

I have heard about using topical vitamin A such as tretinoin. Is anybody concerned about that exacerbating or causing cicatricial alopecia?

A panel of cicatricial alopecia experts answered this question during the 2016 Patient Conference in New Orleans, LA. We've adapted their answers to create this tip sheet on vitamins in patients with scarring alopecia.

Yolanda Lenzy, MD: I met a patient at a writing conference and I just happened to talk about this book I'm writing. She pulled her hair back and she had FFA. She said she thinks it's from the retinoids she'd been using. When she started them, she felt burning in the scalp area. That was the only patient that I've ever seen with that. I've searched the literature and didn't find anything published.

Wilma Bergfeld, MD: In general alopecia, I frequently use topical minoxidil followed by topical retinoids and I've done this for 30 years. I've never seen LPP in those sites that I've treated similarly.

Maria Hordinsky, MD: A lot of times we'll use tretinoin topically for the thinning that Dr. Tosti talked about that occurs on the forehead with the prominent veins. We may be using something like a Retin A topically, or tretinoin, to help the collagen in that area.

Nicole Rogers, MD: I would like to add that we've used that for the facial papules with the frontal fibrosing alopecia. We used different tretinoins, at whatever strength people can tolerate. It seems to improve it, but it's anecdotal.

Have levels of vitamin D ever been considered as a factor in cicatricial alopecia? Is there anything written on it?

Wilma Bergfeld, MD: I think you heard me mention this morning about vitamin D deficiency and I believe it is a treatment. Vitamin D has a lot of properties as a hormone, has anti-inflammatory features, and I believe patients who are in menopausal years should have a minimum of D3-2000. But you should have a baseline drawn and then draw again in 3 or 4 months to see if you need a boost. We've published from the Cleveland Clinic. I'm not sure it's a specific factor or an associated factor, but it's in the JAAD (Journal of the American Academy of Dermatology).

Is there any data to suggest that vitamin D supplement improves cicatricial alopecia? Or do we not know that; we're not there yet?

Wilma Bergfeld, MD: I think when you have multiple modalities going on you're not quite sure. You are just taking care of what you find, including the thyroid disease, metabolic syndrome, hyperlipidemia, the whole bit.

I have an understanding that vitamin D levels in African Americans can seem artificially low and actually be considered appropriate. Can anyone speak to that, concerning supplementation or checking the levels or anything?

Maria Hordinsky, MD: The Institute of Medicine, a couple of years ago, did an extensive review of vitamin D papers. Because vitamin D was touted to improve everything. They concluded after their review that the number 20 was the magic number for bone health. Anyone below 20 really needed to talk to their doctor about going on supplementation bone health. In our clinic, we sometimes translate that into skin health as well. We get patients with low levels, say 9 or 14, and we start supplementing. We talk about building blocks and things like that. It's important to follow that literature and follow vitamin D for bone health.

I've seen vitamins advertised that are specifically for hair and nail health. These vitamins usually contain biotin. What is biotin's role in hair? What is your opinion on this?

Antonella Tosti, MD: Biotin came from horses. Biotin was used to improve the nail of horses, running horses. There are studies on this. What's interesting in biotin is that endocrinologists published a paper showing that if you have blood test after being on biotin, that you may get wrong results.

Lynne Goldberg, MD: I saw definite evidence of biotin in nails. There's very good science in the literature that biotin is good for nails, but I couldn't find a study that I could quote on biotin and hair. Biotin is not even an essential vitamin.

Wilma Bergfeld, MD: It's an H hormone, and I don't know what the H stands for, but it's there. There is a study I am a part of from the Cosmetic Ingredient Review, looking at biotin, and there's no toxicity with biotin, no matter what the dose is. It could be very high. This goes from pharmacology to animal studies, human studies, etc.

Yolanda Lenzy, MD: We see a lot of cystic acne patients who are taking mega doses of biotin, and one of our sponsors from Viviscal, they put out some nice literature at the World Congress of Hair Research. The patients didn't have cicatricial alopecia but they had hair thinning, so I'm guessing female pattern hair loss or telogen effluvium, but there were good results with that. I didn't see studies with cicatricial alopecias. Their proprietary ingredient, you may read a lot about it, is marine proteins. Other companies use marine proteins as well. I get a lot of these questions on social media and everyone wants to know about that.

Lynne Goldberg, MD: The takeaway is that it's not harmful. But that there is no data to show that it helps hair growth. It helps fingernails. People believe it helps hair, but I don't think there's good data.

Maria Hordinsky, MD: I think there are 2 more supplements we should talk about because both are very popular. One would be vitamin E and the other would be selenium. Both are touted to be helpful for hair, but if the levels are high in the body, it could actually induce hair loss. So for patients we have taking selenium, we test their levels and if the levels are far too high for normal range. You mentioned iron before. It's very important iron stores be normal for good hair growth. In premenopausal and post-menopausal women, iron may be deficient and so they're not absorbing enough iron. So their iron stores, as indicated by a ferritin level, may be low. So that's another nutritional lab that can be done and can be addressed. It doesn't cure the cicatricial alopecia, but it's part of the building blocks for hair growth.

Wilma Bergfeld, MD: Hugh Rushton out of London has done studies with vitamin C and he feels vitamin C is very essential for hair growth and has studies to demonstrate that.

Antonella Tosti, MD: If I could add something, vitamin A has been involved in CCCA, excessive vitamin A, and also can cause hair loss.

Yolanda Lenzy, MD: That is interesting because in the hair/skin/nail products, one of the ingredients was vitamin A. We know isotretinoin, which we use for acne, can convert to high levels of vitamin A and patients can have hair loss. So I don't know why hair/skin/nail vitamins would contain vitamin A.

Wilma Bergfeld, MD: You have to discern between vitamin A and carotene. If it's carotene, it's metabolized well. If it's the vitamin A specifically, that is toxic to the hair in doses in excess of 10,000 units a day.

Antonella Tosti, MD: There is a very new supplement that just launched that has a high level of vitamin A. (Noted that it was not the exhibiting sponsor, Viviscal.)