Top treatments Find the smartest option for you The root causes Why anyone could lose their hair Expert advice Your hair loss questions answered



No. 1 / January 2010



Amazing real life The touching story of the kids wig charity



Losing your hair? How to cope and who you can turn to



PHOTO: SHAUN LOMBARD

Say bye bye to baldness...

San our special on pages 10, 11, 12 and 13. London T +44 20 7224 2630 / www.hasci.com hair science institute

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CHALLENGES

Major advances in hair-loss surgery are great news for many anxious sufferers, but beware the many charlatans out there preying on the gullible few.

www.hairbe

th a Google hitrate of 251,000,000, the value of hair is clear. And this ancient pre-occupation is even greater now that increasing longevity has fuelled a desire to extend youthfulness.

Hair accounts for much of our individuality and is one of few attributes we can modify significantly.

Why is happens

Given hair's major role in social and sexual communication, it's no surprise that hair loss can cause psychological trauma.

In this supplement, we look at the most common kinds, including male pattern-baldness, telogen effluvium and alopecia areata - the most widespread pathologic form. Chemotherapy can also induce alopecia.

Finding effective therapies is difficult. Only two medicines are ap-



VP of the Institute of Trichologists

proved for male pattern-baldness (finasteride and minoxidil) and for many patients cosmetic results are far from perfect. For others, slowing down, or stopping, hair loss can be a major benefit.

For most people, surgical hair restoration is still the only way to achieve cosmetically acceptable hair re-growth.

Fortunately, it has become more refined in recent years and provides excellent results when there is enough donor hair.

There is exciting research in this fast-moving area and we can expect breakthroughs soon. Work on prostaglandin analogs, for example, indicates they could stimulate growth. And there is also research on tissue engineering with bioactives, including "hair follicle regeneration" and "hair cloning".

What the future holds

For now, efficiency is low and hair research remains the Cinderella of dermatology sub-specialties, something we are trying to put right at the Centre for Skin Science, University of Bradford, where we examine how a range of factors, including hormones, genetics, age and ethnicity, affect hair.

The general public should proceed with caution when looking for treatment.

The business end is awash with charlatans and the internet is fertile ground for dodgy sites.

Excellent resources remain a knowledgeable dermatologist and the Institute of Trichologists.





options Find the right approach to dealing with your hair loss

"Do your homework. Get recommendations, look at testimonials, speak to patients."



We make our readers succeed HAIR LOSS, 1ST EDITION.

JANUARY 2010

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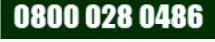
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WHITE CLIFFS HAIR CLINIC

Say bye bye to baldness.

HAIR LOSS OR EVEN BALDNESS: for hundreds of thousands of people it is a nightmare. But now there is good news: after years of research, the Dutch doctor and researcher Coen Gho developed Hair-Stemcell Transplantation[®] (HST), at the Hair Science Institute.



The investion, Coole Gillo MD Hitler years of research, the medical doctor and researcher Coler Ohio developed Harbertoel framplantation? at the Harl Science Institute Claim Ohio engosis Hernational factors resulting from Science Institute Claim Ohio engosis Hernation rail ferve in the field of harl and scielu diseases and the treatment of science resulting from Science, Today Nothinicas simply rectambute the hart. They don't give you more hail with HST your over hairs produce new faces This is that regrisesh with a Herne guarantee further more tractional techniques result in Eng science in the idonion area

where the hairs are removed, and the result is providentiative. Price treatments are also very partial HDT is a very precise subtrianed allocate partners technique Another great advertage is the presenance of her greath in the donor area. Encourse entropie no hair folicies, just seen calls, the hairs in the donor area will simply regros, without any score. These hairs, are therefore not removed, trends of donor, HDT is the provident present times. If soo or more testiments are required in addition, HDT is the private provident to be donor or more testiments are required in addition. HDT is the private testing a substrate for the testiments are required in board?



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MEDIA

INSPIRATION

Question: Are any myths about baldness true? Or is it just part of the ageing process?

Answer: Nearly all male hair loss is caused by one genetic condition, but women's hair loss is far more complex.



Learn what triggers hair loss

CHANGE

There are many common myths about hair loss. Balding men become paranoid that their hats are choking off the blood circulation to the scalp, or that long hair is straining their roots, or that shampooing is accelerating the process. They may even blame their mother's male ancestors

But the reality is that around 95 per cent of men's hair loss is standard "male pattern baldness", or to give it a more academic name, androgenetic alopecia.

Most men don't even notice their hair falling out. But they all experience at least a gradual thinning even if they don't go totally bald. About a quarter of men begin balding by the age of 30; two thirds begin balding by the age of 60.

"It pretty much affects all men at some stage of life, although there is a percentage prone to early expression in the late teens and early twenties," said Professor Des Tobin, the Director of the Centre of Skin Sciences at the University of Bradford. "It depends on inheritance and so-called male hormones, or androgens. Having the genetic predisposition alone without the male hormone won't produce baldness. If you were to castrate a man who has the genes for

baldness before puberty, he wouldn't become bald. But if you gave him back the hormones, he would become bald."

Male pattern baldness is instantly recognisable. "Males get the classic receding hairline and thinning on the crown, then the gradual merging of the two," said Professor Tobin. "The scalp is never completely denuded, however. You don't lose the follicles, but they produce cosmetically invisible hair. Females can get female hair loss, which is often post-menopausal, possibly due to their decreasing oestrogen levels. But women do retain a subtle hairline and get more diffuse thinning than men, which is easier to disguise."

Alopecia areata, often known as spot baldness, arises more often in women, but also affects some men. It produces small, soft bald patches, which can then spread to the entire scalp - including the eyebrows and eyelashes - when it becomes known as alopecia totalis, and sometimes to the entire body, when it is called alopecia universalis. In 90 per cent of cases, the hair grows back eventually.

"Alopecia ariata is an immune dysfunction which is equally common in all ethnicities, whereas male pattern baldness is more common in Caucasians than Africans, or Asians," said Professor Tobin.

Other common triggers of hair loss in both sexes include severe malnutri-

tion and taking medici-

nal drugs, including the ones used n chemotherapy and to control blood pressure. There are also rare, genetic causes of hair loss in both genders. "There is one, for example, where the hair fibre is defective and the hair is brittle. Genetic disorders tend to occur where there is lots of inbreeding between cousins, such as in certain parts of Pakistan where cousin-cousin marriages are common, or among some groups of Ashkenazi Jews. These conditions are



"Hair production requires good iron stores but many don't eat red meat.'

Dr Richard Rogers Hair transplant surgeon

rare in out-bred populations with a richer gene pool," Professor Tobin said.

Women's hair loss tends to be more complex, and there are a number of causes specific to them. A lack of iron in the diet can trigger it, whereas men's hair loss is rarely a consequence of poor diet.

"Hair production requires good iron stores and women lose blood every month, which obviously contains a lot of iron. As a result, they need constant renewal of their iron stores, but many women don't eat much red meat," said Dr Richard Rogers, a hair transplant surgeon.

The contraceptive pill can help or hinder women's hair growth. Some women lose hair; others develop thicker, glossier hair. Hormonal problems, such as polycystic ovary syndrome, can trigger diffuse shedding of hair.

Women who give birth may also experience severe hair loss."A few months after delivering some women can have an intense hair-shedding episode. This is to do with the way hair growth is synchronised during pregnancy.

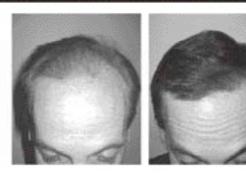
"Normally, hair follicles do not grow in a synchronised way. Follicles do their own thing. But, under the of strong pregnancy hormones, they fall into line and go through the cycle of growth in tandem. By the time pregnancy is over, oestrogen levels drop and hormone levels change again, causing the hair follicles to become unsynchronised again all at the same time. This means they are all at the shedding level in tandem, so they are all ready to fall out together. Instead of losing the average of 100-200 hairs a day, women can lose a lot more," said Professor Tobin.

Illness, crash diets, and psychological stress also cause hair loss, especially in women. "There is some evidence that if the hair follicles get stressed, they skip one of the three progressions in their life cycle, which can trigger loss," said Professor Tobin.

> DAVID SMITH info.uk@mediaplanet.com









IT CAN BE RESTORED!

JANUARY 2010 • 5



Normal loss is 100 hairs a day, from around 100,000 hair follicles. Hairs grow 1cm a month

Hair growth has three stages: The Anagen growing stage for 2-5 years; the Caragen: when the bulb detaches from the blood supply and the shaft is pushed up; and the Telogen: a five-month resting stage, after which the hair is shed and the follicle grows a new one The Institute of Trichologists says there are about 50 causes. The main ones are androgenic alopecia and alopecia areata - an autoimmune disease causing nearinstant loss

Male pattern baldness (androgenic alopecia) is caused by a genetic sensitivity of hair follicles to dihydrotestosterone (DHT). It causes them to shrink

Mid-frontal hair loss affects 57 per cent of women and 73.5 per cent of men aged 80 and over. About 25 per cent of men begin balding by age 30; two thirds begin balding by age 60

Numbers seeking treatment rose worldwide from 361,077, in 2004 to 811,363, in 2008

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on the web: www.ehrs.ora www.nhs.uk/Conditions/Hair-loss



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PLANET

INSPIRATION



Dark days inspire hairraising charity work

Question: How can we tackle the emotional pain of hairloss?

Answer: While traumatic, there is always inspiration to be found, says Pete Murtha

HOW I MADE IT

Pete Murtha has much in common with George Bailey, the character played by James Stewart in the classic Hollywood film It's A Wonderful Life. Both Bailey and Murtha felt such despair that they contemplated suicide, before finding meaning in their lives.

Bailey was convinced to go on living when an angel showed him how many lives he had enriched. A film of Murtha's life could also easily be turned into a heart-warming Christmas movie.

Hundreds of thank-you cards from little girls are strewn around his Optima Hair Specialists clinic in Birmingham. Murtha donates free hair replacement systems to ill little girls through the Little Princess Trust charity, which was set up in memory of five-year-old Hannah Tarplee who lost her battle with leukemia in 2005.



"Hannah's last wish was to have a full head of hair," he said.

"Nothing in my life gives me so much happiness as helping the girls," he added. "I've provided hair for 400 so far. My inspiration is knowing how much pain hair loss caused me."

Murtha, now 40, was popular at school. He was captain of the football team and full of confidence. He loved socialising and nightclubbing until at the age of 24, he had rapid hair loss.

"It was mortifying. My confidence went from level 100 to one. I spent £18,000 in three years trying to stop the hair loss and started doing drugs. I went out socially once in 18 months."

The root of his pain was the mockery of friends and colleagues. "They all thought it was hilarious. I worked as a forklift truck driver and to avoid seeing people I went on nightshifts and I started wearing a cap," he said.

The lowest point came when he sat for three hours in a car contemplating gassing himself with a hose pipe. "My suicide note said I couldn't handle being bald and the mickey-taking. Luckily, I thought it might hurt, so I couldn't go through with it," he said.

In 1996, aged 27, he bought a hairpiece from a company which then offered him a job as a consultant. Two years into the job, an incident occurred which changed his life.

"A seven-year-old child had been scalded by a kettle. His head was a mass of scar tissue. But his old man couldn't afford to pay. My employer refused to help and was so uncaring that I decided to set up on my own," said Murtha.

When he started the company from his spare bedroom in Sutton Coldfield, one of his first moves was to approach Birmingham Children's Hospital and offer free hair to 50 ill kids a year. His business took 2.5 years to see any profits, but has continued to grow.

DAVID SMITH

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4

DR BESSAM FARJO'S BEST TIPS

You're not alone

If hair loss gives you low self-esteem, remember there are eight million men losing their hair in the United Kingdom.

There is a lot of help available. Join public forums so you can talk about it and see how others cope.

Be pro-active

You don't necessarily need to have surgery. Just taking a positive step can lift your mood. Using cheap treatments like Regain or Propecia would already make you feel better because it would set you off along the path to treatment.

Consider all options

There is always the option of surgery, which can be a big boost to self-esteem. I've seen it transform people's personalities. As soon as surgery is over, it gives people something to look forward to in eight, or 12 months times when the transplanted hair will start to grow.

Learn to love yourself

Before spending money on surgery, make sure it is the right solution for you. I've had consultations where hair is not the issue. It's just an excuse for low mood. If I suspect there is something psychological, or psychiatric at play, I try to avoid surgery and keep people on medication for longer.

Therein, lies the value of the consultation process. Somebody suffering from body dysmorphic syndrome, for example, would be unsuitable. They can never have enough surgery because they are chronically unhappy with their looks.





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Question: What's the best action for hair loss? **Answer:** Consider all your options carefully, advises leading transplant surgeon Bessam Farjo.



MAKE THE RIGHT CHOICE FOR YOUR HAIR LOSS

Dr Bessam Farjo may be one of like them, and they can be used on drain. Remove the plug and the wa-microscopes, we remove a thin strip plant surgeons, but he advises his patients to consider a variety of options before they opt for surgery.

Farjo, of the Farjo Medical Centre in Manchester, said the simplest option was to do nothing and "age gracefully".

"Cut your hair carefully, learn to live with the hair loss and spend your money on golf instead," he said. "If something must be done, another non-surgical option is to try a hairpiece - like Elton John's. Remember, though there is a lot of ongoing maintenance and they must be replaced when tatty."

Camouflage products suffice for many men. "Film stars, such as John Travolta and Steven Seagal, you are recovering from surgery," jo. he said

Drugs are also available, the main ones being Regain, which stops hair loss in about four in five people, and prescription-only Propecia, which blocks DHT, a derivative of testosterone which causes hair loss.

"You have to keep taking Regain. It's like a plug on a sink, and the hair is like water going down the



"Propetia has a slightly higher success rate.

A more controversial method, low level light therapy - misleadingly called laser therapy - beams light onto the scalp, but independent clinical trials are lacking.

Finally, surgery is available and has come a long way since the "barbaric" days when scalp reductions cut out bald patches and stitched scalps back together.

"The vast majority is follicular unit transplantation. Follicular units are natural groupings of 1-4 hairs. Keeping them intact gives a more natural look," Dr Farjo said. "Using stereoscopic dissecting

the UK's most respected hair trans- a temporary basis, such as when ter falls down the sink," said Dr Far- of scalp containing roots, then divide it into grafts 1mm wide. They are inserted into micro-slits with needles, or tiny blades. If transferred quickly they survive. Operations take from three to eight hours depending on the number of hairs shifted - up to 9,000 but on average around 5,000".

Another option is Follicular Unit Extraction, where individual units are manually extracted. Instead of one fine-line scar, there are lots of dot scars. It is more time-consuming and limits the number of grafts possible in a session. But it may be appropriate for some people.

DAVID SMITH

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Don't always believe the hype

Hair loss sufferers are vulnerable to slogans, but should investigate clinics thoroughly before parting with their money

be made out of hair loss, so it is niques to attract business.

The Advertising Standards Authority has banned many adverts them to be misleading.

Sufferers of hair loss need protection. They are vulnerable when they are low in confidence. But they must remember the pitfalls awaiting customers who flash their wallets around imprudently.

There are millions of pounds to vice line for people with hair loss, run their hands through their hair. Just watching a dvd is not good said: "Many people assume from not surprising that some clinics adverts they will be getting a full use hard-hitting advertising tech- head of hair naturally, but often it's to break," said Peters. just a hairpiece. These can be overpriced, costing as much as surgery. If something guaranteed hair They are advertised as unique but from hair-loss clinics deeming if people shop around, they might find them cheaper."

> Peters said some clinics pressusales techniques similar to doubleglazing ads from the 1980s.

"They show videos of stereotypical, bronzed guys coming out of Richard Peters, who runs an ad- swimming pools; buxom beauties

Clients are pressurised into signing long-term contracts which are hard

growth, it would be on the 6 o'clock news, not just the internet."

Peters said there were honest, competent clinics. But he urged rised customers with high-powered caution. "The internet is a great resource for independent advice forums. But check companies out. If they won't tell prices on the phone, alarm bells should go off.

"Don't be treated like a victim. homework."

enough. Ask to see the product and don't sign long-term contracts. The danger is they will try to sell you "Above all, don't believe the hype. a better product in three months time.

> For people seeking pharmaceutical advice, Peters advised seeing a GP. "GPs know your medical history and can warn about side effects."

If surgery is desired, make sure the surgeon is at the top of the field.

"I've known people spend thousands and end up with less hair than when they started so do your



Get to the root of the problem

Question: How do I decide what the best treatments available for my hair loss are? **Answer:** Don't pick randomly. Get expert advice about your type of hair loss, and which products are suitable for you.

Many pre-menopausal women experiencing hair loss could be wasting hundreds of pounds on treatments when an inexpensive iron supplement would solve the problem.

Sally Ann Tarver, the President of the Trichological Society, and a trichologist with the Cotswold Trichology Centre, says many people are gulled into buying "hair" products without understanding what's wrong.

"They pick anything with 'hair' on the packet at a high street chemist, but most aren't effective. They cost up to £50, and I have patients who've taken them for years.

"Many products don't tell you what's in the 'patented complex' of ingredients. Some claim to be protein supplements, but how many pills would equal a steak?

Why it happens

"Pre-menopausal women usually bad sign.



low iron

set stomach.

on a better diet.

ucts.

their benefit.

- - work.

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Sally Ann Tarver Trichological

have iron deficiency. They eat less red meat than men and lose iron through childbirth and heavy periods. Low-calorie diets also cause

"I prescribe Lamberts florisene, which has enough iron to raise stores, but not enough to cause up-

"The amino-acid lysine aids iron absorption, so you don't need as much. After a booster, patients go

SALLY-ANN TARVER'S TIPS

Get expert advice on your type of hair loss before randomly buying prod-

Check ingredients and research

Read independent reviews. Ask others what worked for them Give treatments 3-6 months to

No results after 12 months are a

"For anaemic women, GPs can prescribe ferrograd C," she said.

Men's hair loss is genetic so diet makes little difference. Tarver says the best treatment is prescriptiononly Propecia.

"Statistics say 85 per cent of men see major reduction in hair loss and 35 per cent see growth. If taken before major hair loss, there's a good chance it will restore hair.

Another product, Regain, is better at stimulating growth than preventing loss,"

Alternative options

Camouflage options work well, especially for dark hair. Fibres are shaken like black pepper onto the scalp and bind firmly to existing hair electrostatically.

"I call it 'magic powder' because it makes the scalp disappear. It's great for both sexes.

"It doesn't irritate the scalp, won't run in the rain, but washes off easi-

"Just walking out of the house and not feeling the world is staring at your scalp can boost many people's confidence.

DAVID SMITH

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QUESTION & ANSWER



Dr Bessam Farjo One of the UK's leading hair transplant

Is the internet a dangerous tool?

It can be helpful, but has also opened up the market for everything cosmetic, and there are some dodgy practices.

There are, of course, ethical surgeons in Eastern Europe, Greece, Turkey, Pakistan and India, but there are many taking advantage of the UK's rich economy. There are a lot of cheap transplant operations, but many people get disastrous results. I've seen scarring so bad it's difficult to put right.

Who is especially open to exploitation?

Advances in technique, and Advances in contraction increasing concerns with body image, mean lots of young people are looking for surgery. But if a client is too young, it's difficult to predict how much hair they will go on to lose. If they go totally bald, the original surgery will look inappropriate. They should stay on medication for a few more years. Surgery is the last thing many people need, but many places are desperate for business in the recession and will push them towards it.

What advice would you give anyone looking for treatment?

Do your homework. Get rec-ommendations, look at testimonials, speak to patients. Study independent forums such as www.hairtransplantnetwork. com, and the website of The International Alliance of Hair Restoration Surgeons (www.iahrs. org), which screens surgeons.

Reputable organisations include the British Association of Hair Restoration Surgeons (www. hairsurgeons.org.uk), International Society of Hair restoration Surgery (www.ishrs.org), and the Institute of Trichologists (www. trichologists.org.uk).

hair science institute





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HairJournal offers you extensive information on the unique advantages offered by HST and what makes it different from conventional techniques. For more information or a non-obligational consultation, contact our clinic in London +44 20 7224 2630, Amsterdam +31 (0)20-575 23 30 or Maastricht +31 (0)43-601 81 01, or visit us at www.hasel.com.



Coen Gho: spiritual father of HST Hair Stemcell Transplantation

Dr. Coen Gho is a doctor and researcher of the highest calibre. After completing its medical studies, he specialised In decases of the scalp. Over the past 15 years, in close collaboration with universities and teaching hospitals, he hes developed a number of new treatment methods for scelp conditions and burn injuries. His most recent and potented method to Heir Stempell Transplantation® (HST).

This revolutionery heir growth method, which has sheady been used on hundrade of olients, is being hereided internationally es a new breakhrough For the past three years, this technique has been used exclusively at the Heir Science Instate's clinics. In Amsterdiem, Meesstoha end London, "Millone of men end women experience unwersed beidness as a serious problem." explains Dr. Gho "Beldness can occur due to a number of different osuess: heredky stress, phermapeutosis, or sperring from injuries such as burns. Whetever the cause, undesired baldness is a psychological burden and social impediment for countess people/both young and old, it is not without baues that solentiess the world over here been easking successful her meneplentetion techniques for generations. But until now the conventional outing and later methods were the only techniques evaluates. Unfortunately, the results they produce can hardly be called natural, and the man or women is left with an unsightly eger in the donor stee. This makes those techniques for from ideal?

How would you describe, in a nutshell, the difference between HST and conventional techniques?

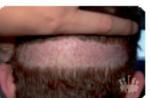
"Conventional techniques just move heir, so whetever heir you gain in one piece is her you bee from somewhere else HST is more endogous to budding end repletiting new pletts. By teling only some of the helt stem cells eway the donor helt grows back where it was. So what we are talking about is really growing new her:"

The donor area: regrowth of the donor hairs

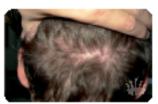
Whet makes HST unique is not only that you can have helr grow back in the piecelal you were it. The most revolutionery espect is that the donor erea is not demaged - no scienting and no heir. loss in the donor state. The most salent difference between the HST method and traditional heir transplant techniques is that in-HST, only a triv part of the heir folicie is removed. Since the mejority of the follidie remeine behind in the donor cree, t will conthus to produce new heir, and the donor area remains evaluation for luture treatments. This means the technique is not so much. e heir transpiers method, but one of heir multiplication.

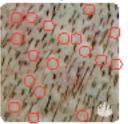
Thenks to the epocielised instruments used it is equally imposalbie to take too much of the heir follole. These tools slow us to recein the heir folioice in the donor eres, prevent scening and ensure that no visible loss of heir density occurs in the donor eres. This size slove us to guarantee that for the most part, the here in the donor eree will grow beak.











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Dener area before too alme

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Pail regreeth with Hair Mennedi Transplantatio

The unique **potential of HST**

The only wounds beused by the HST method are minisouls; and heat July within two days leaving no scarting. Thenks to this very line technique, HST is the only method suitable for treating facial areas, specifically the systerows, moustache and/or baard. Persons for performing such treatment may be very diverse. One frequently olad reason is the presence of deliguing scar tasks due to burn injuries, surgery etc. A moustache and/or baard, hereijp, or the like, or may be desired by transgendered patients to make the obligands of performs to make the obligands of performs to make the presence of deliguing scar tasks the obligand of gender as outwardly deer as possible. But too-frequent her removal can also utimately lead to a cesset of their growth in pieces such as the systerows.



Prior to tractment





I meeting after top descent



Prior to treatment



Prior to treatment



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Para injury treatments Epoletone prior to treatment



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Para injury treatments Epolerone after treatment



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Converting



Don't be fooled by imitations



Unlike other heir menepiens ofnice. Heir Science Instatus is developing the techniques of tomorrow today in its own RSD division. After long-term research and testing, the results are backed by scientific evidence and published in leading mediosi journels such as The British Journel of Dermstology. New developmental are regenered and parented. Unlike other oligios, which have their treatments on conventional and, in many cases, outdated techniques, therits to its permanent state of

progress HBI is singly using the islast, most advanced isobniques. The success of HST has led a number of olinics to suggest that they, too, have access to a similar technique. This is not true. Only HSI has the rights, the know-how and the technology to use the Har Stempell Transplenation[®] technique.

Hair Science Institute: the institute

Heir Science institute (HSI) is an institute for advanced heir transplantation and heir multiplication, with olinics in Amsterdam, Mesetricht and London, Dr. Coan Gho heads the medical side of both the clinics and the Research & Development division of HSL Dr. The developed the Heir Stemcell Transplantation® technique after years of research. This method has been potented by HEI, and HEI is the only organisation authorised to perform R. The technique involved in HST is not so much one of heir transplantation, but heir multiplication. Hit has two equally important divisions:

Heir Science institute Necessioh & Development

This division is accordingly boused on the development of new methods of her responsion and the ongoing development and improvement of the HST method, Within this division of Her Science. Institute, the revolutionery Heir Stempell Trenepientston^e technique is in a continuing state of development. Elibiency: Instruments and coneletency are always being improved.

Heir Science institute - Clinice

The pinice of Heir Science, heature offer the very highest in her renecientation quality in our diritios. we use stadiely developed mediod instruments. All medical personnel are apadateed and have completed an extensive internal course of raining. In the technique led by Dr. Gho.

A full educational programme for doctors and nursing stall is in piece. Alter successful completion of the program, the doctor or nursing protessional is certified for the performance of the Hein. Stempel Transpiers stori@ teofmique. Of oourse all medical personnel are registered with BIQ (the register for individual healthcare preaktioners. mentalized by the Ministry of Health, Weilers and

Scort in the Netherlands) The pinice are monitored by the Public Health Inspectorete on an ongoing basis.

Philosophy

At Heir Solence heckute, one of our philosophice is that we treat our olients the way we would like to be treated ourselves. To achieve this, and to excin absolute quality in medical procedures with an emphasis on ensuring condituing improvements in the technique, we work with mediael protocols and standard procedures. We consider t our personal obligation. to ensure that Heir Solence Institute and the treating doctors and technicians do everything possible to astaly the client. Every client has different exceptations concerning the result of e reament. During the inteke one of our dootors will offer a realisto picture of the reaute that can be excepted. The same dootor will also be reaconalcie for the treatment. We do not work with commendial on any other consultants.

Our philosophy is not to promise unstainable. reaute but to set the olient's expectations at a realisto level. We see it as our personal obliga-



For a non-obligational consultation, call HSI:

Hair Science Institute 4 Upper Wimpole Street London W1G 6LF United Kingdom T: +44 20 7224 2630

World Trade Center Amsterdam - NL Strawinskylaan 157 1077 XX Amsterdam T: +31 (0)20-575 23 30

Medisch Centrum de Wittevrouwenhof - NL Wethouder van Caldenborghlaan 45 6226 BS Maastricht T: +31 (0)43-601 81 01

Info@hasci.com www.hasci.com



Photo lefti



On 21 An part 2007, Hair Belence Institute's second elisis and operating Distance Buile was due Heaven and Basetdo it mayor Goal Loore. The olivie must be predent of a European cooperation between transing heapitale and operatives. From left to sight European director Jee Delaway, Basetoist mayor Gord Loore, Prof. Dr. Bartine Heaman Basiloud Addresy: Dourd HMG and Da Goon Gim, Head of Mic Orierto left.

Joe Delawar to congrutulated by Dayer Loore (Plants right).

AN ADVERTISING INSERT BY MEDIAPLANET

PERSONAL INSIGHT

Surgeons of creative vision are needed to implement Konstantinos Giotis' pioneering No Touch Technique, which involves extracting single follicles from donor areas without forceps. Giotis says NTT avoids the scarring which is common in more traditional forms of hair-loss surgery



Portrait of the surgeon as an artist

air loss pioneer Constantinos Giotis regards the young surgeons who perform his innovative No Touch Technique (NTT) as "artists".

The NTT surgical method makes great demands on surgeons because it is labour- intensive and requires great precision, Giotis claims. Only the best surgeons can keep performing at the highest level.

Unlike the more common strip surgery - which removes a strip of hair from the scalp - NTT extracts single follicles without the use of forceps. Follicles are placed straight after extraction to avoid complications. The surgeon works on the topmost layer of skin, so a light, local anaesthetic is enough.

"It's difficult, but fantastic work," Giotis said. "The doctor must be young and artistic, with very good vision, steady hands, and lots of patience.

"We dedicate one doctor per patient a day because he will be working intensely for seven hours."

Surgeons use a pen-like implantation device to insert single follicles. This implanter allows for increased precision. "It can follow the depth and angle of your natural hair, including the hairline. And it has the ability to rebuild natural features such as parts, crown swirls and widow's peaks," Giotis said.

Giotis claims NTT is minimally invasive and has no side effects. "We don't use stitches and clients can return to work soon after the operation. Since no part of the scalp is removed, we don't leave it with visible scarring, or a pitted appearance. It also gives a more natural look than traditional surgery."

Giotis helped to develop Follicular Unit Extraction when he was working in California. But he now believes NTT produces better grafts and reduces the risk of follicular damage. The method has proved popular with celebrities, such as Bollywood film star Aamir Khan, BBC sports presenter Andy May, and Indian cricket superstar Virender Sehwag.

PIONEERING

"I reckon that hair cloning will be the future – there is a lot of research going on at the moment."



Hair Loss expert has treated patients such as Virender Sehwag and Andy May

Doctor Steven Harris, a GP in London's Muswell Hill, was also delighted with the results of surgery two years ago.

"I had 2,800 hairs extracted from the back of my head and redistributed. It's given me virtually full coverage and a natural look. The surgery was not painful and the recovery time was fast. I had no pain or scarring and I went back to work three days later," he said.

"In my view this type of treatment works so well because of the sophistication of the instruments used. They make such tiny incisions that the lesions are nowhere near as big as with some other methods.

"Within two months I started noticing hair growth, which was around 20 per cent a month. After about nine months, I got the full effect, which looks great.

"I reckon that hair cloning will be the future - there is a lot of research going on at the moment - but I believe this is the state of the art for now."



MEDIA

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DHI US Patent Pending

From Macro- to Microsurgery - A new dimension in modern hair surgery - Follicular Unit Extraction

In Follicular Unit Transplantation, follicular units can be extracted in two ways: through Follicular Unit. Strip procedure, an established technicule that has proven it's efficiency to several years and through **Follicular Unit Extraction**, a treatment method that was acknowledged worldwise as a second state-of-the-art technique. Thanks to this meticulous technique, the follicular units with 1, 2 or 3 bales are immediately removed from the donor area.

In order to guarantee high return and optimal quality, the hair in the donor area is completely shaven before treatment. A FUE treatment is very tabour-intensive and therefore time-consuming, with the average treatment lasting between 5-9 hours.

Daily muline, very precise movements and many years of microsurgical experience, are absolute requirements to obtain excellent results.

Eula to the great precision and years of experience of Do Heriburi and his excision by, 1500 up to 3000 FU can be removed per treatment, if there is sufficient donor material cresent. This technique is highly suitable for young patients with a shaven or short hairstyle as it leaves more options open for the future. Young patients that underwent a FJE procedure, would still have the option to shave the nhein if further heir loss would occur.

Advantages of Follicular Unit Extraction:

- No linear scar, making a short baircul possible;
- Almost no visible scarring;
- Minimal invasive surgery;
- Very short and almost pain-free recovery period.

In the end, the result of a hair transplant does not depend at all on the choice of lochnique [str p or HUI] but on the specialization and skills of the attending surgeon and his medical team.









Dr. Feriduni Hair Clinic Aesthetic & Reconstructive Hair Surgery www.hairdocs.info – info@hairdocs.info

De Feriduni is a member of IAHRS ISHRS, ESHRS and a custifion member of the Hair Transplant Network.



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