

HATS OFF

NEW TREATMENTS ARE MAKING FULLER, THICKER, LONGER, STRONGER HAIR A REALITY. BY SANDRA BALLENTINE. PHOTOGRAPHED BY DAVID SIMS.

In the animal kingdom, a good coat can attract the right mate. Things aren't so different in our world. Let's face it: We tend to judge each other by our hair. It can be a symbol of good health and of youth, and a defining signature that makes us feel sexy.

A lot of things, including genetic destiny, can stand between you and an amazing head of hair. While thinning hair has become socially acceptable (even attractive sometimes) in men, for women it is most often devastating. Stress, illness, pregnancy, thyroid conditions, hormonal issues, anemia, and autoimmune disorders like lupus can all lead to hair loss, both temporary and long-term, as can poor diet and ordinary aging. It's a follicular minefield out there.

Looking back at my own history, I regret that I didn't take my hair more seriously. When I started losing it, I did what a lot of otherwise smart, well-informed women in complete denial do: I ignored it, hoping it would go away. And a lot of it did. The tricky part, then as now, was getting it back.

I remember having dubious (and expensive) vitamin shots in my scalp in the late nineties, and recoiling in horror when a famous dermatologist suggested Rogaine a few years later. I didn't want to be seen purchasing a product for bald men at my local Duane Reade, nor did I care to foam up my \$90 blow-dry. The sparser things got, the more potentially damaging hair dryers and flatirons I required in order to keep up appearances. When I came across a frightening recent photo of myself at a fashionable London restaurant—the overhead lighting revealing a glaring bare spot near my part—I realized I had to take action, *immediately*.

My first call was to dermatologist (and hair authority) Fredric Brandt, M.D. Minoxidil—the active ingredient in both Rogaine and Pantene's new Hair Regrowth Treatment for Women—"is still the only FDA-approved topical for women, and it does work," he said. But I was still leery of a

commitment to Rogaine. Minoxidil is a strong chemical, a drug, and once you stop using it, any freshly grown hair—which is mostly baby-fine, with the consistency of a dusting of ground cover—can fall out. I wanted other options.

When I heard that New York dermatologist David Colbert, M.D., was injecting platelet-rich plasma (PRP) into the scalp, I made an appointment right away. Originally used on athletes to treat joint inflammation and in surgery to facilitate wound healing, PRP has lately made the jump to cosmetic injectable. Unlike dermal fillers such as Restylane, PRP floods a targeted area with growth factor drawn from your own blood, which is said to encourage cells to make more collagen and elastin, naturally plumping the skin. If your hair follicle is the seed that grows a plant, think of PRP as the fertilizer, said Colbert. He has been injecting it into people's scalps for a little over a year and plans to begin combining it with other treatments like LED laser light—which he hopes will energize the follicles, making them more receptive to the nutrient-rich broth. Thus far, he's seen "a reasonable amount of hair regrowth" in patients, which he estimates to be about a 10 percent improvement. "It's a start," he said. "The future of PRP is what's really exciting." After an assistant expertly drew a tube of my blood and refined it via centrifuge to isolate the growth factors, the doctor injected the clear plasma into the thinning area above my forehead. For someone who is used to Botox needles, it barely hurt. Fifteen minutes later, and with my Orlo Salon blow-dry intact, he was finished. To see results I would have to repeat the \$2,500 process once a month for three months.

In Sarasota, Florida, Joseph Greco, Ph.D., the groundbreaking hair-restoration doctor who started using PRP on both transplant and nonsurgical patients back in 2007, has something even more potent up his sleeve: PRP combined with cytokine-rich plasma (CRP), a more purified version developed by the biotech company he cofounded. While PRP alone "has more of a delayed-action release over time," CRP, stripped of red and white blood cells and platelets, "provides an immediate burst of growth factors. It's basically liquid gold," he says of the \$1,700 treatment. The founder of the popular Web site Women's Hair Loss Project, who goes by the initial Y online, flies in from Los Angeles every four to six months for it. "I saw reduced shedding after one appointment, and now, after nine sessions, I find I'm keeping more hair, and it's of much better quality," says the pretty 36-year-old.

For the first time in years, there is much to look forward to on the hair-growth horizon. In one closely watched trial, researchers tested the key ingredient in Latisse—that wonder product that causes longer, lusher eyelashes to miraculously sprout—on the scalp. Angela Christiano, Ph.D., a professor of dermatology and genetics at Columbia University, made headlines last year when she spearheaded a study in which dermal papillae (cells that play a critical role in hair formation and growth) were used to grow human hairs on human skin, albeit skin that was grafted onto mice. The technique—in which hairs harvested from a small strip of skin behind the ear are used to grow hair-follicle stem-cell cultures—could have important implications for women with diffuse hair loss. "In the future, these could provide a permanent supply of your own stem cells that can be grown at any time to regenerate new hairs," explains Christiano.

While I wait for my next PRP appointment, Colbert has some simple advice: Take care of the hair you have. "Keep blow-drying to a minimum,"

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latest high-tech shampoos, conditioners, and leave-in serums, which Colbert says should act synergistically with the PRP, amplifying its effects. Renokin (a line from Korea recommended by Brandt) and Renaissance (the new range from Gregory Brown, M.D., of RéVive—skin care fame) both contain growth-factor peptides, which help stimulate dormant follicles. "Up until now, it's been either minoxidil or snake oil," says Brown. "This isn't going to help a person who is bald, but we've seen a 10 percent increase in hair density after three to four months using the products." Revita shampoo, from DS Laboratories—bolstered by thirteen active ingredients—promises thicker, more fabulous hair in as little as a month. Mine looked more luxurious after just three applications. I've even been trying the iGrow, a space-age-y, helmet-like device that uses LLLT—low-level laser therapy. Pending FDA approval for use by women (it's already approved for men), it has been shown—when worn for 25 minutes every other day for four to six months—to promote hair growth by stimulating unhealthy cells within the follicle into an active growth stage. Chia Chi Kao, M.D., a Santa Monica plastic surgeon, ordered six of the \$695 devices for his office. When I opened the door wearing mine on a recent afternoon, the UPS guy couldn't keep a straight face.

And that's just it: When you have a hair issue, you'll do almost anything to solve it. You throw everything you possibly can at it and hope something sticks. It's too early to tell if the zany helmet, the PRP, or the supercharged shampoos lining my shower shelves are making a quantifiable difference, but for the first time in years, my hair feels more luxurious, and I could swear it's thicker on top. The people who know my hair best—my stylist and my colorist—concur. What's better than that? □

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he said firmly. "Your hair is a fiber. Would you throw your eight-ply cashmere sweater in the dryer?" (Probably, knowing me.) So, as part of my new proactive approach, I've been sampling the

HEAD CASE

Model Marion Leloup in a Lanvin mohair coat and hat. Hair, Paul Hanlon; makeup, Linda Cantello for Giorgio Armani Cosmetics. Details, see In This Issue.

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