

An elderly woman with a receding hairline

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An elderly woman presents with progressive recession of the frontal hairline. What is this condition?

A 71-year-old woman gave an 18-month history of progressive recession of the frontal hairline associated with loss of her eyebrows (Figure 1). The process had commenced suddenly and was asymptomatic. Close examination of the scalp margin revealed loss of follicular orifices and a smooth pale skin. The anterior hairline had follicles associated with perifollicular erythema and slight scaling at their openings. Scalp biopsy showed a decreased number of hair follicles. There was prominent perifollicular fibrosis and lymphocytic inflammation targeting several remaining follicles (Figure 2).

Differential diagnosis

Recession of the frontal hairline can be seen in a variety of conditions.

- **Androgenic alopecia** may be associated with bitemporal recession and usually spares the mid frontal margin in women. The process has an earlier age of onset than in this case, is gradual, and is not associated with loss of follicular orifices or eyebrows. Scalp biopsy shows miniaturised follicles.
- **Traction alopecia**, particularly due to hairstyling that induces tension on frontal hairs (ask the patient about

this), may result in progressive loss of follicles and alopecia. Usually the process is accentuated in the temple areas, hair density is reduced but not completely obliterated, and broken hairs are apparent. Scalp biopsy may show areas of fibrosis and loss of follicles, rather than inflammation.

- **Alopecia areata** (ophiasis, marginal variant) may rarely be localised to the frontal margin and usually involves the temples or occipital area. The follicular orifices are preserved, dystrophic hairs may remain, and there is no perifollicular erythema or scarring. Scalp biopsy shows peribulbar lymphocytic inflammation that spares the upper canal of the follicles.
- **Frontal fibrosing alopecia** is the correct diagnosis. It has been recognised recently as a distinct variant of follicular lichen planus (lichen planopilaris).

The majority of women with frontal fibrosing alopecia have been postmenopausal, but the condition is not influenced by hormone replacement therapy. Scalp biopsy shows features identical to that seen with lichen planopilaris. Lichen planopilaris usually presents as multifocal areas of scarring alopecia over the central scalp. The pathogenesis of this condition remains unclear, but it appears to be related to sex, age and site.

Treatment

Treatment of frontal fibrosing alopecia has been unsatisfactory because the hair loss is irreversible. In the early phase of progression, oral corticosteroids and antimalarials have been used, but it is doubtful whether the ultimate course of this condition is altered. The hair loss stabilises and the majority of women have been able to mask the loss by hair styling.

Keypoint

Frontal fibrosing alopecia is a distinct pattern of hair loss that is seen in elderly women.



Figure 1. Hair loss over the elderly woman's frontal scalp, with loss of eyebrows.

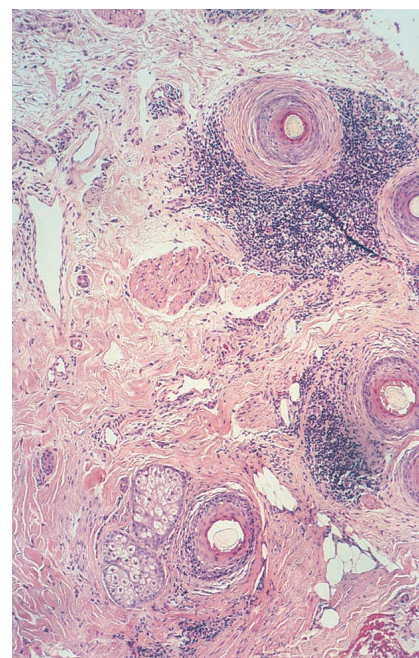


Figure 2. Scalp biopsy demonstrating a decreased number of follicles, with prominent perifollicular fibrosis and lymphocytes surrounding the remaining follicles.

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