal, intermediate, and vellus hair ("the follicular triad"). 4- Early presentation of FFA has been characterized by preserved follicular architecture, atrophy of the sebaceous glands, and perifollicular lymphohistiocytic infiltrate involving the outer root sheath of the vellus follices.

Conclusions: The histopathologic features described in this work can assist clinicians and dermatopathologists in the evaluation of patients with FFA.





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