

THE “NOT SO HARD” TRUTH ABOUT HAIR LOSS

READERS SUMMARY:

WHY EARLY HAIR LOSS MIGHT BE A GLUTEN/GLIADIN PROBLEM?

WHY YOU SHOULD NOT USE A NUCLEAR WEAPON TO TREAT A MOLEHILL?

WHAT ARE THE CONSEQUENCES OF PLAYING A BIOCHEMIST ROLE IN THIS PATHWAY?

WHEN TREATMENTS ARE WORSE THAN THE ORIGINAL CLINICAL PROBLEM?

WHAT SHOULD I DO WHEN I HAVE HAIR LOSS BEFORE STARTING DRUGS?

Every so often, I have decided to post a blog about an interesting clinical picture that I think may help our community out. Today we are going to cover a clinical topic that came up a while back on Paleohacks about a young male patient about his recent hair loss. I think this topic is timely because of the recent literature that is now coming out about the drugs that disturb the distal androgen pathways, and how they can wreck the Hypothalamic Pituitary axis on a permanent basis. I have heard many doctors on public radio shows (Sirius Doctor Radio to be exact on their dermatology show recently) and in blogs say that these hair sparing drugs do not cause any long term problems with a males fecundity or libido. In a nut shell, I am calling bullshit on that. This statement can only be made in the context of not knowing

anything about the brain and pituitary gland. I have seen many men come to see me with back and neck problems get diagnosed with low free and total Testosterone and signs of metabolic bone disease, loss of energy and inability to sustain an erection. Then I see their medication lists, and see a bunch of hair loss meds. These meds are used to solve a cosmetic issue by using a tomahawk missile to change their appearance. If men knew what they were gambling with, to get a head of hair, this problem would vanish overnight. The problem is few men are getting told the correct story. Once you understand the biochemistry, you would never opt for these meds. It makes absolutely no clinical sense to me really. And I am hoping this blog will wake up some younger males and females with thin hair that there are better options than playing with your pituitary to fix thinning hair. To prove it, I want to highlight a question that posted on PaleoHacks.com back in March of 2011. It was from a young male college student . Here is his exact question,

“I’m 23 now, but since i started college (19) I noticed when I tug on my hair I can pull out up to like 10 strands. I literally can’t pull my hair without getting at least two. My hair also just falls out everywhere: the floor, the shower, a test in class. This may not seem like a big deal, but 4 years later, my hair is much thinner than it was. My forehead can’t be covered by my bangs now.

Also, my body hair can be pulled out VERY easily. When I started college, I went vegetarian, then vegan. This may or not have something to do with it. I also sometimes wait way too long to eat, even though I have mild hypoglycemia which makes me lightheaded if I don’t eat.

Basically, do any of you see anything out of whack that would affect my head hair and body hair?

A few years ago I was moderately low in vitamin D and Iron. My current tests came back as:

Vitamin D: 47 (normal 30-100 ng/ML)

Ferritin: 46 (normal 20-345 ng/ML)

Iron Total: 108 (normal 45-175 mcg/dL)

B12: 439 (normal 200-1100 pg/mL)

Thyroid...

T3 Uptake: 36 H (normal 22-35%)

T4(THYROXINE),TOTAL: 10.9 (4.5-12.5 mcg/Dl)

Free T4 Index (T7): 3.9H (normal 1.4-3.8)

So, I appreciate the help. No doctors have given any real advice. Also, baldness doesn't run in my family and it's weird that my body hair does the same thing. So, I don't think its MPB. (Male pattern baldness)

Edit: I realized I was gluten and soy sensitive or intolerant about a year ago and have stopped eating them. I have been about 90% paleo for about 2-3 weeks now and feel pretty great.

My response's to him are chronicled in the thread over at <http://paleohacks.com/questions/28568/questions-about-my-hair-loss#ixzz1Zv0WGKYs>. This case is instructive on several

levels from the hair loss and the thyroid issues. They tie directly back to my top ten paleo supplement post as well.

As soon as I read the history in this case, I knew what was wrong with him but I decided not to make the answer easy for him because I wanted him and everyone else who read this question to learn something more important about messing around with the HPA without a good reason. If you read my responses to him, you can see him being a vegan and eating lots of grains were at the heart of his problem. Alopecia Areata is almost always tied to gluten intolerance. I am still amazed at how many hair specialists and dermatologists still are immune to the basic data. If you have this condition, you should immediately do a grain elimination diet and stop being vegan or vegetarian because this is the cause in most cases. Many women with PCOS also get thinning hair too. PCOS is caused by insulin resistance and high levels of androgens that kill the hair follicles. Again changing your diet should be de facto treatment number one, not drugs that alter the androgen pathways. For many doctors and hair loss experts they jump to drugs. For them, it's all about blocking the 5 alpha reductase pathway to stop making DHT (dihydrotestosterone) and estradiol (E2) in men and women. Dutasteride and finasteride are the drug names. You know them as Avodart and Propecia. These drugs carry major risks of hypothalamic pituitary shut down long or short term. DHT is known to cause early apoptosis of hair follicles so that is why they use it. Most cases of male pattern baldness is epigenetically caused. So once the hair loss begins, not much can be done to stop it. Waiting until it stops is best, and then one should consider a transplant without any of these drugs! You might have trouble convincing a hair transplant surgeon to treat you this way, but if you'd rather go through life known as Mr. Softy the choice is yours.

This was chronicled in the March 2011 Journal of Sexual Health. According to Dr. Abdulmageed M. Traish, a professor of biochemistry and urology at Boston University School of Medicine, almost all men taking these drugs experience [side effects](#). Unfortunately, a study by Dr. Traish finds that some sexual side effects may be long-term or even irreversible. BPH medications may cause the inability to have or maintain an erection ([erectile dysfunction](#)), decreased sexual desire, and difficulty ejaculating or decreased volume of ejaculate. In women, these can alter libido, performance, and ability to climax due to changes in blood flow to the clitoris. After reading this, I would hope most men would rather have good stiffness over a head full of hair. I don't think ladies will like potentially giving up the ability to climax for some more hair. Climax in women releases oxytocin which diminishes breast cancer risk by 50% in some studies. Climaxing in women also extends their longevity by close to ten years as well. It seems counter intuitive to me to gamble with both dutasteride and finasteride. These meds belong to a class of medications known as [5-alpha reductase inhibitors](#). I know women like men with hair, but what good is a full head of hair if the plumbing is not operational? To me that is false advertising really and biologically not smart. When our sex steroid pathways begin to fail as we age, it seems our biology seems to take us out. This is why lower levels of testosterone in men and estrogen and progesterone in women are associated with higher heart disease risk and higher cancer rates. The death rate also tend to correlate quite well with low sex steroid levels in humans. When I was in medical school we were taught to believe that low testosterone was best to improve longevity from prostate cancer. Now today new meta analysis data shows the exact opposite is true! It shows men with prostate cancer and the lowest testosterone levels have the most grim prognosis! My urology pals Dr. Tom Landon and Gil Ezell led me to these studies last year when we spoke about men's health issues in our surgeon's lounge. I think this information needs to get out to patients, because I don't

see many patients getting it from their own doctors. Your life might depend upon it.

Another reason I wanted to blog about this now is the October 2011 issue of the Mens Journal (page 66-7) covers this very topic. This magazine sits in my office and one of my patients yesterday came into the office for a spine bio-hack, and we found that his Testosterone was seriously low at 33 years old. This article caught his attention and he happened to be bald too! I told him this information about these meds and what they could do to him. I also explained to him in detail what a low testosterone level means for men at his age. We also talked about thyroid disease and labs as well and how they are associated with deficient androgen findings. These are well chronicled in the paleohacks thread too I linked to as well. Feel free to read it, because I think it makes a great case study for someone with alopecia areata from grains. This is precisely what this person suffered from, and it appears he also likely sustained some Hashimoto's from his vegan diet from the grains.

Summary:

If your hair is thinning and you're male, do not start hair loss meds. First move is to eat a Epi-paleo diet loaded with iodine, and eliminate all grains. Iodine helps limit excessive estrogen in both men and women that can alter your sex steroid hormones that cause you to lose hair. If you're vegan/vegetarian, adapt or accept mediocrity. This statement is based upon evolutionary biology, not vegan dogma. If this does not help you, then you likely have epigenetically altered androgen pathways. Go get tested by a doctor. You will likely find issues related to DHEA-s, Pregnenolone, testosterone, estrogen (E2), Progesterone, DHT, fasting serum

insulin levels, complete thyroid panels to include TPO antibodies and Vitamin D levels. I think optimizing minerals like Zinc, Selenium, Magnesium, Iron, and Iodine would also help. If you find that your hair still falls out...then accept it and shave it all off because bald men get lots of women! If you are a woman, wigs are now pretty cool. If those don't float your boat, then get a hair transplant from one of the 100 board certified hair specialists in the USA, but tell them up front you won't take Avodart or Propecia. If they balk, hand them a copy of this blog. They clearly need some knowledge dropped upon them.

Progesterone and DHEA levels are tied to many things that can effect hair follicles. So it is critical to know these levels too. Anyone with high serum insulin levels also will lose hair in all body parts, but especially in the limbs. Epigenetic signaling usually effects the hormone response and causes early apoptotic follicle loss. The hormone response then can cause havoc in the gut where minerals are absorbed or not. Remember our diet is not what we eat...it is the summation is what we absorb from our guts. This ultimately can effect our biologic response in enzyme and protein production.

CITES:

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<http://paleohacks.com/questions/28568/questions-about-my-hair-loss#ixzz1ZvOWGKYs>

2. Abdulmaged M. Traish PhD et al, "Adverse Side Effects of

5 α -Reductase Inhibitors Therapy: Persistent Diminished Libido and Erectile Dysfunction and Depression in a Subset of Patients” Journal of Sexual Medicine, Volume 8, Issue 3 March 2011

3. USA Today, 3/2011 (“Sexual Side Effects from Propecia, Avodart may be Irreversible”, by Steven Reinberg – HealthDay)

4. Mens Journal October 2011 pages 66-67.