Few dermatologic problems carry as much emotional overtones as the complaint of hair loss. The best way to alleviate the emotional distress related to hair loss is to effectively treat it. As with any medical problem, the patient complaining of hair loss requires a comprehensive medical and drug history, physical examination of the hair and scalp, and appropriate laboratory evaluation to identify the cause. Prerequisite for delivering appropriate therapy is an understanding of the underlying pathologic dynamics. Once the diagnosis is certain, therapy appropriate for that diagnosis is likely to control the problem.

Evidence-based medicine (EBM) aims to apply the best available evidence gained from the scientific method to clinical decision making. It seeks to assess the strength of the evidence of risks and benefits of treatments and diagnostic tests. Using techniques from science, engineering and statistics, such as the systematic review of medical literature, meta-analysis, risk-benefit analysis, and randomized controlled trials (RCTs), EBM aims for the ideal that healthcare professionals should make conscientious, explicit, and judicious use of current best evidence in their everyday practice.

Although EBM is becoming regarded as the gold standard for clinical practice, there are a number of limitations of its use. The limited success of evidence based therapies points to a more important complexity of hair loss. Moreover, EBM guidelines do not remove the problem of extrapolation to different patient populations, and certain groups have been under-researched, such as people with co-morbid diseases. Therefore, one must remain open-minded for the possibility of a multitude of cause-relationships underlying hair loss, and for the possibility of combined treatments and multitargeted approaches to enhance hair growth and quality. The scientific rationale for such an approach is given, but there is a need for studies to establish increase of efficacy of combination regimens for treatment of hair loss that go beyond topical minoxidil, and oral finasteride or dutasteride, to include nutritional therapies (such as CYP-complex), topical anti-aging agents with anti-oxidative capacity (such as melatonin), and choice of appropriate hair care (such as witch-hazel based shampoo).