



HAIR DISORDERS

PLATELET-RICH PLASMA VERSUS PLATELET-RICH PLASMA WITH MICRONEEDLING IN ANDROGENETIC ALOPECIA ALONG WITH DERMOSCOPIC PRE- AND POST TREATMENT EVALUATION

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Introduction: Platelet-rich plasma (PRP) is a popular procedure for the treatment of androgenetic alopecia (AGA).

Objective: To ascertain the role of minoxidil 5% lotion alone versus minoxidil 5% lotion, platelet-rich plasma (PRP) versus minoxidil 5% lotion, PRP with microneedling in androgenetic alopecia (AGA).

Material and methods: Seventy two AGA patients with Hamilton-Norwood score 1-5 were grouped into three groups A, B and C. Patients in group A (control group) were treated with minoxidil 5% lotion twice daily (n=24), whereas patients in group B underwent treatment with minoxidil 5% lotion twice daily and PRP (n=24), group C patients received minoxidil 5% lotion twice daily, PRP and microneedling (n=24). Baseline and post treatment photographs were taken along with dermoscopic evaluation. Dermoscopy was performed on a fixed area on the scalp (10 cm from the glabella and a fixed area in the right parietal region) using DermLite 4,3 Gen dermoscope. Selection of the dermoscopic variables included in the evaluation process was based on the published literature and dermoscopists' expertise and experience.

Results: Hair pull test was performed before and during follow up. Results: Post treatment, hair pull test was negative in 16 patients ($p < 0.02$) of group C, 12 patients ($p < 0.05$) in group B and 9 patients of group A. Hair growth was better appreciated in group C (19/24) compared to group B (14/24) and A (10/24). The patients' self satisfaction score on a Likert scale was more than 7 (very satisfied) in 19/24 patients in group C. There was a statistically significant difference between 3 groups in terms of the age, hairpull test, terminal vellus hair ratio, patient satisfaction score as determined by one-way ANOVA.

Conclusion: PRP with microneedling is better in comparison to PRP alone or minoxidil monotherapy in patients with AGA.

