



# forum

VOLUME 9, NUMBER 4

JULY/AUGUST 1999

## A View from the Chair

William Lenihan *Los Angeles, California USA* e-mail: [lenihan3we@earthlink.net](mailto:lenihan3we@earthlink.net)

*Bill Lenihan is a Los Angeles-based engineer who underwent his first hair transplant surgery in 1985, at the age of 25. His Norwood classification at the time was halfway between II and III. This individual has philosophical problems with the hair transplant industry as a whole. While many of you will disagree with the content of his article, I think it is well worth reading. The Grand Master himself, Dr. Richard Shiell, has composed a brief editorial on Mr. Lenihan's article. Mr. Lenihan has a Web site on which he posts his views on our industry. The more we understand his insights into our industry, the easier it is for us to adapt and change. I believe the reverse is equally true, that is, the more he learns about us, the more likely he is to modify his views. Therefore, publishing his editorial is a win-win situation for all of us. We would very much like to receive Letters to the Editors on Mr. Lenihan's article.*

**H**aving spent a few dozen hours in "the chair" (that which the patient sits in during his hair restoration procedures) since 1985, I have been invited by your editor to offer a patient's perspective on today's hair transplantation industry.

After about 30 years of development, where too often the results were poor, the 1990s have seen a vast improvement in the surgical techniques of hair transplantation. Aside from minor debates over the merits of scalp reductions and flaps, solutions seem to be available for many of the problems that plagued this industry. Extensive micrografting, closed donor sites, and microscopic dissection have improved the graft yield and aesthetic results, while nitrous oxide has made the anesthesia experience more bearable for patients. Perhaps cloned hair follicles will soon provide the density that even the most satisfied patients would like to improve on. It appears that the megasession debate—how to get the most grafts done in the least amount of

time, without compromising the final results—is the big issue today.

These are the issues, almost always technical, that I see discussed in the medical journals I occasionally come across. As wonderful as this scientific progress is, I have felt for some time that there are other issues that this industry needs to address to improve patient satisfaction. It is these that I want to bring to your attention—headlined by paraphrasing your own literature: "Why wait until you have significant hair loss? Start your hair restoration today!"

In my opinion, the number one issue in reducing the rate of dissatisfied consumers is the evaluation, and selection for surgery, of prospective patients with more weight given to their age and psychological maturity. In February 1997, I published a paper on the Internet that expressed my warnings, caveats, and recommendations concerning hair loss, much of which was about hair transplantation. In the

*continued on page 105*

### In every issue...

President's Message .....	102
Editors' Messages .....	103
Notes from the Editor Emeritus .....	104
Pioneer's Page .....	117
The Dissector .....	120
From the Literature .....	122
Letters to the Editors .....	125
Assistants' Corner .....	127
Classified Ads .....	131

### In this issue...