

## HAIR REPLACEMENT

This is to bring you up to date on exciting new procedures in hair replacement surgery. At a recent hair replacement conference I attended in Dallas, the attention was focused on the extensive hair loss patient. As you can see the photograph on the next page depicts a very remarkable transformation on a young gentlemen who began with an advanced hair loss pattern. He is now enjoying a full head of his own living hair. Patients who suffer from this level of hair loss must undergo a series of treatments with mini- and micrografting and frontal hair softening with invisigrfts. The feather zone type approach places small grafts into the frontal hairline and moderate size grafts in the middle zone. Two to three procedures add near total coverage. These procedures need to be spaced out over a period of four to six months.

We are now able to offer patients an even larger transplant session, up to 1000 grafts. Our average number of grafts per sessions, at the present time, ranges from 350 to 700. Our recommended treatments would be approximately two to three graft sessions.

After 16 years of surgical hair replacement experience and hundreds of transplants performed each year with a near 100% success rate, I feel certain we can provide an optimum result for anyone seeking hair replacement or refinement of previous surgical procedures.

Using the operating microscope and performing a micro-follicular hair dissection technique for graft harvesting, the patient is assured of the maximum number of hairs translocated per square millimeter in the recipient bed.

The consultation fee is applied to the cost of any procedure. We now offer a transplant procedure of over 1000 grafts! Using strand by strand hair replacement and the most innovative hair replacement techniques including micro-, mini- and invisigrfts, one may enjoy a full head of his own living hair within a few months after surgery.

Prior to your surgery, discussions will be performed with photographs of the patient and a fill discussion of medications. It is very important to refrain from taking aspirin or aspirin-like products including ginkgo bulloba, Advil or any form of non-steroidal anti-inflammatory, monosodium glutamate, alcohol and any form of St. John's Wart for approximately three weeks prior to the surgery. This is to ensure the maximum result of graft translocation and minimal amount of bleeding at the time of surgery.

The procedure is performed under local anesthetic with sedation in the office setting. It is safe and patients are very comfortable during the operation.

### **Hair Replacement Q&A**

#### **Are the hair transplant follicles detectable?**

Using the micrograft techniques and invisigrfts, the frontal hairline is nearly undetectable.

#### **Is this hair permanent?**

The hair on the back of the scalp is not genetically programmed to fall out and when translocated to the frontal hairline, it also carries the same genetic predisposition which is to continue to grow despite the fact the previous hair in this region has fallen out. The reason hair in the frontal portion of the scalp on men who have male pattern

baldness is lost is due to a genetic predisposition to incorporate an active metabolite of testosterone, dihydrotestosterone choking off the bulb at the base of the hair follicle thereby depleting its blood supply and causing it to fall out.

**Are there any drugs that will help without having to undergo surgery?**

There are new drugs on the market, primarily Propecia at this time, which helps to reduce hair loss in the frontal hairline and actually will grow approximately 50-60% of new hair in the crown and vertex region of the scalp. In the frontal hairline area, there is a much lower percentage of new hair growth but some has been reported up to even a three year follow-up. We recommend taking Propecia before, during and after the surgical procedure, not only to strengthen the hair that is present but to preserve the hair and promote the health of the new graft.