

HAIR DISORDERS

A SIGNIFICANT ASSOCIATION BETWEEN FRONTAL FIBROSING ALOPECIA AND FACIAL PROCEDURES

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Introduction: Frontal fibrosing alopecia (FFA), a clinical variant of lichen planopilaris, is characterized by progressive, scarring hair loss of the frontal hairline and eyebrows. The prevalence of FFA is increasing worldwide and it is considered a dermatologic "emergency". FFA's pathogenesis is currently unknown.

Objective: To determine if an association exists between facial procedures and the development of FFA.

Materials and Methods: A cross-sectional study was conducted comparing FFA patients with age and race-matched androgenetic alopecia (AGA) patients at a single, tertiary medical center in Southern California. Information regarding patient demographics, onset of alopecia, concomitant diseases, and previous facial procedures (including but not limited to medically necessary reconstructive surgeries, rhytidectomy, blepharoplasty, browplasty, and head trauma) were collected. Statistical analysis was performed.

Results: Fifty-three FFA patients (51 female, 2 male) were compared to an equal number of age and race-matched AGA controls. 49% of FFA patients reported prior facial procedures which was significantly increased compared to AGA patients (8%). The average time between procedure and onset of alopecia was 8.7 years. No significant difference was found between the FFA and control groups in regards to sunscreen use, progressive neurological disease, pre-cancer treatment, and hair maintenance in a tight ponytail or bun.

Conclusions: These data demonstrate that there is an association between facial procedures and development of FFA. Future directions include collection and analysis of cross-sectional data from multiple academic centers, and cohort studies to determine a causal relationship between facial procedures and FFA.





