Dear Member/Student,

Welcome to the latest World Trichology Society newsletter.

For WTS News, please go to the 'Announcement' page of the website:

https://worldtrichologysociety.org/society/forums/forum/announcements/
Current Trichological and Health News

1. **Black Women With FFA May Present With Earlier Onset Compared With White Women**
   Dermatology Advisor reported, “Black women with frontal fibrosing alopecia (FFA) may present with earlier onset and have more rapidly developing disease compared with white women,” researchers concluded in a “retrospective analysis” that “included white and Black women with FFA who were treated at a university dermatology department from 2007 to 2018, as well as 19 additional Black patients who were treated at a clinical research center from 2010 to 2020.” The findings were published online in a research letter in the British Journal of Dermatology.

2. **Sulfotransferase Enzymes Plus Daily 5% Minoxidil Improves Hair Regrowth, Study Finds**
   Dermatology Advisor reports that adding “sulfotransferase enzymes to daily 5% minoxidil significantly improved hair regrowth compared with daily minoxidil alone in men with androgenetic alopecia, according to a study in the Journal of Cosmetic Dermatology.” Patients in the study “were randomly given either a 30-day supply of 5% topical minoxidil with adjuvant SULT1A1 (n=12) or 5% topical minoxidil with a sham (placebo) control (n=12),” and “approximately 75% of patients in the SULT1A1 adjuvant and minoxidil arm demonstrated a positive increase in hair growth during the 60 days compared with only 33% of patients in the placebo adjuvant group (P =.023).”

3. **OTC hair growth therapies for skin of color**
   In a review published in the Journal of Drugs in Dermatology, the authors examined the evidence behind alternative topical treatments for hair loss in skin of color patients. They found no studies supporting the use of coconut oil or castor oil for hair loss and only animal studies showing some potential for the use of pumpkin seed oil, henna, and aloe vera. Two randomized controlled trials supported the use of rosemary for hair loss while three studies showed that topical capsaicin improved hair regrowth for patients with alopecia areata.
4. **Celiac disease: Related skin conditions**

Authors of a study published in the *International Journal of Dermatology* explored the relationship between celiac disease and various skin diseases, including psoriasis, chronic urticaria, rosacea, and atopic dermatitis (AD). Several studies from recent years have shown an increased prevalence of celiac disease among patients with psoriasis. One case-control study of children demonstrated a significant risk of developing psoriasis later in life and about half of the psoriasis cases could be attributed to underlying celiac disease. A recent systematic review of 64 studies on chronic urticaria and autoimmune disease associations found celiac disease to be the third most commonly associated diagnosis. Additionally, a population study of 12,778 patients with chronic urticaria reported the odds of having celiac disease at nearly 27% compared to controls. The authors note that studies of children specific to AD and celiac disease are lacking. One case series of 351 children with AD demonstrated a nonsignificant 1.4% of patients with comorbid celiac disease. However, a systematic review of autoimmune diseases involving skin and intestinal mucosa demonstrated an increased association with celiac disease, so further study is warranted.

5. **Women With Psoriasis May Experience Greater Response To Systemic Therapies Than Men**

*Dermatology Advisor* reports, “Although women with psoriasis tend to have a higher disease burden than men, they may experience greater response to systemic antipsoriatic therapies than men with the skin disorder, according to study findings published in the *British Journal of Dermatology.*” The study investigators “examined differences between the sexes in regard to treatment response, as defined by the achievement of a 75% or greater reduction in the Psoriasis Area and Severity Index (PASI 75) and PASI 3 or lower at 3, 6, and 12 months.” In an analysis combining nonbiologic and biologic agent therapies, “women had significantly higher PASI responses at 3 months (54.8% vs 47.2%; P ≤.001), 6 months (70.8% vs 63.8%; P ≤.001), and 12 months (72.3% vs 66.1%; P ≤.004).” Most women “also achieved a reduction in DLQI 4 or more by month 3 (61.4% vs 54.8%; P ≤.001), month 6 (69.6% vs 62.4%; P ≤.001), and month 12 (70.7% vs 64.4%; P ≤.002).”
6. **Topical tofacitinib for alopecia areata affecting facial hair**

In an article published in the *British Journal of Dermatology*, 26 patients with eyebrow, eyelash, and/or beard alopecia areata were treated with topical tofacitinib compounded as 2% poloxamer gel twice daily for eyebrow and beard involvement or 0.005% aqueous solution eye drops once daily for eyelashes. No topical or systemic steroids were used during the study. Patients were treated with topical tofacitinib for at least three months and a media of eight months. Complete and partial eyebrow regrowth was noted in eight and four patients, respectively. Of the nine patients with beard involvement, two had complete regrowth and five had partial regrowth. All four patients with eyelash involvement had complete regrowth. Overall, 80% with two facial areas involved had complete regrowth of both areas, whereas the other patients had partial regrowth. Those with partial or limited eyebrow and eyelash alopecia were more likely to have complete regrowth. Of the four patients who had been on stable systemic treatment for scalp alopecia areata (two with eyebrow, two with beard), who had no facial regrowth on systemic therapy, three (75%) had regrowth with topical tofacitinib.

7. **Is there an effective treatment for skin picking disorder?**

In a letter to the editor in *JAAD*, the authors found that there is evidence to support the use of N-acetylcysteine (NAC) for skin picking disorder. In this single-center, retrospective cohort study, 28 patients with a diagnosis of skin picking disorder, acne exorciée, or neurodermatitis were treated with NAC. Overall, 13 patients completed an adequate trial (defined as a minimum dose of 600 mg twice daily for three consecutive months). Of these 13 patients, 61.5% had documented improvement on physical exam. The most common side effect was gastrointestinal upset (7.1%). Just over half of the patients did not complete an adequate trial, with 40% of patients discontinuing treatment due to a lack of response. The authors recommend that responses should not be assessed until follow up at least three months later.
8. **SCALP PSORIASIS: TEN WAYS TO REDUCE HAIR LOSS**  
* (FROM: AMERICAN ACADEMY OF DERMATOLOGY)  
When psoriasis develops on the scalp, hair loss sometimes follows. While hair tends to regrow once the scalp psoriasis clears, there are things you can do right now to prevent further hair loss.

1. **Gently comb and brush away the scale.** To treat scalp psoriasis, you must loosen and remove scale. To prevent hair loss, you should do this gently. Brush gently. Forcefully removing scale often loosens your hair along with the scale.  
2. **Avoid picking off scale.** Picking can aggravate your skin, causing psoriasis to flare.  
3. **Get the treatment on your scalp.** For treatment to be effective, you need to apply the medicine or medicated shampoo to your scalp.  
4. **Keep your fingernails short, and file your fingernails so that the tips are smooth.** Scalp psoriasis can be itchy, making it difficult to avoid scratching your scalp. Short, smooth nails can prevent you from scratching so hard that you loosen your hair or cause your scalp to bleed.  
5. **If you use a medicated shampoo, try alternating shampoos.** To avoid overly drying your scalp and hair, try using a medicated shampoo one day and a non-medicated, gentle shampoo the next time you wash your hair. Dry hair is more likely to break, which can lead to hair loss.  
6. **Use a conditioner after every shampoo.** This can help your scalp feel less dry. Using a non-medicated conditioner can also help reduce the scent of a medicated shampoo.  
7. **Let your hair air dry.** When you have scalp psoriasis, your scalp is extremely dry. Blow drying can dry your scalp even more.  
8. **Test your hair care products.** Hair color, straightening products, and hair sprays can boost self-esteem, but they can also dry your hair and irritate your scalp. Before using a hair-care product, dab a small amount on your scalp and let it stay there a while. If your scalp feels irritated in a few hours, swap that product for something gentler. Be sure to test every product.
9. **If the treatment for your scalp seems too harsh.** Skin on the scalp is thick, so treatment for scalp psoriasis is often stronger than treatment applied to other areas. If your treatment seems too strong, you may switch treatments or change how you use the current one.

10. **Tell your dermatologist [trichologist] if nothing seems to stop your hair loss.** People lose hair for many reasons. Your hair loss could be caused by something other than your scalp psoriasis. A dermatologist [trichologist] can look for the cause of your hair loss.

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**9. Experts Explain How To Stay On Top Of Latest Clinical Research**

In a feature article in *Dermatology World*, experts provide tips on “ways to stay on top of the latest clinical research that make it more manageable and even enjoyable.” The experts interviewed recommend subscribing to certain journals, using “digital education opportunities,” taking advantage of social media platforms, prioritizing “in-person and digital education,” and making time to learn.

**10. Growing Number Of Dermatology Patients Clamoring For Alternative Or “Natural” Approaches To Care**

In a feature article, *Dermatology World* reports, “A growing number of patients who fail to respond to traditional Western medical approaches to their skin conditions are clamoring for alternative or ‘natural’ approaches to health care, including diet and lifestyle modifications, vitamins, herbs, and botanicals, among others,” a demand that “can align with a naturopathic approach to health care, which has placed licensed naturopaths (NDs) on the map in a new way.” The article interviews some “integrative dermatologists and licensed NDs to better understand clinical and evidence-based approaches to naturally based skin care treatments.”
11. Alcohol Could Elevate Risk Of Certain Cancers
The Hill reports, “Alcohol consumption could elevate the risk of getting 11 types of cancer, new research suggests.” The findings were published in Nature Communications. Investigators “found that drinking alcohol ‘is a major risk factor for several cancers, including breast, CRC [colorectal cancer], esophageal, head and neck and liver cancer.’” But, “the study concluded that consuming at least one cup of regular or decaffeinated coffee could protect against liver cancer and skin basal cell carcinoma.”

12. Researchers Identify Skin Darkening Enzyme That Could Help Reduce Skin Cancer Risk
Healio reported that researchers “have discovered a skin pigment mechanism that could be developed into a topical drug aimed at reducing skin cancer risk, according to a study.” The researchers “found the enzyme nicotinamide nucleotide transhydrogenase (NNT), which is in the mitochondria, regulates the amount of melanin being produced and that topical application of NNT small molecules resulted in darkening of human skin.” In addition, they “found that darker pigmented skin was protected from DNA damage from UV radiation.” The findings were published in Cell.

13. Company Starts Phase 3 Trial Of Roflumilast Foam For Treatment Of Scalp, Body Psoriasis
Healio reports, “The first patient has been enrolled in a phase 3 clinical trial of topical roflumilast foam for the treatment of scalp and body psoriasis, Arcutis Biotherapeutics” disclosed in a press release. The treatment, called ARQ-154, “a once-daily formulation of a highly potent and selective phosphodiesterase type 4 inhibitor,” and “is in development for both psoriasis and seborrheic dermatitis.” In the “parallel-group, double-blind, vehicle-controlled pivotal ARRECTOR study,” it will be “compared with vehicle in approximately 420 patients aged 12 years and older with scalp and body psoriasis.”
Journal Articles
For journal publications, click on the URL under the title of the topic you wish to see and it will open to a free abstract of the article. For obtaining the full article, just follow the relevant prompts on the site (a payment may be required for the full article).

1. **Less is more? Failure of one JAK inhibitor does not predict failure of another one in a patient with alopecia areata**
   Danielle Peterson, Mathieu Powell, Brett King

2. **Therapeutic approach with squaric acid dibutylester (SADBE) for steroid resistant-alopecia areata incognita**
   Michela Starace, Roberta Vezzoni, Aurora Alessandrini, et al.

1. **Accuracy of clinical diagnosis and videodermoscopy in female pattern hair loss**
   Gener-Alejandro Mancilla, Rodrigo Restrepo, Gloria Sanclemente

1. **Trichoscopy-assisted hair pull test: A helpful adjunct to trichoscopy for diagnosing and managing alopecias**
   Aikaterini Tsiogka, Martin Laimer, Verena Ahlgrimm-Siess
1. **Basal cell carcinomas of the scalp after radiotherapy for tinea capitis in childhood: A genetic and epigenetic study with comparison with basal cell carcinomas evolving in chronically sun-exposed areas**
José Carlos Cardoso, Ilda Patrícia Ribeiro, Francisco Caramelo, et al.

2. **NLRP3 inflammasome activation contributes to development of alopecia areata in C3H/HeJ mice**
Kei Hashimoto, Yoshihito Yamada, Kota Sekiguchi, Sachi Mori, Tatsumi Matsumoto

3. **Intermediate Filaments Form the Scaffold to Support Hair Curliness**
Franz J Wortmann, Jutta M Quadflieg, Gabriele Wortmann

4. **Processing hair follicles for transmission electron microscopy**
Sailakshmi Velamoor, Allan Mitchell, Mihnea Bostina, Duane Harland

5. **Transduction-induced overexpression of Merkel cell T antigens in human hair follicles induces formation of pathological cell clusters with Merkel cell carcinoma-like phenotype**
Thibault Kervarrec, Jérémy Chéret, Ralf Paus, Roland Houben, et al.

6. **Skin Microbiome Alterations in Seborrheic Dermatitis and Dandruff: A Systematic Review**
Tao Rong, Ruoyu Li, Ruojun Wang

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1. **Contact allergy to benzyl salicylate, gallates, and other allergens and the frontal fibrosing alopecia enigma**
   María A. Pastor-Nieto, María E. Gatica-Ortega, Miguel Torralba

2. **There is no proven association between sensitization to benzyl salicylate and frontal fibrosing alopecia**
   Tuntas Rayinda, Sheila M. McSweeney, John P. McFadden, et al.

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1. **Athena: Speciality Certificate Examination case for Paediatrics and Genetics – A case of brittle hair**
   L. Asfour

2. **Prepubertal Pattern Hair Loss**
   R.M. Trüeb, E. Casañas-Quintana, A. Régnier, N. Caballero-Uribe

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1. **Hair regrowth in cicatricial alopecia: A literature review**
   Anna D. Poliner, Antonella Tosti

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1. **Antioxidant extracts from Dicerocaryum senecioides as active ingredients in semi-permanents and hair conditioners**

2. **Investigation of the interactions of cationic guar with human hair by electrokinetic analysis**
   Roger L. McMullen, Donna Laura, Guojin Zhang, Bert Kroon

3. **Artificial Intelligence in hair research: A proof-of-concept study on evaluating hair assembly features**
   Gabriela Daniels, Slobodanka Tamburic, Sergio Benini, et al.

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1. **Cannabinoids for skin diseases and hair regrowth**
   Aditya K. Gupta MD, PhD, Mesbah Talukder PhD

2. **Urban-rural differences in the prevalence of female pattern hair loss among secondary school girls: A cross-sectional study**
   Samaa M. E. Youssef MD, Rabie B. Atallah MD, et al.

3. **Protection of hair from damage induced by ultraviolet irradiation using tea (Camellia sinensis) extracts**
   Stephanie L. Davis BSc, Jennifer M. Marsh PhD, et al.
1. **Fluorescence-Advanced Videodermoscopy (FAV) – a new method of hairs and scalp evaluation. Comparison with trichoscopy**
   A Rossi, F Magri, G Caro, S Michelini, M Di Fraia, et al.

2. **Comment on: Folliculitis decalvans and lichen planopilaris phenotypic spectrum: case report of two pediatric cases**
   Ralph Michel Trüeb

3. **Exploring the association between lichen planopilaris, cardiovascular and metabolic disorders**
   R.R.Z. Conic, J. Maghfour, G. Damiani, W. Bergfeld

   F. Lacarrubba

5. **Isolated autosomal recessive woolly hair/hypotrichosis: genetics, pathogenesis and therapies**
   M. Akiyama
1. **Regulation of mitochondrial dynamics in skin: role in pathophysiology**
   Divya Gupta MSc, Tasduq S. Abdullah PhD

2. **Acetic acid and the skin: a review of vinegar in dermatology**
   Kareem G. Elhage BS, Kayla St. Claire MD, MBA, Steven Daveluy MD

3. **Post-chemotherapy alopecia: what the dermatologist needs to know**
   Thuany Silva Santos MD, Kely Hernandéz Galvis MD, et al.

4. **Continuous clinical improvement of mild-to-moderate seborrheic dermatitis and rebalancing of the scalp microbiome using a selenium disulfide–based shampoo after an initial treatment with ketoconazole**
   Philippe Massiot PhD, Cécile Clavaud PhD, Marie Thomas MSc, et al.

1. **Alemtuzumab-induced Alopecia areata – a case report and systematic literature review of adverse events associated with Alemtuzumab**
   Elsa Dikeoulia, Matthias Neufeld, Marc Pawlitzki, Markus Böhm
1. **Hair at the intersection of dermatology and anthropology: A conversation on race and relationships**  
   Nora L. Jones PhD, Candrice R. Heath MD  

2. **Short anagen syndrome: A case series and algorithm for diagnosis**  
   Michela Starace MD, PhD, Carlotta Gurioli MD, et al.  

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1. **Guidelines for clinical trials of frontal fibrosing alopecia: consensus recommendations from the International FFA Cooperative Group (IFFACG)**  

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1. **Health-Related Quality of Life, Depression, and Self-esteem in Patients With Androgenetic Alopecia: A Systematic Review and Meta-analysis**  
   Chun-Hsien Huang, MD; Yun Fu, MD; Ching-Chi Chi, MD, MMS, DPhil  
   https://jamanetwork.com/journals/jamadermatology/fullarticle/2781706?
1. Development of drug-induced psoriasiform alopecia in a pediatric patient on ustekinumab
Maria Mihailescu BS, Thomas Cibull, Joel Joyce

**QUESTION FOR CTE® CREDIT (FOR FULL MEMBERS ONLY): PLEASE EMAIL ANSWER TO:**
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In Olsen et al.'s research article regarding "Guidelines for clinical trials of frontal fibrosing alopecia", which standardized diagnostic criteria for FFA were created?