Review of the Literature

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Hair pathology book is a must-have
Sperling, L.C., S.E. Cowper, E.A. Knopp. An Atlas of Hair Pathology with Clinical Correlations, 2nd Edition. Informa Healthcare: New York, NY, 2012. ISBN-13: 978-1-84184-733-7. e-ISBN: 978-1-84184-734-4.

A great, easy to read book on hair pathology is a must-have reference item for any physician who sees and treats patients with hair loss. Most pathology textbooks on this subject are difficult and cumbersome to read and lack clinical correlations to what we see in practice.

This is exactly what this book delivers.

Besides being a very comprehensive guide to hair pathology, it includes a few chapters that I find particularly interesting: Chapter 2 describes how to best acquire a biopsy specimen for the pathologist to examine, as well as how trichopathologists should handle, stain, and analyze the specimens submitted; Chapter 3 gives a detailed description of the normal hair anatomy and structure; Chapter 6 describes key histological features and their correlation with hair diseases, offering a simple, 4-step method to help in diagnosing hair pathology from a clinical standpoint; Chapter 7 is a clinical guide to evaluating hair loss; Chapter 36 offers an overview on Hair Shaft Disorders, which is very important for our clinical practice.

The remaining chapters deal with all other hair pathologies, always correlating the pathology findings with clinical aspects.

The entire book is extremely rich with high resolution pictures and explanations, and I have used it often to refresh my knowledge and to consult.

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Hair loss linked with heart disease
Su, L.H., et al. Association of androgenetic alopecia with mortality from diabetes mellitus and heart disease. JAMA Dermatol. 2013; 149:601-606.

A recent publication in the Archives of Dermatology suggested an important connection between hair loss and cardiovascular disease. A total of 7,252 subjects aged 30 to 95 years participated in a baseline survey between April and June 2005. Over the next five years, they were followed for their incidence of mortality related to diabetes and heart disease. Among the 2,429 men and 4,697 women, subjects with male or female pattern hair loss had a significantly higher risk of mortality from diabetes and heart disease.

Comment: The results of this study suggest that male and female pattern hair loss is an independent predictor of mortality from diabetes and heart disease. So for those of you treating hair loss patients, remind them to stay up-to-date on their well visits! Make sure their primary doctor is checking their cholesterol, glucose levels, and blood pressure.

No link between finasteride/dutasteride and breast cancer in men
Bird, S.T., et al. Male breast cancer and 5-alpha reductase inhibitors, finasteride and dutasteride. Accepted for publication in the Journal of Urology. 9 May 2013 (Epub ahead of print).

New data from a large case-controlled study of men with breast cancer followed over 10 years showed no increase in the rates of breast cancer in those taking finasteride or dutasteride.

Study participants were men aged 40-85 years, followed between 2001 and 2011. Research coordinators identified 339 men with breast cancer and matched them with 6,780 controls (20 controls per case). They assessed the rate ratio for male breast cancer with exposure to 5-alpha reductase using conditional logistic regression. No statistically significant associations were observed between 5-alpha reductase inhibitors and breast cancer.

The authors conclude that the lack of an association in their study suggests breast cancer development should not influence prescribing finasteride or dutasteride.

Comment: Finasteride and dutasteride have long been used to treat benign prostatic hypertrophy (BPH), and in 1997 finasteride was FDA approved for male pattern hair loss. Dutasteride remains off-label for treatment of hair loss; however, there were some rare reports of male breast cancer in the post-marketing data. This led physicians to some increased concern prescribing the drug for women. Although this data is limited to men, it can make us somewhat more comfortable prescribing finasteride in women. Nonetheless, every woman should stay up-to-date on her mammograms as indicated by her primary physician or gynecologist.