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Hair's the Question*

Sara Wasserbauer, MD, FISHRS Walnut Creek, California, USA drwasserbauer@californiahairsurgeon.com

*The questions presented by the author are not taken from the ABHRS item pool and accordingly will not be found on the ABHRS Certifying Examination.

The FUE technique is an easy column for which to write a set of questions. What is difficult is writing the answers! There are few points of good data on this technique, so much of it is operator and practitioner dependent. That being said, I tried to find some common ground to test everyone on, and I hope you enjoy the results!



FUE Technique

- 1. Assuming no trimming, which of the following is commonly accepted as producing the chubbiest (i.e., those with the most perifollicular tissue) FUE grafts?
 - A. 1.0mm blunt punch
 - B. 0.7mm sharp punch
 - C. Any sized oscillating punch
 - D. ARTAS robotic extraction with 0.9mm punch
- 2. Which of the following is commonly accepted as producing the smallest FUE scars?
 - A. 0.7mm dull punch
 - B. 0.9mm sharp punch
 - C. 1.0mm dull punch
 - D. 1.0mm sharp punch
- 3. Which of the following devices is commonly accepted as producing the lowest FUE graft transection rate?
 - A. ARTAS robotic extraction
 - B. NeoGraft vacuum-assisted extraction
 - C. Cole Vortex and Harris Safe Scribe (HSC)
 - D. None of the above
- 4. The earliest published FUE on record was made by:
 - A. Dr. Shoji Okuda, 1939
 - B. Dr. Norman Orentreich, 1952
 - C. Dr. Ray Woods, 1988
 - D. Drs. William Rassman and Robert Bernstein, 2002
- 5. What is the average amount of time that an FUE graft can stay outside the body before needing to be transplanted in order to survive?
 - A. 1-2 hours
 - B. 1-2 days
 - C. 6-8 hours
 - D. Grafts should be transplanted back into the scalp immediately after harvesting (i.e., simultaneously).

- 6. Which of the following is a major advantage of the FUE technique?
 - A. There is more scarring in terms of area (cm²).
 - B. There is less scarring in terms of visibility.
 - C. Body hair grows better when harvested with the FUE technique.
 - D. Graft production is faster than with FUT.
- 7. Which of the following is a major disadvantage of the FUE technique as compared with the traditional "strip" method?
 - A. There is more scarring in terms of area (cm²).
 - B. There is less scarring in terms of visibility.
 - C. Body hair can be harvested more easily.
 - D. Prolonged donor area pain is common.
- 8. How do FUE grafts differ from grafts obtained using the traditional "strip" method?
 - A. They are obtained painlessly and leave no scarring in the donor area.
 - B. They are no different and have exactly the same growth rates.
 - C. They can be more delicate due to the propensity to have less perifollicular tissue.
 - D. They tend to have fewer hairs per graft and thus must be transplanted immediately after harvesting.

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Answers

- 1. **A.** Obviously, this is an area of open debate since if you ask two hair surgeons the same question you will get at least three different answers. However, what you CAN get hair surgeons to agree on is that more perifollicular tissue = better graft survival rates. It is well documented that chubbier grafts survive better. Therefore, this question is not about the blunt/sharp debate, or even which extraction machine is superior, it is simply about punch size. The larger the punch used, the higher the chance of getting more perifollicular tissue, which equals chubbier grafts (as long as your staff is not trimming them that is!).
- 2. A. This is another area of open debate (i.e., sharp versus blunt versus harvesting follicular groupings, versus deliberate partial transection to leave some of the follicle within the scalp and on and on) with well-respected advocates on all sides, so the point is to focus on our common ground. Despite these disagreements, it is generally accepted that the smaller the punch size, the higher the chance of having a smaller scar no matter the system you are using, hence the drive toward smaller and smaller punches. Incidentally, I have never heard of an incidence of keloid or hypertrophic scar formation after an FUE, but if anyone out there HAS, please contact me at drsara@californiahairsurgeon.com.
- 3. **D.** I am going with D here since no head-to-head trials have ever been conducted and the intra-operator variability complicates the issue. There are even many who claim that the transection rate does not matter, and even more who do not track the transection rate regularly in each surgery and with each graft. For the record, you can award yourself a half point for answering C, since:
 - ARTAS never published their transection rate from their initial FDA trials although they have presented <8%, and since they use a blunt punch system they claim to have fewer transections than any sharp punch system.³
 - NeoGraft likewise did not publish or advertise a transection rate other than to say "extremely low" on their website.⁴

- The Cole device lists the transection rate as "<2.38%"⁵ while the Harris SAFE Scribe lists "2.8%."⁶
- Regardless of which device or technique you use, in general, higher transection rates are associated with lower graft growth rates.
- 4. **A.** After reading through many hair transplantation websites, I think I may be the only physician who did NOT invent FUE. A is correct.⁷
- 5. C. C is correct assuming FUE grafts are substantially similar to grafts obtained using the traditional "strip" method. The argument is often made that since FUE grafts often have less protective involuting fat, this time may be shorter, but no large head-to-head study currently exists comparing graft survival rates in a full FUE surgery with those from a full "strip" surgery or varying out of body times as was initially done with grafts obtained from a traditional strip. Smaller studies have been done, most notably by Dr. Michael Beehner (presented at the 2015 ISHRS annual meeting in Chicago), but these have yet to be repeated.
- 6. **B**

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- 7. A
- 8. **C.** Keeping them wet, handling them less (suction? no one really has answered that question), and transplanting them as soon as possible all seem to help, exactly as with grafts obtained using the traditional "strip" method.

References

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- Article in ISHRS's Hair Transplant Forum International (1 point per article. 10 points maximum.)

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- Director of an ISHRS Fellowship Training Program (8 points per 5 years. 16 points maximum.)
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- Chairman of ISHRS Annual Meeting or any Global Council society's annual meeting, or ISHRS Regional Workshop (3 points per meeting. 6 points maximum.)
- Editor of Forum or Peer-Reviewed Journal or Textbook (3 points per year. 9 points maximum.)

Maximum score of 139 potential points. Must score at least 50 points.

Review of the Literature

Jeff Donovan, MD, PhD, FISHRS Toronto, Ontario, Canada donovan.jeffrey@gmail.com



How common are musculoskeletal problems among hair transplant surgeons?

Williams, K., et al. Ergonomics in hair restoration surgeons. J Cosmet Dermatol. 2016; 15:66-71.

Musculoskeletal concerns among hair restoration surgeons have not been the focus of significant study.

To explore the incidence, nature, and extent of possible injuries, a survey was e-mailed to 100 hair restoration surgeons practicing in the field more than 5 years. Of those, 38 surgeons completed the study, and most who did were male between 50-69 years of age. Half (50%) of the respondents reported musculoskeletal issues during or after the procedure, including both pain and fatigue. The reported frequency of pain and fatigue was higher for FUE than strip procedures, and lasted longer during FUE than strip procedures. Sixty-nine percent (69%) of surgeons reported moderate/severe pain during FUE procedures, compared

to 35% of surgeons during strip excision procedures. Seventy-five (75%) percent of surgeons reported moderate/severe pain immediately after FUE procedures compared to 29% of surgeons immediately after strip excision procedures. Moreover, one-third of hair restoration surgeons had pain, fatigue, or discomfort last more than 12 hours after a procedure. Only 30% of surgeons used any type of ergonomic support such as an ergonomic chair.

Comment: This is an important study that quantifies what we have long known: hair restoration surgeons are very prone to musculoskeletal injury. Given the high incidence of reported musculoskeletal issues, more attention is needed to assist hair restoration surgeons in reducing injury.



Are we transecting more than we realize? "Hidden transection" during FUE.

Kim, D., et al. Hidden Transection of Follicular Unit Extraction in Donor Site. Dermatol Surg. 2016; 42:485-488.

Efforts to reduce hair follicle transection rates remain an important consideration for the FUE surgeon. Although most focus has been on the transection of the extracted grafts, little attention has been given to transection occurring in follicles surrounding the punched hole (termed "hidden transection" in this study).

The authors compared the rate of hidden transection among 10 expert FUE surgeons and 8 beginner FUE surgeons following removing of 8 follicular units from various 1cm study boxes. Interestingly, rates of hidden transection differed according to

skill, being 2% for the expert and 8% for the beginner. The vast majority of hidden transections (88%) were noted along the superior side of punch sites.

Comment: The authors propose the concept of "hidden transection" and propose that a more accurate and complete depiction of transection must take into account the transection of both the extracted grafts and grafts left in the skin. Hidden transection may impact FUE donor site healing and post-operative density of remaining grafts. This is an important area for further study.



Body hair transplants to the scalp: How happy are our patients?

Umar, S. Body hair transplant by follicular unit extraction: My experience with 122 patients. *Aesthetic Surg J.* 2016. DOI: 10.1093/asj/sjw089.

Body hair transplantation is increasingly popular, especially for patients with limited or depleted scalp donor hair. Chest, beard, and extremity body hair provide additional means of building scalp density. Large-scale studies on graft survival and outcomes have not been completed.

Umar recently reported results of a survey he provided 122 patients who underwent body hair to scalp transplants. Most of Umar's patient's had hair moved from the beard, and some had hair from the chest, arms, pubic area, and axillae. Recipient sites included the hairline, previous strip scars, and the crown. The mean graft count was 4,346. Using a 11-point rating scale

(Likert scale scored 0 to 10), Umar showed that patients were generally quite satisfied with the procedure, given a score of 7.8 out of a maximum 10 for healing, hair growth in the recipient area, and overall satisfaction

Comment: The hair restoration community has a shortage of information pertaining to body hair transplantation. The findings in this study show that not only can healing and hair growth be quite high, but so can patient satisfaction. It is important to note that graft numbers were quite high in the study, and some patients had multiple surgeries.

Message from the FUE Research Committee Chair

James A. Harris, MD, FISHRS Greenwood Village, Colorado, USA harris@hsccolorado.com



An Invitation from the Committee

The FUE Research Subcommittee on FUE Literature led by Dr. Aditya Gupta, has completed a comprehensive FUE literature review and is in the process of finalizing the annotated bibliography. Once completed it will be available to all ISHRS members in the "Members Only" section of the ISHRS website and will be published in an upcoming issue of the *Hair Transplant Forum International*. It will be updated on an ongoing basis as FUE literature becomes available.



I would again like to remind any ISHRS member that is interested in writing a protocol for a multi-center FUE study contact me at jharris@hsccolorado.com or Ms. Kimberly Miller at kmiller@ishrs.org for further information. The FUE Research Committee will provide general guidance, study design evaluation, IRB advice, support with study organization, and help match potential investigators to available studies.•

Invitation to ISHRS Physician Members: Participate as Investigational Site

The ISHRS FUE Research Committee chaired by James A. Harris, MD, and the FUE Studies Subcommittee chaired by Ken Williams, DO, are seeking the assistance of the ISHRS hair restoration surgeon community. The committee requests physician participants in the following studies:

FUE vs. Strip Survival Lead Investigator: James A. Harris, MD, FISHRS

The purpose of the study is to compare survival rate of follicles by FUE and strip excision.

Implanter vs. Forceps
Lead Investigator: Parsa Mohebi, MD, FISHRS

The purpose of this study is to compare the survival rate of FUE grafts implanted by implanter in comparison to FUE grafts implanted by forceps.

Comparison of Out of Body Time of Grafts with the Overall Survival and Growth Rates in FUE Lead Investigator: Kapil Dua, MBBS, MS

The intent of this study is to compare the out of body time duration of grafts with the hair survival and the growth rate of the grafts at 1, 3, 6, and 12 months after the transplant.

The FUE Research Committee is seeking physicians with strong experience in FUE graft harvesting and can enroll at least 10 patients into the study protocol over a 12-month period. Accepted investigators will be listed as coauthors in the final publication. Hair surgeons wishing to participate will be screened for their FUE experience and motivation. We strongly encourage our members with FUE experience to take part in this study since clinical data is critical to identifying optimal methods and tools for performing FUE donor harvesting. This opportunity may assist you in gaining experience in what it takes to develop and implement a study protocol, too!

If you are interested in becoming an investigational site and would like to review the study protocols, please contact Dr. Ken Williams at drwilliams@iimcs.org.



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Dr. Eduardo López Bran



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Dr. Glenn Charles

Dr. Mark Bishara



"My patients are enthusiastic about having me use the ARTAS robot as a tool to perform their hair transplant. Our results have been excellent."

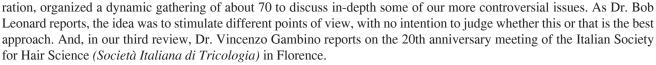
The ARTAS® System from Restoration Robotics is indicated for harvesting hair follicles from the scalp in men diagnosed with androgenic alopecia (male pattern hair loss) who have black or brown straight hair. The ARTAS System is intended to assist physicians in identifying and extracting hair follicular units from the scalp during hair transplantation. The ARTAS System is also indicated for creating recipient sites for subsequent manual implantation of the harvested follicles. The ARTAS System is also indicated for creating recipient sites for subsequent manual implantation of the harvested follicles.

Meetings and Studies

Henrique N. Radwanski, MD Rio de Janeiro, Brazil hnradwanski@hotmail.com

Small meetings allow for great learning experiences. The audience is closer to the speakers, the atmosphere is more relaxed, and informal exchanges over drinks are the glue that mixes everything together. If there is a beach setting, a magnificent Museum of Art, or a wonderful view of the Bosphorus, then the better.

In this issue, Dr. Sharon Keene gives an important alert as to how the FUE market was plundered by non-medical clinics in her review of the Istanbul Workshop, which was well attended and organized by the local experts together with the ISHRS. In Fortaleza, the ABCRC, the Brazilian society of Hair Resto-





Review of ISHRS FUE Workshop: Istanbul 2016 Istanbul, Turkey • April 1-3, 2016

Sharon A. Keene, MD, FISHRS Tucson, Arizona, USA drkeene@hairrestore.com

Excellent Learning Experience for Doctors; Warning for Patients

This year the ISHRS co-sponsored an FUE workshop in Istanbul, Turkey, under the auspices of Tayfun Oguzoglu and several

of our Turkish ISHRS colleagues (Ali Emre Karadeniz, Kayihan Sahinoglu, Ekrem Civas) who served as lecturers and surgical instructors. Along with local Turkish physicians, doctors attended the workshop from North America, Europe, Australia and Asia. The small group allowed for an intimate learning experience, highlighting FUE techniques that minimize transection and maximize efficiency.

In addition to the surgeries, there were didactic lectures provided by the Turkish faculty and invited guest lecturers (Drs. Bessam and Nilofer Farjo (UK), Ron Shapiro, and myself (USA)), covering a broad range of topics from PRP to holding solutions, medical ethics in hair restoration, and hairline design. Despite political turmoil in that area of the world, faculty and attendees were secure and treated to wonderful and engaging hospitality by the host practice. There was an enticing and delicious dinner at a restaurant featuring local cuisine, with a wonderful view of the Bosporus Sea. At the conclusion of the workshop, there was an energetic gala celebration that included vibrant music and belly dancing for all! Learning during the day and celebrating at night is a recipe for great education and great fun!

While attendees received excellent education on the techniques of follicular unit extraction, many of us were also warned about a dangerous paradigm that has burgeoned in Turkey in recent years. Our brave colleagues shared their efforts to instruct and caution the public about the unlicensed practice of medicine that is occurring in Turkey in the field of hair restoration surgery.

In an effort to impose strict educational and practice criteria on the field, the government restricted the practice of hair restoration surgery to plastic surgeons, dermatologists and a few doctors who had a "special certification." It also required that all



Istanbul faculty

procedures be performed in a hospital setting, thus closing down many office practices. The unfortunate result was the emergence of a black market in hair restoration where assistants began to perform the surgery, either with a doctor who presided in name only at a non-hospital clinic, or in many cases today by no doctor at all. Patients are garnered by marketing businesses that will refer them to

contracted offices, offering "one low price" for as many grafts as can be taken. This encourages patients to use as much of their donor area as possible, whether they need it or not. It also encourages unlicensed, would-be surgeons to make as many holes as possible, as fast as possible—creating scarring, but no oversight to ensure that hair is extracted intact or that it is successfully transplanted. Patients who are enticed into this paradigm have no recourse, and may find that saving that money may cost them far more in the way of lost donor hair, scarring, and failed grafts.

We should applaud our colleagues for their determination to continue to offer high quality of care to hair restoration patients in Turkey, even as they are immersed in a battle against black market activity. ISHRS members can show their support by attending the ISRHS-sponsored Istanbul workshop next year, and letting the government see that real education is necessary and important for maintaining the safety and quality of hair restoration surgery.

Review of the 20th Anniversary of the Italian Society for Hair Science April 16-17, 2016 • Florence, Italy

Vincenzo Gambino, MD, FISHRS Milan, Italy vincenzogambino@vincenzogambino.com

On April 17, surrounded by the spectacular scenery of the city of Florence on one of the most beautiful spring days, the Italian Society for Hair Science (Società Italiana di Tricologia, or S.I.Tri.) celebrated its 20th anniversary. In honor of this special occasion, a two-day weekend event was held. Beginning on Saturday, April 16, the event kicked off with a guided tour of the Uffizi Gallery and Vasari Corridor (opened exclusively for us)—

two of the most important museums in the world. That evening the celebration continued with a Gala Dinner where important

exchanges were made and awards were given in recognition of progress made in the field by many of the illustrious colleagues present. The close-knit founding members of the Society concluded the evening gathered around the cake in an intimate moment at the nucleus of a group that has always worked together towards the same goal.

The Italian Society for Hair Science was founded in 1996 as a scientific, apolitical, non-profit organization whose goal

was to see that Trichology be considered a scientific branch of Polispecialist Medicine as well as, in a more general sense, a branch of Humanistic Culture.

S.I.Tri. as an organization has grown in recent years, promoting scientific and formative research. Confirmation of the Society's

development was acknowledged by the numerous attendees of this conference, a basis for pride and satisfaction for the Society's founding members after 20 years of work and dedication. Among the 250 attendees were doctors, biologists, researchers, pharmacists, and trichologists, many of them renowned colleagues who came from all over the world.

Opening Sunday's conference were Drs. Daniele Campo and Vincenzo Gambino who spoke of the history of

trichology and the evolution of hair restoration in the new millennium. In speaking of the history of S.I.Tri, they also paid homage to Dr. Andrea Marliani as the founding president, to the founding members, and to all who have contributed to the growth of the Society since its inception. The day was divided into various themes.

Hair Restoration Surgery

During this segment, presentations were given by Dr. Piero Tesauro, followed by our Japanese colleague, Dr. Kuniyoshi Yagyu, who is the president of the ISHRS, our Polish colleague, Dr. Marwan Saifi, and our British colleague, Dr. Bessam Farjo.

Dr. Tesauro drew attention to the possibility of a hair transplant

Dr. Tesauro drew attention to the possibility of a hair transplant "expiration date"—that with age, a portion of the transplanted



hair may be lost—an aspect that is rarely discussed. Identified as a possible solution was the creation of a team of professionals: the hair restoration surgeon and a dermatologist who work together to maintain long-term results. To establish this protocol, it will be necessary to work with colleagues to construct a uniform approach, creating far-sighted solutions.

Dr. Yagyu presented his high-density transplant procedure in cases of secondary scarring alopecia.

Explaining the existing relationship between trophism of the scarred tissue and hair transplant density, in his experience, some

cases were able to be resolved in one session, whereas other cases required more prudently scheduled multiple sessions.

Dr. Saifi underlined the importance of deciding case per case which surgical strategy was most appropriate among the range of available options, and involving the patient so they have realistic expectations.

Dr. Farjo presented a video of the FUE ARTAS Robotic System discussing its advantages and the possibility of its creat-

ing recipient sites and placing grafts.



Laser Therapy

Dr. Fiorella Bini spoke of LED photobiostimulation and its benefit for the treatment of alopecia areata, AGA, scarring alo-

pecia (alone or in combination with PRP and hair transplantation).

Following this presentation, Dr. Soresina described with the role of the LLLT in the treatment of AGA. Beginning with specific bibliographic research, Dr. Soresina compared the information with the results of clinical cases (with other available therapies), highlighting the encouraging results of this therapy in the improvement of the calibre and quality of the hair.



Effluvium

This part of the conference was opened by Dr. Marcella Guarrera who, together with Prof. Alfredo Rebora, described in 2002 a new phase of the follicular cycle: the Kenogen (*Dermatology*. 2002; 205(2):108-110). For the conference, she chose to highlight the differences between another two phases of the pilaris cycle, the telogen and the exogen, thereby widening the understanding of a common pathology of the hair cycle: the telogen effluvium. Echoing Dr. Guarrera was Dr. Paolo Gigli who spoke about the clinical characteristics and epidemiology of this pathology together with the criteria for the diagnosis and subsequent therapy.

Meeting Reviews from page 171

New Developments in Hair Science

The latest developments in Hair Science were presented by various researchers. Dr. Marta Bertolini (University of Munster, Germany – Laboratory for Trichology Research and Regenerative Medicine) reported on the principle molecular mechanisms (that emerged from *in vitro* studies) involved in the development of alopecia areata. She reported the results of experiments that would prove the VIP (vasoactive intestinal peptide) molecule or those analogous to the VIP molecule to be potential protective agents against the extension of alopecic patches. She also described the cells involved in the immune response to the hair follicle.

The next paper discussed a new therapeutic target for androgenetic alopecia, the WNT receptor, discovered through the research of Prof. Antonella Tosti.

Alopecia, Particular Cases

Numerous specialists in dermatology participated in this part of the conference, touching on various topics, including differential diagnoses of scarring alopecia, inflammatory/unknown alopecia (that could be responsible for a low survival rate of the grafts during a hair transplantation), and female hair loss treatment discussed by the president of the Society, Dr. Gaetano Agostinacchio.

The founding president of S.I.Tri., Dr. Andrea Marliani, presented the case of a 4½-year-old boy with moniletrix.

Scalp Micropigmentation (SMP)

Milena Lardi presented new advances in the development of pigments used in SMP.

The congress ended with a panel of experts taking questions from the attendees.

Review of the ABCRC Controversies Workshop May 13-14, 2016 • Fortaleza, Brazil

Robert T. Leonard, Jr., DO, FISHRS Cranston, Rhode Island, USA drbobleonard@gmail.com

It was an honor and a pleasure to participate in the Brazilian Association of Hair Restoration Surgery (ABCRC) Controversies in Hair Transplantation Workshop held in Fortaleza, Brazil. The hosting local coordinators, Drs. Márcio Crisóstomo and Marília Crisóstomo, organized both a riveting scientific program and a sensational social one in the backdrop of a tropical beach resort.

Controversies...Brazilian style...were passionate and heated coupled with credible scientific facts and opinions on each topic discussed. The workshop began with the Beginners Hands-on Practical Course, which demonstrated the basics of hairline design, donor assessment and harvesting methods, and recipient implantation techniques.

ABCRC President, Dr. José Muricy, opened the congress by welcoming attendees and by introducing Dr. Ken Williams, who reviewed the current and future trends in hair restoration in the United States. The room heated up with the opening salvo of whether it is appropriate to perform surgery on the young patient. Drs. Fernando Basto, Christine Guimarães, Lemos, and Muricy debated the pros and cons of this important controversy.

The next topic was a discussion by Drs. Muricy, Lemos, Muricy-Sanseverino, Leão, and Rogerio Regis on FUT versus FUE. Valid and thought-provoking opinions were put forth by each camp. An interesting presentation by Dr. Henrique Radwanski reviewed how hair transplant education currently is undertaken in Brazil. He also described an ABCRC organized mentorship teaching program in the early stages of development, which sounds like a model that would be excellent for our entire profession.

A panel including Drs. Muricy, Crisóstomo, Leão, and me described the "Case That Changed Our Careers." They were talks that ranged from a frightening medical emergency to educational experiences that guided a doctor into this specialty.

An important topic for all practicing in our field was that of cicatricial alopecia. Talks on how to diagnose it, how to treat it, and whether hair transplant surgery is indicated were presented by Drs. Arthur Tykocinski, Francisco Le Voci, and Guimarães followed by audience examination of live patients. It truly was a fabulous learning experience for all.

A controversial topic in Brazil today is whether a physician should perform hair restoration surgery in a hospital setting (most common) or in an office setting. Drs. Otávio Boaventura, Alan Wells, Basto, and Williams offered their thoughts on this subject. Another controversy surrounded the use of a robotic device in assisting the surgeon in performing surgery. Participating surgeons in this panel were Drs. Carlos Calixto, Tykocinski, Alessandra Juliano, Muricy-Sanseverino, and Williams.

Two hot topics, "Finasteride: Is it safe to prescribe?" and "Post Finasteride Syndrome: Reality or Myth?" were presented and debated by Drs. Leão, Le Voci, Lemos, Tykocinski, Regis, Antonio Ruston, and me. There was a great deal of audience input regarding this medication. The final analysis was that surgeons need to separate the facts versus other information put forth on the Internet about finasteride and to educate their patients about all so that they can make their own decision about taking it or not.

Each member of a surgical planning panel videotaped his or her approach to planning a hairline design, harvest method, and graft estimation on the same patient. During the live discussion, panelists discussed their reasoning for planning as they did with great interaction with the audience.

The conference concluded with a presentation by me titled, "What I Would Have Liked to Have Known 25 Years Earlier and What I Have Learned in My 30-Year-Long Career." I discussed how very fortunate I have been to enter into this specialty by the "alignment of the stars," hard work, great patient care, and by the graces of God.

We all are so very blessed to have a specialty like no other, which provides to all of us education, a good living, a great deal of fun, the ability to travel to wonderful places like Brazil, and to develop lifelong strong friendships with colleagues and their families.





ISHRS Regional Workshop

Hosted by: James A. Harris, MD, FISHRS

You do not want to miss this one-of-a-kind hands-on experience to learn about and try various mechanized tools used for follicular unit extraction (FUE). Compare and contrast popular devices and decide for yourself which tool or tools suit you the best. Sponsored by the International Society of Hair Restoration Surgery.

Clinic sponsor: Hair Sciences Center of Colorado

Target audience: Hair restoration surgeons from beginner to advanced who desire the opportunity to learn about mechanized FUE devices

Learning objectives:

- Understand the basic concepts of donor area management, unique FUE graft qualities, limitations, and complications of FUE, and the basics of body FUE.
- Employ the different methodologies and instrumentation for FUE.
- Discuss the advantages and disadvantages of each type of device.
- Understand the basic aspects of FUE with these devices in order to successfully and safely perform

Faculty and devices: Faculty list to be announced at a later date. The devices to be available are the powered SAFE System, the CDD-Vortex, several motorized sharp punch systems, and the ARTAS System robot. There will also be a hands-on lab with skin tissue models for those attendees who do not have a United States medical license.

Registration: Details are available at www.ishrs.org/content/educational-offerings

Questions: Contact Janiece McCasky at ilmccasky@hsccolorado.com.

Exhibits: Opportunities are available for tabletop exhibits.







SAVE THE DATE!

September 8-11, 2016 St. Louis, Missouri USA

Course Director:
Samuel M. Lam, MD, FACS, FISHRS

Honored Guest:

Skype Lecturer: Francisco Jimenez, MD, FISHRS

Physician Faculty:

Marco N. Barusco, MD Scott A. Boden, MD, FISHRS Vance Elliott, MD, CCFP, FISHRS James A. Harris, MD, FACS, FISHRS Nicole Rogers, MD, FAAD, FISHRS Lawrence E. Samuels, MD, FAAD, AASMS Robert H. True, MD, MPH, FISHRS Ken Williams DO. FISHRS

Assistant Course Director:

Assistant Faculty:

Aileen Ullrich, CMA

8th Annual

Hair Transplant 360 WORKSHOP

Comprehensive Hair Transplant Course & FUE Hands-On Course

- New, Expanded Course Format
- 4 Information Packed Days
- Latest High-Definition Live 3D Lectures and Surgery Dissection
- Extensive, Hands-on Cadaver Workshop with Low Student-to-Faculty Ratio
- New, Fast-Track Stand Alone or Combined Full-Day FUE Course
- ► Hairline Design
- ▶ Donor Harvest/Closure
- ► Recipient Site Creation
- ► Graft Dissection
- ► Graft Placement
- Crown Design
- ► Female Hairline Design
- Temporal Point Design
- **Graft Calculation**
- Marketing
- Consulting
- **Medical Treatment**
- Critical Thinking Day
- **Quality Control**
- FUE







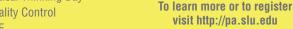




An offering through: Practical Anatomy & Surgical Education Department of Surgery Saint Louis University School of Medicine

n collaboration with





Message from the ISHRS 2016 World Congress Program Chair

Marcelo Pitchon, MD Belo Horizonte, Brazil marcelopitchon@gmail.com

Welcome ISHRS members and future participants of the Las Vegas 24th ISHRS World Congress of Hair Restoration Surgery! As the scientific chairman, following is updated information on the preparation of our most important annual scientific event, which is also by far the main scientific meeting on hair restoration on the planet.

Hair restoration has never been more popular and the medical search for advanced knowledge, information, and learning opportunities to novice doctors has never been so high. One-day courses, small two-day seminars, workshops, and symposia—regional societies and individual countries' meetings have been totally booked around the world. Smaller audiences distributed along the year and around the world compound a busy annual calendar of satellite events in hair restoration in which the solar one is the ISHRS World Congress of Hair Restoration. All roads lead to Las Vegas in 2016. It is the number one scientific meeting every hair restoration professional wants not to miss. It is where the best surgeons in the world present at general sessions and workshop lectures, where the top clinical, non-surgical researchers present the current findings from the most recognized universities, where courses and workshops provide hands-on experience for newcomers and basic-level doctors wanting to become highquality hair restoration surgeons. Intermediate- and advanced-level surgeons always try not to miss even one annual Congress, since it is the only time they can meet and learn from colleagues who perform the most diverse types of surgical methods and techniques available and who put forward the most innovative clinical treatments.

We also offer a fantastic learning experience through our traditional "Coffee with the Experts" session, where you can sit side-by-side with some of the top hair doctors in the world from clinical or surgical backgrounds.

The Las Vegas World Congress will provide a record number of mini-courses and workshops. None of these courses or workshops conflict with the General Session so that you will not have to choose what to miss. And, even better, the most popular workshops will be presented twice—once in the morning, once in the afternoon—so that if you find another workshop that you would like to attend in the morning that conflicts with the most popular ones, you will have the chance to attend this in the afternoon.

The "Implanters" workshop is one that will be duplicated, with one in the morning and one in the afternoon. Other popular topics that were also duplicated include "PRP for Hair Restoration" and "Avoiding Poor Technique, Poor Planning, Poor Growth, and Bad Results," Other workshops include "FUE—Basic Concepts," "FUE—Advanced Topics," "New Devices for FUE," "Beard and Eyebrow Reconstruction and Harvesting," "Medical Management for Male and Female Pattern Hair Loss," "Non-Medical Treatments: The Surgical Assistants Role in LLLT, SMP, Camouflage, PRP, and Medications," "Hairline Design and Recipient Area Planning," and "Patient Management: Comfort on the Day of Surgery."

The mini-courses will take place on Wednesday, which is the day before the General Session, which starts on Thursday. We will have 3 FUE mini-courses and one SMP mini-course (scalp micropigmentation) in the morning and again the same repeated in the afternoon.

One of the highlights of our scientific program, as usual, will be the top-notch Featured Guest Speakers. We first confirmed Dr. Angela Christiano, from Columbia University. Her lecture will be entitled, "Hair Regeneration, JAK Inhibitors, and Genetic Testing." In addition, Dr. Pantelis Rompolas from the University of Pennsylvania will present "Potency and Contribution of Stem



Cells to Follicle Regeneration," including the exhibition of one of the most innovative videos on microscopic migration of stem cells inside the follicle. We have also confirmed our third Guest Speakers, Dr. Aline Donati, co-coordinator of the Hair Clinic of the Dermatology Department at Hospital do Servidor Público Municipal de São Paulo, SP, Brazil. She will present "Frontal Fibrosing Alopecia: An Emerging Epidemic—Clues to an Earlier Diagnosis." We will also have the privilege of having with us Dr. Rodney Sinclair from the University of Melbourne, Australia, who will present "Advancing Our Understanding of the Biology of Androgenetic Alopecia and Changing the Way We Use Minoxidil to Treat It." And finally, we invited Dr. Alan Jacobs, a neuroendocrinologist in private practice in New York, New York, who will present "Post-Finasteride Syndrome and the Neuroendocrine System."

The abstract evaluation for presentation at the General Session is being finalized, and the selected group will be added on our program to our invited speakers' panels on very important current topics to be presented for intense discussion that includes audience participation.

Education has never been so essential to our field. Unluckily, the popularity of hair restoration and the current, relative pseudo-easiness to start performing hair transplantation have provoked an avalanche of weekend courses, clinics, and alleged professionals promoting hair treatments with much less than excellent quality standards.

It took us decades to achieve the technical and artistic excellence we have achieved with state-of-the-art follicular unit transplantation (FUT) and follicular unit extraction (FUE) and the respect of patients and the general public for our results. FUE has opened a fantastic new door in the hair transplantation field, adding numerous important elements to the hair restoration practice. It has also paradoxically created a new menace to our public reputation. The invasion of our field by non-medical practitioners and even medical ones with inadequate background and training has been reducing ethical parameters and elevating patient medical and aesthetic risk throughout the world. The fraudulent promise of a magical procedure with no scars, which also includes the disqualification and denigration of well-established methods, has triggered a cascade of events that range from public seduction and misinformation to medical incompetence that, as a consequence, is causing the start of an autophagic phase because of the increasing incidence of sequelae around the world. It is our own field's responsibility to revert that scenario by bringing as many practitioners as possible to the scientific meetings in order to increase the level of education of every surgeon. And that is one of the most important things we want by making all the necessary efforts to put together an excellent program at an outstanding Congress. Please help us bring your colleagues who have never attended a meeting. Help us promote our Congress to every small area of the world where a hair transplant is being done. It is very important to all of us, and to our field.

Message from the 2016 Surgical Assistants Program Chair

Sara Roberts Manchester, United Kingdom sara@farjo.com

So it's only four months away to the biggest meeting of the year and the Surgical Assistants Program is now in place. As detailed in my past messages, the program will offer something for all. I am particularly excited about the panel of experts sessions where the audience will get the opportunity to engage fully with experienced technicians and be able to get to grips with the more advanced topics of staff training, clinic management, quality and infection control, and dealing with complications that may arise in surgery. This session will be predominately question-

and-answer based, so it's now time for some reflection on your practice and to think about your own learning needs and development. Please come loaded with questions to facilitate a good dis-

cussion and to help create a healthy learning environment for all. Anyone wishing to submit a question ahead of time, please feel welcome to email me at sara@farjo.com.



Message from the 2016 Surgical Assistants Program Vice Chair

Emina Vance Plano, Texas, USA emina@hairtx.com

ISHRS 2016 World Congress Las Vegas—Surgical Assistants Core Skills Workshop

It is well known that in hair restoration surgical assistants do not simply assist but also contribute to the end result. As follows,

it is important to teach assistants the proper judgment in tissue handling and help them become true contributors to the quality of surgery. This workshop offers comprehensive hands-on training designed to build the two core skills necessary for assisting in hair restoration: manual dexterity and critical thinking. The workshop is intended for both novice and experienced assistants who want to take their skills to a new level as well as for the

physicians and ancillary staff who want to focus on quality control.

The workshop program consists of five stations from which four stations focus on hand-eye coordination and proper tissue handling. These four stations address slivering and graft dissection in strip hair transplant, graft trimming, and graft removal in follicular unit extraction, and graft placement in both techniques. The fifth station offers additional learning on how to continue the training or improve one's efficiency.

To teach students the proper ways of handling the tissue, we have assembled a large team of world-class faculty so that each student will receive personal

attention and instant feedback from highly experienced faculty. In addition, to help students learn the most efficient and comfortable ways to handle the tissue, each teaching station is furnished with a sample of instruments and equipment used in graft preparation and placement.

Although there is no ideal type of instrument or single, best way of holding an instrument, there is only one way to handle

tissue without causing damage. Throughout the workshop, students are encouraged to pay attention to the subtle details of their work and how they can affect the end result of a hair transplant. At the conclusion of the workshop, students will participate in a Q&A session specifically designed to promote critical thinking and thereby ensure good quality results.

We are looking forward to seeing you in Las Vegas.



WORKSHOP SUMMARY

Sign-Up Today

when registering for the

2016 ISHRS World Congress!

Surgical Assistants

Core Skills Workshop

Wednesday/September 28, 2016

12:30рм-4:30рм

Teaching Topics Teaching

- Tissue slivering
- · Graft dissection
- · Graft removal
- Graft placement
- Continued training
- Career building

Teaching Objectives

- Hand-eye coordination
- Tissue handling
- Choice and use of instrumentation
 - Critical thinking

Who Should Attend

- Surgical assistants (beginner and intermediate level)
- Physicians (any level)

Courses & Workshops with FUE Focus At the ISHRS World Congress



FUE-Mini Courses
Wednesday/September 28, 2016
Fee: \$395 each. 3 hours each.

Powered Sharp Punch System—Shaven and Non-Shaven FUE Course Director: Jae-Hyun Park, MD

Level: Beginner-Intermediate

Description: FUE is technically demanding. Improved instruments have led to decreased transection rates. During this course the faculty members will describe and discuss instruments and methods that can be used for FUE harvesting, especially the FUE motorized sharp system. This Mini Course will allow participants to obtain detailed exposure to the FUE and Non-Shaven FUE techniques with powered sharp punch system. The technique will be presented discussing all the phases of the procedure, with particular attention to the technical details. The course will include video, lecture and discussion to review the techniques of powered sharp punch FUE technique

Powered Blunt Punch System for FUE Course Director: Kapil Dua, MBBS, MS Level: Beginner-Intermediate

and Non-shaven FUE techniques.

Description: Follicular Unit Extraction (FUE) is becoming the mainstream, but it is a technically demanding form of extraction. Ability and experience is necessary to master FUE with low transection rates. Incorporating this procedure into a surgeons' routine can be a challenge. This workshop will be a great opportunity to learn the technique using a powered blunt punch system. Its uses, as well as the tips, will be discussed in detail.

Manual, Non-Powered FUE Techniques Course Director: Flavia Barsali, MD Level: Beginner-Intermediate

Description: This workshop will be a clear introduction on how to use manual FUE punch, patient selection

and donor harvesting management. The faculty members will describe the manual FUE technique, how to deal with initial problems, discuss strategies to handle difficult cases and how to implement Manual FUE in the clinic.

Workshops Friday/September 30, 2016 Fee: No extra fee. 1.5 hours each.

Workshop 102: FUE—Basic Concepts Director: Ken L. Williams Jr., DO, FISHRS Level: Beginner

Description: This workshop will cover the basic concepts of Follicular Unit Extraction (FUE), including the different FUE devices available. Indications for FUE and proper selection of patients will also be discussed.



Description: With emphasis in video, lecture and discussion, the participant of this workshop will have the opportunity to get to know some of the new FUE technologies and devices, and how they can

facilitate the procedure execution by improving accuracy at the donor harvesting. This knowledge helps resulting in better surgical outcomes and more satisfied patients.

Workshop 105: Beard and Eyebrow Reconstruction and Harvesting Directors: Robert H. True, MD, MPH, FISHRS, and Sara M. Wasserbauer, MD, FISHRS Level: Advanced

Description: This workshop will focus on facial hair reconstruction and include both reconstructive and cos-

metic cases. All aspects of beard reconstruction will be discussed. In eyebrow transplantation the aspects of design, angle and direction of placement will be taught in detail. Clinical approaches using both FUE and Strip Harvesting will be presented. The faculty will present all aspects of surgery including indications, treatment planning, anaesthesia, donor harvesting, recipient area design, graft placement, postoperative care, and complications.



Special Note: Workshop 106 will take place in the large general session room. One-way simultaneous interpretation—English to Spanish—will be available.

Description: Implanters are used for creating recipient sites and/or placing grafts. They have been popular in Asia for a long time and gaining popularity in the rest of the world by hair transplant

surgeons. With the increase in FUE procedures and delicate, sometimes skeletonized grafts, many feel that implanters may reduce graft trauma and provide for better graft growth. This workshop will cover different types of implanters and how they work—advantages and disadvantages. Faculty will review tips and pearls, illustrating their preferred techniques. New "dull" implanters will also be presented. They can be used with stick and place or premade sites.

Workshop 112: FUE—Advanced Topics Director: James A. Harris, MD, FISHRS Level: Advanced

Description: This workshop will dive into more advanced topics and discussions revolving around FUE. Some questions that will be discussed: What are the limits of FUE harvesting for donor preservation? Are FUE grafts really any different than strip grafts? Should you try to split units to leave follicles behind? What happens to transected follicles? And more!



Medical Tourism: The Good, the Bad, and the Ugly

Karen Sideris, ISHRS PR Geneva, Illinois, USA kmssgs@msn.com

With the rise of the internet and globalization, the world is literally at our fingertips. Not only can we easily cross borders for leisure travel and tourism, it is possible to visit nearly any country to conduct business or to purchase goods and services.

In recent years, this worldwide open marketplace has given rise to another growing trend: medical tourism. According to recent statics gathered in the publication Patients Beyond Borders: World Edition, it is estimated that the market size for medical tourism is \$45.5-\$72 billion (USD), representing approximately 12 million patients worldwide seeking medical treatment outside their borders.

While visions of exploring exotic locales may be a driving factor for some seeking medical procedures abroad, patients often consider medical tourism from an economic perspective—as the cost of many procedures may be substantially less expensive when performed in another country. This is particularly true for cosmetic surgery, which ranks among the top procedures for medical tourism. Since cosmetic procedures such as hair transplants are not covered by health insurance in most countries, the lure of cheaper surgeries in a foreign country may appear to be just the bargain some patients are looking for.

But as the old adage goes, "If it sounds too good to be true, it probably is," consumers need to exercise extreme caution when considering a hair restoration procedure across borders and they need to do their homework well before their tickets are booked and bags are packed. Many specialists in the field of hair restoration have been seeing complications from these "cheap clinics" that no patient bargained for.

Buyer Beware: Cheaper Surgeries Can Come at a Price

In an ideal world, all physicians would abide by the Hippocratic Oath swearing to uphold the highest ethical standards in practicing medicine. However, the reality is, this is not always the case. When it comes to medical tourism, certain physicians or businessmen can stand to profit from unethical practices such as misleading advertising that uses their credentials to lure unknowing patients to clinics with the promise of cheap surgeries in "expert hands." But, in a classic case of bait and switch, non-physicians are actually the ones performing hair transplant surgeries rather than qualified physicians. Depending on the locale, this may be an illegal practice that poses potentially serious consequences for patients.

Complicating the issue even further is the fact that different countries have different laws and regulations on the practice of medicine, including who can perform surgery and where it can be performed. For example, Turkey has become a medical tourism hotspot for hair transplants—mainly due to the promise of cheaper surgeries. However, reports have surfaced recently of black market hair transplant clinics in Turkey where technicians—not physicians—are illegally performing hair transplants in private hospitals or clinics, and marketing companies get paid for referring them.

When patients have hair restoration surgery performed by non-doctors, they are at risk of misdiagnosis—failure to diagnose hair disorders and related systemic diseases—which can result in the performance of unnecessary, ill-advised, or unsuccessful surgery. The International Society of Hair Restoration Surgery (ISHRS), the largest physician group advocating for hair loss patients, strongly believes that these potential risks jeopardize patient safety and treatment outcomes and has been educating consumers and regulators about this problem.

Doing Your Homework Pays Off

While no one wants to get duped into getting an illegally performed hair transplant surgery, it can be hard to determine if a physician or clinic advertised in another country is legitimate. That's why the ISHRS urges potential patients to always ask the following questions, in addition to questions regarding costs, risks and short- and long-term benefits, and planning for future hair loss and the best use of finite donor hairs, before scheduling a hair transplant in any part of the world:

- 1. Who will evaluate my hair loss and recommend a course of treatment? What is their education, training, licensure, and experience in treating hair loss?
- 2. Who will be involved in performing my surgery, what role will they play, and what is their education, training, licensure, and experience performing hair restoration surgery?
- 3. Will anyone other than the doctor, or not licensed by the state, be making incisions or harvesting grafts during my surgery? If so, please identify this person, explain their specific role and credentials, and whether they are legally permitted to perform surgery.
- 4. Is everyone involved in my surgery covered by malpractice insurance?

If a physician is unwilling to answer your questions or provide information you are requesting, it could be a red flag that this practice is not on the up and up. Trust your instincts and don't make rash decisions in search of a bargain that could cost you in other ways. The consequences of a botched hair transplant can be serious and long-lasting. As they say in school, "caveat emptor," or buyer beware—and, do your homework!

Reputable Physicians Make All the Difference

When performed by the right physician, today's hair restoration surgery safely and effectively creates natural-looking, permanent results that are virtually undetectable. There are many excellent, reputable physicians in all areas of the world who perform exceptional hair transplants, and some patients travel thousands of miles to be entrusted in their capable hands. Using all the available resources can help you find a qualified hair restoration physician, either in your own backyard or in a country you've always dreamed of visiting. Do your homework, and be an educated consumer to avoid being an unnatural disaster.

Classified Ads

Hair Transplant Physicians and Technicians

PAI Medical Group is executing its expansion plan. We require physicians and technicians with hair transplant experience for the US mid-western, eastern, and southern states and for Canada's Ontario, Quebec, Manitoba, Alberta and B.C. provinces.

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Hair Restoration Technician Wanted

The Hair Sciences Center of Colorado (James A. Harris, MD) is seeking an experienced surgical technician to join our team in beautiful Denver, Colorado. Must have experience in graft dissection, graft placement, and FUE graft removal.

FT employment with benefits. No per diem techs.

Please email résumés to: tlardner@hsccolorado.com

To Place a Classified Ad

To place a Classified Ad in the *Forum*, simply e-mail cduckler@ishrs.org. In your email, please include the text of what you'd like your ad to read—include both a heading, such as "Tech Wanted," and the specifics of the ad, such as what you offer, the qualities you're looking for, and how to respond to you. In addition, please include your billing address.

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HAIR RESTORATION

COMPREHENSIVE TOPICS TO BE PRESENTED

- FUE Follicle Unit Extraction
- FUT Follicle Unit Transplantation
- Hairline Design
- Anesthesia
- Donor Harvesting
- Planning the Recipient Area
- Post-Op Care
- The Future of Hair Transplantation
- Advances in Hair Biology
- New Hair Loss Treatments
- Unique Issues in Ethnic Transplantation
- Storage Solutions
- Non-Surgical Adjunct Therapies, such as
- Medical Therapies
- Platelet Rich Plasma for Hair Regrowth (PRP)
- Low Level Laser Therapy (LLLT)
- Scalp Micropigmentation (SMP)
- Eyebrows, Eyelashes, Beards, etc.
- Case Presentations/ Live Patient Viewing
- Surgical Pearls to Achieve the Best Results
- And more...

NEWCOMERS ARE WELCOME!

We offer a "Meeting Newcomers Program" to orient those who are new to the ISHRS meeting. Newcomers will be paired with hosts. We want to welcome you, introduce you to other colleagues, and be sure you get the most out of this congress.

2016 ISHRS WORLD CONGRESS SCIENTIFIC PLANNING COMMITTEE

Marcelo Pitchon, MD | BRAZIL

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Bernardino A. Arocha, MD, FISHRS I USA Advanced/Board Review Course Co-Chair

Gregory Williams, MBBS, FISHRS | UNITED KINGDOM Basics Course Chair

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NEWCOMERS ARE WELCOME!





HAIR TRANSPLANT FORUM INTERNATIONAL

International Society of Hair Restoration Surgery 303 West State Street Geneva, IL 60134 USA

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Dates and locations for future World Congresses of the ISHRS

2016: 24th World Congress September 28-October 1, 2016 Las Vegas, Nevada, USA

2019: 27th World Congress November 13-17, 2019 Bangkok, Thailand (tentative)

2017: 25th World Congress October 4-8, 2017 Prague, Czech Republic 2020: 28th World Congress October 21-24, 2020 Panama City, Panama

2018: 26th World Congress October 2018 USA (tentative) Presorted
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Advancing the art and science of hair restoration

Upcoming Events

Date(s)	Event/Venue	Sponsoring Organization(s)	Contact Information
July 29-30, 2016	2016 FUE Palooza Denver, Colorado, USA	International Society of Hair Restoration Surgery Hosted by James A. Harris, MD, FISHRS www.ishrs.org	Janiece McCasky jlmccasky@hsccolorado.com
August 24-27, 2016	6th Annual Congress of Brazilian Association for Hair Restoration (ABCRC) Curitiba, Brazil	Brazilian Association for Hair Restoration Surgery (ABCRC) http://www.abcrc.com.br/	secretaria@abcrc.com.br
September 8-11, 2016	8th Annual Hair Restoration Surgery Cadaver Workshop St. Louis, Missouri, USA	Practical Anatomy & Surgical Education (PASE), Center for Anatomical Science and Education, Saint Louis University School of Medicine In collaboration with the ISHRS	Dr. Samuel L. Lam, Course Director Emina Karamanovski Vance, Assistant Course Director http://pa.slu.edu
September 28-October 1, 2016	ISHRS 24th World Congress Las Vegas, Nevada, USA	International Society of Hair Restoration Surgery www.ishrs.org	info@ishrs.org
November 26-27, 2016	21st Annual Meeting of the JSCHR Hamagin Hall, Yokohama, Japan	Japan Society of Clinical Hair Restoration (JSCHR) Hosted by Prof. Kazuo Kishi, MD	Prof. Kazuo Kishi, MD, Program Chair Maiko Kuroda, Secretary m.kuroda@z6.keio.jp; www.jschr.org
February 24-27, 2017	HAIRCON 2017 The Scientific Meeting of the Association of Hair Transplant Surgeons of India Ludhiana, Punjab, India	Association of Hair Transplant Surgeons of India	Dr. Kapil Dua: drkapildua@akclinics.com