

Clinical Image

Therapeutic Intervention in Alopecia Areata in Male patient: a non-pharmacological approach using BLEND of essential oils

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Figure 1: Patient with alopecia aerata treated with essential oil BLEND. A. Regions of alopecia on the scalp before treatment with BLEND of essential oils. B. Regions of alopecia on the scalp after treatment with BLEND of essential oils.

Androgenetic alopecia (AA), a prevalent form of hair loss affecting both men and women, poses significant challenges in treatment due to the limited options available that do not carry side effects. The condition is primarily driven by the effects of dihydrotestosterone on hair follicles, leading to their miniaturization and the shortening of the hair growth cycle. While conventional treatments like minoxidil and finasteride are FDA-approved and remain the mainstay for managing AA, their efficacy is accompanied by concerns over side effects and patient compliance, emphasizing the need for alternative therapeutic strategies with fewer adverse effects [1-2]. A study of Panahi et al. [3] compared the efficacy of rosemary oil to minoxidil 2% in treating androgenetic alopecia. Over 6 months, both treatments significantly increased hair count without notable differences between them, suggesting rosemary oil could be an effective alternative to minoxidil with potentially fewer side effects. However, we did not identify a study that addresses hair recovery in a patient with AA with the exclusive use of essential oils.

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This case report discusses an alternative treatment approach using a blend of essential oils, highlighting its effectiveness in hair regrowth and scalp health improvement without adverse effects. Here, we present a clinical case of a 26-year-old male patient, presenting severe hair loss and diagnosed with male AA (Figure 1A). Diagnosis was confirmed through dermatoscopic examination and laboratory tests, which ruled out other causes of hair loss. Patient reports that there are no similar cases in the family. Patient decides for natural treatment, due to possible side effects. The patient does not wish to use medications and decides to opt for treatment with natural and non-pharmacological approaches. The patient underwent a six-week treatment regimen, including scalp hygiene with natural cosmetics, electrotherapy, microneedling, and topical application of a specific blend of essential oils. The blend was applied at home three times a week at a 25% concentration.

The therapeutic intervention types for the patient experiencing hair loss were non-pharmacological, excluding medications in favor of a natural approach using BLEND (Rosemary, Lavender, Pepper mint, Cedar and Juniper Berry) of essential oils topically and aromatically in hair therapy rituals. The therapeutic intervention administration was on a weekly basis, incorporating a hygiene routine with the most natural cosmetic kit available, electrotherapy sessions, microneedling, and an essential oil BLEND. Over six consecutive weeks in the clinic, the patient underwent a regimen of 10 minutes of high-frequency therapy, 5 minutes of vacuum therapy, ozonized steam cleansing, and post-microneedling application of an essential oil blend every 20 days using 0.5mm or 0.25mm needles. The BLEND was also applied by the patient at home in the affected area before sleep, three times a week, at a 25% concentration. The treatment resulted in noticeable hair regrowth and scalp health improvement (Figure 1B), with the patient expressing high satisfaction and improved quality of life. No adverse effects were reported.

This case underscores the potential of essential oils in treating male AA, offering a safe, natural alternative to traditional pharmacological methods. It suggests that essential oils can modulate hormonal activity and reduce inflammation, facilitating hair regrowth and scalp health. The successful management of androgenetic alopecia with an essential oil BLEND highlights the importance of exploring alternative, natural therapeutic options. This case contributes to the growing body of evidence supporting the efficacy of essential oils in dermatological conditions, encouraging further research and clinical trials.

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Supplementary Materials: None.

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