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“Focal dense-packing” in hair transplantation

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For the past four years, in many of my hair transplant procedures, I have been using a concept I refer to as “focal dense-packing.” This refers to the filling in of a localized zone, usually around 2.5–3 cm² in area, located in a key visual area just behind the front hairline. In this small zone, I personally densely pack 2-hair FU grafts using a “stick-and-place” method. This procedure is described below.

Indications

There are four special indications in which I virtually always use this technique:

1. **All female patients.** The biggest complaint most females present with is that the scalp can be seen through the front-central hairline as someone views them from the front or side. For this reason, it is beneficial to select out a small “frontal core” circle, which starts around 0.5–1 cm behind the edge of the front hairline, and fill it with 110–150 2-hair FUs (Figures 1 and 2).
2. **Males with deep fronto-temporal recessions.** These patients usually have a fairly strong frontal tuft in the front-center, but are thin or bald in the recessions laterally. I usually draw a somewhat obliquely oriented elliptical zone on each side, just behind the front hairline zone. This can be done at the first session, or, as is more often the case for me, at a follow-up transplant procedure. Both sides are usually done at the same time, requiring around 260–300 FUs in total. Occasionally, there will be a disparity of density between the two sides after the first or second surgery. In such instances, performing focal dense-packing on the thinner side helps that area “catch up” to that of the other side. Most of the time, such a disparity in apparent density is due to the original presence of more native hair on the stronger side.



Figure 1. 49-year-old female with small “frontal core” area drawn in. 110 × 2-hair FUs placed in 19g sites in frontal core zone, along with regular transplant session around it.



Figure 2. Same patient, 1 year 11 months later, after one session.

3. **Difficult “cow-lick” areas in front.** Where there is a sharp demarcation in direction of hair at the hairline, the area where the divergence occurs has a tendency to look sparse, even after 2–3 sessions (Figures 3, 4, and 5). Stick-and-place with a 21g needle enables the surgeon to place many FUs in this area atraumatically, with the least chance of “cutting the legs off” the other grafts that are aligned almost in a “V” configuration subcutaneously.
4. **Patient complaint area.** Whenever a patient returns for a subsequent procedure and there is a fairly localized area that he or she notes that they wish were denser, I will use this technique to address their area of concern. I feel this gives me the maximal chance of making that patient happy with the final result.

Experience Montréal



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