FUT Fights Back

In my recent travels, I have seen the best hair transplant results in my 38 years of hair transplant experience. From a technique that many consider obsolete! Drs. Damkerng Pathomvanich and Jerry Wong present their FUT expertise and results as the lead article for this edition. Comments from other experts, for and against FUT, follow. I’m looking forward to seeing equally impressive FUE results. —MM

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In reality, the patient comes to see the doctor just to have his hair loss restored to achieve a result that is as dense as possible, as natural as possible, and, of course, in one go. FUT has stood the test of time with good results and minimal donor scar in the majority of cases. See the before and after photos in Figure 1. However, the technique of donor harvesting today has swung to what is advertised as scarless and painless surgery of follicular unit extraction (FUE) either by manual, power punch, or robot. I believe that no scar means no hair is extracted! There has to be scarring of some nature.

With experience, some FUE surgeons are now able to extract large quantity of grafts, some exceeding 3,000 to match FUT numbers. However, we need to see more good results with good growth and need to see less diffuse thinning from over harvesting the donor area. To me, diffuse thinning after excessive FUE is far worse than a strip scar, since the diffuse thinning from FUE looks like a disease of the scalp and cannot be well camouflaged. The FUT linear scar, even a wide one, still can be hidden by the hair bangs above the scar.

In my opinion, in FUT we use all the hair in the entire strip that is harvested. The grafts that are microscopically dissected contain all supporting tissues whether they are vital to hair growth or not, but it certainly helps to prevent desiccation and trauma during insertion. The grafts taken via FUT can be dissected into any size graft that the surgeon needs (e.g., 1-2 follicle unit grafts). The graft loss from the entire process of harvesting and cutting with open technique and high magnification loupe should be 1% more or less; my last report 15 years ago was 1.98% without using magnification.1 My curiosity is how the blind technique with FUE reported a very low transection rate at 2-3% (I’m sure this would have been checked under microscopy), in good hands of course. However, there can be trauma to the grafts during extraction by using forceps, and the extracted grafts are naked, which may be a concern during graft insertion and then their survival. FUT reports on graft survival are at about 90%.2 Is the FUE growth rate getting close to FUT?

FUT harvesting can ensure that all hair grafts are taken at the permanent zone. With appropriate checking of scalp laxity by Mayer,3 Laser lax device,4 and Rassman’s Laxometer,5 the surgeon is able to excise a strip of appropriate width with more confidence. The surgeon should be careful and skillful to minimize transection during harvesting and to avoid hematoma and desiccation. If the wound is approximated with minimal tension using trichophytic closure and proper alignment of the hair direction, the scar will be very small at 1-2mm 90% of the time. In FUE harvesting, on the other hand, if the grafts are extracted either too high or too low, they are not in the safe zone and future graft loss will be experienced in the recipient area and the small round donor scars may be exposed.

In most offices, the cost of FUT to the patient is lower than FUE even though more grafts are involved. With time, this is changing, and in some offices the prices are the same.

Figure 1. Before and 10 months after hair transplant (FUT); 3,066 grafts (6,732 hairs) with minimal donor scar.