Evidence-Based Medicine in Treatment of Alopecia Areata
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Alopecia areata is a common hair loss condition characterized by acute onset of non-scarring hair loss in usually sharply defined areas. Some patients lose hair in only a small patch, while others may have extensive or less frequently diffuse involvement. The progress of alopecia areata in an individual is unpredictable, though a large surface area, and a long disease duration are connected with poorer prognosis. EBM aims to apply the best available evidence gained from the scientific method to clinical decision making. Ultimately, EBM aims for the ideal that healthcare professionals should make conscientious, explicit, and judicious use of current best evidence in their practice. A recent metanalysis came to the conclusion that few treatments have been well evaluated in randomised trials. Most trials have been reported poorly and so small that any important clinical benefits are inconclusive. The authors concluded that considering the possibility of spontaneous remission, especially for those in early stages of disease, the options of not being treated therapeutically or, depending on individual preference, wearing a wig may be alternative ways of dealing with this condition. Nevertheless, depending on patient age, surface area, and disease duration, an empiric treatment algorithm can be designed with remission rates between 20 and 90%. Moreover, co-morbid conditions have been identified that may have a disease-modifying effect and therefore must be included in the treatment plan.