

# forum

Volume 13, Number 6

November/December 2003



**50 Years  
Later**

(Pioneers are in bold, others are past Presidents of the ISHRS. Dr. Norman Orentreich was present for Friday's panel, but was unable to attend Saturday for the awards.)

Bottom row: Drs. Tom Alt, Bluford Stough, O'Tar Norwood, Walter Unger

2<sup>nd</sup> Row: Drs. Robert Berger, Richard Shiell, Bob Haber

3<sup>rd</sup> Row: Drs. Jay Barnett, George Farber, Patrick Rabineau, Hiram Sturm

4<sup>th</sup> Row: Drs. Russell Knudsen, Shelly Kabaker, Bobby Limmer, Marcelo Gandelman, Dow Stough, Jim Vogel, Paul Straub, Bob Leonard

**O**n Friday, October 17, the ISHRS was treated to a panel, the likes of which has never occurred nor will likely occur again. The man who founded the procedure that governs our field, Dr. Norman Orentreich, and 10 of the men who were integral in developing hair restoration and educating the world, were present on stage. After introductions, they shared some of their thoughts and some history with us in a moment to be remembered. The panel consisted of Drs. Tom Alt, Jay Barnett, Robert Berger, George Farber, Norman Orentreich, O'Tar Norwood, Patrick Rabineau, Richard Shiell, Bluford Stough, Hiram Sturm, and Walter Unger. Dr. Sam Ayres III was also honored but was unable to attend.

**1. Tom Alt.** Dr. Alt got his start in transplanting in 1972 following visits to the offices of Drs. Blu Stough, Jim Burks, and Norman Orentreich. He became a prolific writer and lecturer, and was a dominant figure in the American Society of Hair Restoration Surgery. Currently he is retired and enjoying life in Minnesota.

**2. Sam Ayres III.** Dr. Ayres began hair transplanting in the early 1960s and rapidly became a benchmark in cosmetic artistry. He became the "transplanter to the stars" in Hollywood, and was an early pioneer in the use of small grafts. Health reasons prohibited his attendance, but one of his successors,

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## Hair Transplant Forum International Volume 13, Number 6

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The ISHRS Golden Follicle Award sculpture, as seen on the cover of this issue, was designed by Francisco Abril, MD. Dr. Abril offers for sale, copies of a small bronze hair follicle sculpture (10" high). For more information, please contact: Clinica Dr. Francisco Abril, PO dela Habana, 137, 28036 Madrid, Spain. Phone: 34-1-359-1961; Fax: 34-1-359-4731.



Mario Marzola, MBBS  
Adelaide, Australia

It is 3 o'clock in the morning and I can't get to sleep. My wife and children are happily dreaming in our hotel room but the Gala Evening with all the beautiful feelings won't stop going around in my head. I'm talking about our 11<sup>th</sup> Annual Scientific Meeting of ISHRS at the Marriott Marquis Hotel in New York. I hope you were there.

Undoubtedly the best meeting ever, they just get better and better don't they? May I share with you some of the highlights. The program put together by Jerry Cooley asked for professional and scientific papers and in the 11 years of ISHRS I have never seen the presenters respond so well. Speaking for all the attendees, Jerry, I wish to thank you for the time and effort that I know you put into our program. You are a star.

The Distinguished Assistant Award was presented for the first time. Has anybody deserved it more than Cheryl Pomerantz and Marilynne Gillespie? Maybe just maybe the super important status of our surgical assistants is starting to be recognized. As an Australian, I was very proud of Jennifer Martinick's Platinum Follicle Award and cheered loudly when Bill Parsley's Golden Follicle Award was presented as it was well overdue. Who would argue with these choices? The ISHRS Executive Committee does not give the

Manfred Lucas Award every year but Walter Unger deserves to join the elite group for he speaks and writes so clearly that it is a pleasure to learn from him. To know that he is a gentleman and a devoted family man is just a bonus.

Who will ever forget all the Pioneers present? Tom Alt, Sam Ayres, Hiram Sturm, George Farber, Bobby Berger, Patrick Rabineau, Jay Barnett, Walter Unger, O'Tar Norwood, Richard Shiell, (Norman Orentreich was present earlier in the day), and what did you all feel when Dow Stough made that speech off the cuff about his dad, Blu Stough? I don't think there was a dry eye in the house.

I would really like to thank Bob Haber and Victoria Ceh for looking after the ISHRS as if it were their own. That is the way I hope we all look upon the ISHRS, our Society, full of our friends, looking for all ways to improve our patient outcomes while having the best time along the way. This is our life, it is not a dress rehearsal.

Please help me to run the ISHRS even better next year. There are many committees and positions on which to serve so let Victoria Ceh know at head office. Tell her you want to be involved to keep developing this great Society of ours. We need your input so please fax me at 630.262.1520, E-mail info@ishrs.org, or contact me at mario@marzola.net. ♦

Sincerely,

*Mario Marzola, MBBS*

## Note to All Members

**2004 Annual Membership Dues were mailed November 18. Payments are due by December 31, 2003. You may make payment online, via fax, or post.**

**Happy Holidays and Best Wishes for the New Year!**



# Co-Editors' Messages



William M. Parsley, MD  
Louisville, Kentucky

The 11<sup>th</sup> Annual Scientific Meeting of the ISHRS has just ended and what an experience. To no surprise of those who know him, Dr. Jerry Cooley did a wonderful job of orchestrating the meeting, and of emphasizing the techniques and research of highest interest to the Society. Follicular unit extraction, perpendicular grafting, and new research were among the areas given ample attention on the program. Summaries of each day's program are elsewhere in this issue (most pictures and Awards will be in the next issue). Education was not confined to the lecture rooms, but also spilled into the hallways. Dr. Bill Rassman, always

inventive, was seen showing some doctors a new device that he hopes to showcase soon. It is an implanting device that sucks up the graft into a disposable needle; it then creates a site and ejects it into the recipient area. It is the new version of the Hair Implanting Pen (HIP) and it certainly looks promising; however, history has repeatedly demonstrated the obstacles along the road from the drawing table to the operating table for automated planting. If anyone can do it, Dr. Rassman will probably be that person. Meanwhile, Dr. Marc Avram demonstrated a magnifier utilizing a Polarized LED light. It is called the Syris and also seems to have much promise.

The highlight of the meeting for most of us was the Pioneers in Education panel. Eleven of the doctors who founded and taught hair restoration were gathered on one stage and introduced, along with some highlights of

their accomplishments. These included Drs. Norman Orentreich, Hiram Sturm, Bob Berger, Bluford Stough, Patrick Rabineau, O'Tar Norwood, Jay Barnett, George Farber, Tom Alt, and Walter Unger. Dr. Sam Ayres was also honored but was unable to attend. With Dr. Unger moderating, the panel turned out to be a trip down memory lane with each giving a little tidbit of history, ending with Dr. Orentreich describing his work that turned out to be the birth of modern hair restoration. It was coincidental that this was the Golden Anniversary of the first hair transplant performed by Drs. Orentreich and Sturm (late 1952) and was within a mile or so of the place it was performed. Saturday night at the Gala Dinner, the honorees were given an award, highlighted by Dr. Dow Stough giving the award to his father, Dr. Bluford Stough. Dr. Jay Barnett

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Michael L. Beehner, MD  
Saratoga Springs, New York

## New York Meeting

The depth and breadth of knowledge presented at the recent annual ISHRS meeting in New York was truly awe-inspiring. It makes me feel

fortunate I am not entering the field at this time, as I may have been scared away by the complexity of it all, and all the seemingly conflicting methods for accomplishing the same goal, namely, the simple task of placing hair on a balding scalp. Hats off to Dr. Jerry Cooley for organizing and pulling off a fantastic meeting! The support of the membership, with the high attendance numbers, also speaks well for the strength and vitality of our Society.

## First IBHRS Exam

On Sunday afternoon, after the meeting's conclusion, the first three international candidates took the IBHRS written and oral exams. I am pleased to announce that all three passed. Tentatively, it is due to be next offered this coming March in Orlando, Florida, in association with the annual ISHRS Live Surgery Workshop (ABHRS exam will be offered also).

## Original Okuda Papers

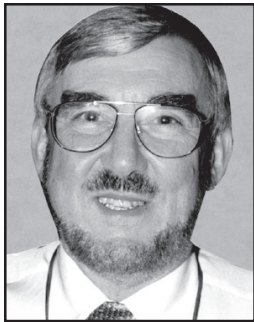
One of the highlights of the meeting for Drs. Bill Parsley, Richard Shiell, and myself was Dr. Imagawa sharing with us an exact duplicate of the original papers written by Okuda in Japan in the 1930s, along with an English translation by Dr. Imagawa himself. In a future issue of the *Forum*, Dr. Shiell will be sharing some of the highlights from this text with the readership. It makes for fascinating reading, especially in light of how many decades it preceded our current state of the art.

## On Transplanting Areas Other Than Male Scalps

I was reflecting the other day on the fact that I find my hair transplant practice all the more interesting because I do other things besides simply transplant males who are losing their hair on top. And yet, these other procedures—eyebrows, temple work, transplanting of females and trans-gender patients—are all somewhat riskier to take on in the early years of one's practice. My advice to those starting out would be to avoid these in the early years, watch several experts perform them many times, and then cautiously get started in these areas on ideal candidates. In each of these types of surgery, there are lots of would-be candidates who should probably not be attempted, even by so-called experts. Especially with regards to transplanting the anterior temple and eyebrow areas, the grafts are very much exposed and have to look exceedingly natural. Angulation is very key, along with controlling the direction of the curl of

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# Notes from the Editor Emeritus



Richard C. Shiell, MBBS  
Melbourne, Australia

## Pioneers Article

I was greatly flattered by Dr. Mike Beehner's article about me in the last issue of the *Forum*.

Such articles are usually only published after one is dead, and

it is a humbling experience to read such stuff during one's actual lifetime.

Anyway, it has been an honour to serve the members of our Society and to try and pass on some of my knowledge and enthusiasm for this field to our younger members.

## New York Meeting

This meeting concluded a few hours ago and I am rushing a few comments into the *Forum* before it goes to print. Much more will undoubtedly be published in editions 1 and 2 of 2004, but let me preempt these by saying that I think that this meeting was, in my mind, the best ever and a fitting conclusion to the outstandingly successful year of ISHRS President Dr. Bob Haber. The attendance was the third highest ever, and Dr. Jerry Cooley, Chairman of the organizing committee, and his legion of helpers are to be congratulated.

The program was full of interest and ran like clockwork. There was seldom a subject without appeal, although I noted with regret that any talk of flaps or reductions was guaranteed to send 200 participants to an early coffee break and lectures on genetics and medico-legal topics produced a similar rapid thinning of the audience ranks. I urge future meeting conveners to persist with these important subjects, however, as "popularity" should not be the only criteria for staging important topics. If our meetings are to continue to have scientific status and CME accreditation, important but less popular topics such as genetics, scalp reductions, and artificial hair implants should continue

to be listed along with "sexier" subjects such as finasteride and FUE.

## Highlights

In the brief space available in these notes, I would like to mention my highlights of the meeting. First was the extraordinary display of fine work in the Live Patient Display. Every one of the more than 25 patients on display served as a reminder of how far we have advanced in our craftsmanship these past few years. It is so gratifying to find that these skills, once restricted to a few masters, are now becoming more widespread in our ranks.

My next highlight was the assembly of the Pioneers of Education on Friday afternoon. It was a great achievement to gather these 11 individuals together in New York as only 3 of us (Walter Unger, O'Tar Norwood, and I) are members of the ISHRS. I was honored to be included amongst the ranks of such HT luminaries such as Drs. Norman Orentreich, Hiram Sturm, Jay Barnett, Bob Berger, Blu Stough, Sam Ayres III, George Farber, Tom Alt, and Patrick Rabineau who, with over 40 years of experience, were all my mentors some 36 years ago when I commenced hair transplantation. It is humbling to find that Norman (now 82), George, and Patrick, although well into their 70s, are still in practice.

It was gratifying to hear from Drs. Walter Unger, Bill Reed, Vance Elliot, and others that grafts larger than FUs still have a place in their practice. I suspect that these carefully cut, multi-unit grafts may even be on the verge of a comeback as their cost-effectiveness is better appreciated. Scalp reductions still have a few faithful adherents and Frechet Flaps are alive and well in the capable hands of Drs. Patrick Frechet and Daniel Didocha.

## Awards

Saturday evening was the usual happy occasion with the highlight of the night being the presentation of the new (and long overdue) Distinguished Assistant

Awards to Cheryl Pomerantz and Marilynne Gillespie. We were equally delighted to celebrate Walter Unger's Manfred Lucas Award for his 36 years of service to our profession that included innumerable papers, book chapters, and 4 textbooks. The Golden Follicle Award went to our popular Editor, Dr. Bill Parsley, for his 30 years of service and Dr. Jennifer Martinick, our first female recipient, was voted the Platinum Award for her consistent and ongoing scientific research.

Finally, it must have been gratifying for the meeting organizers and speakers to find an unusually large audience of more than 150 participants still in attendance on Sunday morning to hear the concluding lectures. A great improvement on the 50 or so at some past meetings.

## Grants

We were extremely disappointed to receive only 4 applications for Research Grants this year, the lowest number on record. Does this mean that you have all given up on research or are you all too affluent to bother filling out the application form? As we had \$6,000 to spend, all applicants received some support this year. Please remember to apply for a Research Grant next year. Every application is carefully considered by the Committee.

## Japan Trip

I had a pleasant and instructive trip to Japan in late August to inspect the Nido artificial hair factory and clinics. I did this in the company of local HT surgeon Dr. Kenichiro Imagawa, who has given a number of talks on the complications of artificial hair implants. The Nido management and staff were very friendly and cooperative, and answered all our questions quite openly. The Report of our trip has been passed on to the Ad Hoc Committee on AH Chaired by Dr. Martin Unger. Recommendations will be made to the ISHRS Board as to whether we should continue to permit

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# HAPPENINGS FROM...



## New York, New York

THURSDAY, OCTOBER 16, 2003 • DAVID PEREZ-MEZA, MD MAITLAND, FLORIDA

The “Big Apple”—“The city that never sleeps”—was the perfect location for our 11<sup>th</sup> Annual ISHRS Scientific Meeting.

As David Letterman would say: “Our top 10 list of reasons for holding the meeting in NYC would be: 10—Great plane and hotel deals. 9—Nightlife, shopping, and Broadway plays. 8—Bald cab drivers wearing turbans. 7—Prospective clients on every street. 6—Statue of Liberty. 5—Latest Hollywood-style hairpieces. 4—Cheap Chinese food and Rolexes. 3—Meet Dr. Norman Orentreich. 2—Latest ‘Queer Eye Meets the Straight Guy Hair Techniques.’ And the #1 reason—Best flea market in the world to purchase old second hand punches.”

The day started early for me. As a faculty member of one of the Society’s fellowship programs, I attended the orientation for the ISHRS Fellowship Training Guidelines. This two-hour workshop was attended by 15 physicians interested in starting hair restoration surgery training programs. Dr. Carlos Puig, chairman of the fellowship training program, presented the guidelines and goals of this new program.

In Dr. Robert Haber’s presidential address, he mentioned that there are 1.2 billion people in the world with baldness and 52 million bald men in the U.S., with only 3% of those seeking some type of treatment. He pointed out that there is not a “unique technique,” but that there are different ways to treat patients. He emphasized the importance of *honesty and modesty*, and presented humorous skits of situations in hair restoration Hollywood style (video)!

Dr. Russell Knudsen pointed out that with the evolution of medicine we have several paradigms in hair restoration surgery, but “what is theory and what is reality?” Donor dominance (Orentreich, 1959)—Theory: Donor hair retains its characteristics and is unaffected by the

recipient site. Reality: Recipient sites influence growth rates of transplanted hairs (Hwang, 2002). He advised us to keep our debates scientific and rigorous, so that we don’t (yet again) prematurely discard a formerly valuable technique before proving the superiority of the “new” paradigm.

The experienced Dr. Richard Shiell spoke about the world of science and medicine, pointing out that we think that we have the full story about some new medication or technique, but we are often only seeing a poor reflection of the truth. As surgeons we need to read more, attend meetings, and take the Boards to be prepared for the future.

Dr. Carlos Puig presented the hypothesis that the hair restoration industry is on the cusp of real maturation and substantial market expansion. He pointed out that for most of the last 30 years the industry has stalled while serving less than 2% of the potential market. He proposed that in every instance there is a relationship between product reliability and expansion of the market. He suggested that the members of our profession work together to provide the market place with accurate information and reliable results from each and every hair restoration surgeon.

### Achieving Density and Avoiding Poor Growth (Masters’ Panel)

Dr. Bobby Limmer noted the importance of having experienced assistants on our team, keeping the grafts hydrated, and placing the grafts in the recipient area with minimal trauma. He pointed out that 20–25 grafts/cm<sup>2</sup> can give good density, and the coverage of the frontal central zone is critical to camouflage any transparency in the hairline.

Dr. Walter Unger uses both the FUT and the “combination” approach of FUs and multi-FU grafts in his patients to

create the appearance of density. He recommends that 20–25 FUs/cm<sup>2</sup> be the limit of density and uses an 18-gauge needle for most of his sites. He feels that increasing the grafts/cm<sup>2</sup> would result in lower hair survival rates. What is important is not knowing how many hairs you transplant, but knowing how many survive.

Dr. David Seager enumerated the three principles that he considers most important: keeping the grafts moist, making recipient sites appropriate in size, and using the correct technique in dissecting the grafts.

In the opinion of Dr. Ron Shapiro, the most important aspects to achieving good density and avoiding poor growth are slivering with lateral tension under magnification; atraumatic placement of the grafts—matching graft size to the incision; and the aesthetic importance of density in the “frontal core” area.

Dr. Michael Beehner presumed that the previous speakers discussed the importance of the assistants and care of the grafts (he was correct). He spoke about the importance of including “combination grafts” in the transplant plan along with FUs. He noted that research to date shows the highest percentage survival rates in minigrafts, whereas that reported for FUs has varied greatly, but has been less than with the slightly larger grafts. He recommends finasteride to all his patients to optimize the appearance of the surgical outcome years down the road.

Our last speaker in this panel, Dr. Bill Parsley, gave us his three practical tips: Having the proper depth and diameter of recipient sites is critical, avoiding damage to the supra-galeal vascular plexus. Be patient and flexible during the surgery, especially when the tissue and grafts present difficulties (white hair, mushy dermis, etc.). Sometimes we have to try different site-creation

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## HAPPENINGS CONT....

instruments to get better results in a given patient. He also recommended creating the recipient sites carefully to avoid transection of existing hairs, especially with current megasessions of 2,000–4,000 or more grafts.

### Alopecia Reduction and Flaps

Dr. Patrick Frechet mentioned how the eight major issues related to alopecia removal and scalp flaps have now been solved in order to obtain a predictable safe, aesthetic, and permanent result. Dr. Shelly Kabaker spoke about the pros and cons of expanders and the advancement of skin flaps to help in lowering high hairlines in female patients. Such surgery normally saves the patient money and results are obtained sooner and in fewer sessions.

### Hair Research

Man has been on earth for millions of years, and baldness has always been part of our existence. We can clone sheep, rabbits, etc. What about hair and baldness?

Dr. Conradus Gho from the Netherlands spoke about several of his studies, which show that follicular stem cells derived from plucked hairs can be cultured. He discussed the pros and cons of the technique, but reported that so far the results have not been satisfactory.

The featured speaker; Dr. Angela Christiano, a world-renowned researcher, gave us an update on hair follicle research (a detailed write-up will be included in a forthcoming issue).

### Cell Therapy

Cellular therapy can be defined as the in vivo use of autologous, allogenic, or xenogenic cells for the prevention, treatment, or attenuation of different diseases. Like all new and emerging technologies, cell therapy has raised many hopes for the treatment of alopecia. The complexity and cost of these therapies are the future challenge.

Dr. Walter Unger noted studies on cell therapy in animals and humans, discussing many variables and explain-

ing that it is not easy to grow hair. The challenge for the future is the cost and finding sponsorship.

In his talk, "From the Laboratory to the Clinic," Dr. Bessam Farjo of Manchester, England, spoke about a clinical human trial on an "autologous hair regeneration product" called TrichoCyte. The principle is as follows: Cells from the patient's hair follicle dermal papillae are grown in culture and then transplanted back in the same patient's scalp, where they induce the formation of a new hair follicle. He pointed out the difficulties and complexity associated in starting such a trial, which is now in the early stages.

*"Promises, promises, and promises"* were the words stated by Dr. Ken Washenik in his lecture on cell therapy. Although research in this area and interest in its promise has blossomed recently, he emphasized that this idea has existed in scientific literature for decades and in the hair transplant literature for more than a decade. The challenges appear to be focused on hair follicle neogenesis.

Dr. Jung-Chul Kim from South Korea presented his study to identify the genes that can distinguish dermal papilla cells from the closely related dermal fibroblasts using DNA microarray. He found around 5,000 genes and mentioned that dermal papilla cells can act as hair and also specialize as wound healing cells.

### The Cutting Edge I-II

In this session, Dr. Krugluger mentioned the improvements in storage solutions for hair follicle micrografts to reduce the apoptotic cell death, increasing hair survival and enhancing the clinical outcome of micrograft transplantation.

Ischemia-Reperfusion Injury (IRI) was discussed by Dr. Jerry Cooley, especially as it relates to storage solutions for grafts. He first presented his study showing that implanted grafts experience free radical injury (IRI). He then presented data from a recently completed study in seven patients looking at whether IRI can be prevented. He compared solutions for graft storage, normal saline control versus Hypothermosol (which contains

antioxidants), and found that the latter was associated with a 47% decrease in IRI damage. Dr. Cooley plans to study whether grafts stored in this solution have earlier, fuller, or more consistent growth.

Dr. Jung-Chul Kim next reported his results concerning the factors that affect graft survival. One of the factors is the use of multi-bladed scalpels that increase transection; others are crushing, squeezing, and bending the grafts; letting the grafts dry out; "out-of-body" time (longer time = less survival); temperature; and the use of hydrogen peroxide that has been controversial.

Dr. William Rassman and Robert True discussed different aspects of the follicular unit extraction.

Dr. James Harris presented the new term of Hair Volume Index (HVI) and its correlation to subjective visual hair density. He uses the hair shaft diameter (HSD) and number of hairs per cm<sup>2</sup> as parameters to obtain the HVI. Several patients with subjective evaluations of thin, medium, and dense hair were evaluated. He concluded that HVI less than 20/cm<sup>2</sup> gives a thin appearance, 30–40 moderate, and more than 60 gives a dense appearance.

I (David Perez) presented an evaluation of the hair shaft diameter (HSD), both before and one year after hair transplantation. Twenty patients were included and the digital micrometer was used for the hair shaft measurements. The results showed an average of 79.5 microns before and 84.1 microns one year after transplantation. A 10–18% variation was found in the diameters at three different areas of the hair shaft. It was concluded that there is a minimal HSD variation before and after transplantation, and that difficulties exist in measuring HSD in individual hairs. A better method of measurement is needed.

Dr. William Reed presented the frequency of telogen in the donor scalp and its implications. Two hundred hair follicles from 12 patients were photographed and assessed to determine the frequency of telogen hairs. He found less than the expected 10–15% telogen hairs, and concluded that the missing percentage represented invisible "exogen" hairs.

Dr. Tania Pauls presented the practical Mayer-Pauls Scalp Elasticity Scale in a study of 127 patients. She mentioned that the elasticity of the scalp influences the upper limits of donor tissue that can be safely excised with minimal scarring.

The physics aspect and computer simulation of scalp blood supply were

presented by Dr. Arthur Tykocinski. He pointed out that for greater survival rates in FUT, small incisions should be made, keeping incision direction the same and preserving the deep vascular bundle.

Congratulations to our Program Chair, Dr. Jerry Cooley, and Executive

Director, Victoria Ceh—both did a great job. After everything is over and done, I slowly begin to assimilate our New York mental makeover in extreme hair restoration. I am ready along with all of you for the Vancouver Hairtrix reloaded. I hope I haven't been "Lost in Translation."



## FRIDAY, OCTOBER 17, 2003 • BESSAM FARJO, MD MANCHESTER, UNITED KINGDOM

The second day started with a "Back to Basics" session. Dr. Ivan Cohen addressed the problems when a woman's hair loss can masquerade as AGA. Differential diagnoses include telogen effluvium, trichotillomania, alopecia areata, and lichen planopilaris. He suggested a biopsy followed by a year of inactive disease before considering a transplant. Test grafting would also be a good idea. Another entity confused with AGA is Fibrosing Alopecia in a Pattern Distribution (FADP). This scarring alopecia was discussed by Dr. Bernard Nusbaum highlighting its similar pattern and histological findings to AGA.

Dr. Ken Washenik reported on the Prostate Cancer Prevention Trial using finasteride that included 18,000 men over the age of 55 with half given 5mg daily finasteride and the other half given placebo. There was a 25% reduction in the prevalence of prostate cancer, but of the ones who got cancer, 10% were of the higher grade. Dr. Washenik also reported on a study using combined finasteride and minoxidil therapy. Using global photography but no hair counts, there was a statistically significant advantage in using both drugs together.

Dr. Julianne Imperato-McGinlay gave a fascinating account of her involvement in identifying the syndrome of 5 alpha reductase type 2 deficiency in a Dominican Republic community. This consequently led to the understanding of the role of this enzyme in the body. Dr. Paul McAndrews emphasized the important role of medical therapy for hair loss by comparing it to using toothpaste to prevent tooth decay! Dr. Valerie Callender shared her experience in transplanting African American women

as an option for the treatment of traction alopecia and central centrifugal scarring alopecia (CCSA). Adjuncts for treatment include camouflage, medical treatments, and, where indicated, topical or intralesional corticosteroids. Her tips for keloid prevention included doing a test HT if CCSA is diagnosed, using corticosteroids and Bacitracin on day 1 of HT and corticosteroids for the donor site on day 14.

Dr. Matt Leavitt presented the findings of a study on the effect of finasteride before, during, and post transplantation. Although there was a statistically significant increase in hair counts, this was thought to be likely in decreased telogen of the non-transplanted hairs. Dr. Martin Unger reported on the "lasercomb" with what appears to be amazing results showing 100% stabilization of hair loss in both men and women in a Canadian study.

Highlights of the session on practical tips included Dr. Paul Rose's presentation of his study comparing complete microscopic dissection versus only using the microscope for the slivering part with simple magnification and back-lighting for the FU separation. He concluded that total use of the microscope does not seem to offer a significant difference in terms of the quality of the FUs. Dr. Sungjoo Hwang presented his 20-month results of the recipient dominance study. He used different parts of his body as recipient sites and concluded that survival rate is dependant on skin thickness and vascularity, and some new hair growth was observed 16 months after HT. Hair shaft diameter was not affected.

Dr. Cam Simmons reminded us that supraorbital and supratrochlear nerve blocks can still be a valuable adjunct to

scalp anesthesia. He demonstrated this with a study he conducted with Dr. David Seager. Dr. Marc Avram presented his 8-month experience with the Syris polarized magnifier on the recipient scalp. Among the benefits are better vision, less heat, and less damage to existing hair. Dr. David Perez-Meza reported on a study of 40 patients using 4/0 Vicryl Rapide fast absorbing suture for closing the donor with excellent results, demonstrating less tissue reaction than others. I have been using this suture for a while now and have been very happy with it. More recently I switched to 5/0 Vicryl Rapide on most patients with no deep sutures. Dr. Jerzy Kolasinski claimed the crown of fastest hair man in the west (and the east!) with his "four-hands-stick-and-place technique." A variation of the original Uebel technique, it takes him only 1.5–2 hours to do 1,000 grafts and up to 4 hours for 2,000 grafts! Dr. Dow Stough suggested keeping your patient comfortable with adequate hydration, snacks, and periodical mobilization of the patient.

The afternoon session began with papers on complications, a good learning experience for both beginners and experienced surgeons in methods of dealing with some common and not so common problems associated with hair restoration surgery. Dr. Tony Ruston from Brazil presented two cases of post-operative recipient area necrosis in heavy smokers. They also developed hair loss above the donor scar. He eventually excised the necrotic scalp and treated the donor area with Minoxidil. Two cases of AV fistula and pseudoaneurysm were presented by Dr. Nicolas Lusivic. Each presented as pulsatile mass and treated by ligation

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## MESSAGE FROM THE PROGRAM CHAIR



Dear ISHRS Members and Colleagues:

I want to remind everyone that next year's Annual Meeting in Vancouver, BC, Canada is three months earlier: **August 11–15, 2004**. Vancouver is a beautiful city, and the theme is fresh air and fresh ideas in hair restoration. While the New York meeting is still fresh in your mind, please e-mail or call me with any ideas or suggestions for next year's meeting.

The Call for Abstracts will be sent out in November. As we are losing three months of preparation time, it is essential not to delay or procrastinate. Some of the preliminary feedback from New York included a request for more audience participation in the form of Q&A sessions and panel discussions on controversial topics with the leading innovators in our field. The Beginner and Advanced Courses were well attended, and are a great learning opportunity for our surgical assistants. I am planning more hands-on and one-on-one interactions via breakout workshops and the "breakfast with the experts." I would also encourage more video movie inserts to reinforce presentations demonstrating surgical techniques.

On a more personal note, Vancouver and the Pacific Northwest is a scenic area boasting beautiful parks, excellent restaurants and shopping, and many outdoor activities including fishing and hiking. Alaskan cruises and tours are not far away, and this is an excellent opportunity to incorporate a family vacation into this wonderful educational experience.

Please e-mail me at [esehairmd@verizon.net](mailto:esehairmd@verizon.net) or call my cell at 757-748-8040. Let's make Vancouver a wonderful educational experience.

With warmest regards,

*Edwin S. Epstein, MD*

*Richmond, Virginia*

Chair, 2004 Annual Scientific Meeting Committee

**Call for Abstracts  
submission deadline:  
February 1, 2004**

### 2004 Annual Scientific Meeting Committee

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*Fresh air and fresh ideas in Hair Restoration*

# VANCOUVER

**International Society of Hair Restoration Surgery**

12<sup>th</sup> Annual Scientific Meeting

August 11–15, 2004

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