

Electric Hair Follicular Stimulation

Tawana D Furbush*

Department in Faculty of Science of University Malaya, Malaysia

INTRODUCTION

Electric Follicle Stimulation (EFS) is a low frequency treatment to encourage hair growth and density. The follicle is the root of the hair shaft that receives nourishment and blood supply from the papilla which contributes to hair growth.

Follicles can produce a single to multiple hairs from one follicle and the life cycle of hair is in three phases: Anagen, Catagen and Telogen.

The Anagen phase is the growth phase. This phase lasts an average of 3-5 years. So a full-length hair averages 24 inches; give or take. Genetics can serve as a blueprint. The anagen phase is generally longer in people of Asian and Indian descent, and can last as long as 7 years, therefore, growing hair longer than the average length during this phase.

The Catagen phase is the transitional phase. It is a short transitional phase of the hair growth cycle between anagen and telogen that usually lasts between 10 to 20 days. This is where the lower portion of the hair follicle regresses and hair growth ends.

The Telogen phase is the resting phase. When the body is subjected to extreme stress, as much as 70 percent of hair can prematurely enter the telogen phase and begin to fall, causing a noticeable loss of hair. This condition is called Telogen Effluvium (TE). How can you tell the difference between Androgenetic Alopecia and Telogen Effluvium?

TE causes hair loss all over in a diffuse manner. True Androgenetic Alopecia has less density on the top middle and front of the scalp compared to the back and sides of the scalp; commonly called male pattern baldness and sometimes called the 'cul-de-sac'. This can stem from increased age, male hormones and heredity. In Telogen Effluvium, the density is reduced equally all over the scalp. This is more common with female pattern hair loss.

Now, normal hair shedding that averages 45 hairs a day (some more, some less) is necessary because that is nature's way of making room for more hair. Sometimes nature does not replace hair as fast as it sheds and that is when you will start seeing the difference. However, there are several factors that affect ones' growth and density.

Genetics. This is at the top of the list. Your family's hair growth is a strong blueprint for the way in which your hair growth will be. I personally know people that take preventive measures to slow down the process.

Nutrition. Restrictive diets can cause problems. Of course, the expression, 'You are what you eat' has some validity to growing (healthy) hair. Even vitamins (if taken in excess) can cause problems. I had a client who was taking niacin in large doses to help control her cholesterol. The problem is she went from not taking niacin to taking 1,200 mg of niacin daily. Within one week her hair started shedding. I explained that she needed to start with lower doses and work her way up, if necessary. She did and the shedding stopped.

Poor health. Iron-deficiency anemia with iron levels too low, due to poor diet, loss of blood or problems with iron absorption contributes to hair loss. Remember, if blood supply to the follicle from the papilla is deficient hair growth will be deficient as well. Thyroid disorder can cause Alopecia Areata, an auto-immune disorder, which is round bald patches on the scalp. Lupus is an auto-immune disorder that can also attack hair follicles.

Medication. The side effects of certain medications can cause hair loss. Blood thinners, beta-blockers and amphetamines, to name a few. Chemotherapy commonly cause sudden hair loss affecting the entire head (Alopecia Totalis).

Traumatic Alopecia. This form of hair loss is caused by hairdressing techniques that pull the hair (tight braiding or cornrowing), expose hair to extreme heat and twisting (curling iron or hot rollers) or damage the hair with strong chemicals (hair relaxers, bleaching, hair coloring and permanent waves). In addition, some people have an uncommon psychiatric disorder (trichotillomania) in which compulsive hair pulling and twisting can cause bald spots.

So, I guess you are asking yourself by now, why the theoretical class and where does EFS fit in? Well, it helps to know this information so you can have an educated consultation with your clients and make an informed decision about what product and/or service you will administer.

EFS is not for everyone but this service covers a broad market that continues to grow. If the follicle is dead, there is no way to revive it. There are no known side effects, however, there are

Correspondence to: Dr. Tawana D Furbush, Department in Faculty of Science of University Malaya, Malaysia; E-mail: aimotion1@yahoo.com

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contraindications and should be discussed with your client. The contraindications are pregnancy, malignancy, circulatory disorders, severe infection, epilepsy, pacemakers, metal implants and dental braces. I feel the need to have my client sign a release agreeing that they do not have any of these contraindications. Also, any medical issues that you are not sure of, seek physician's advice and/or have the client return with a doctor's approval, on his/her letterhead, about the service that you will administer

First, I like to create an environment that is conducive to my service, i.e. dim lights, reclining chair and music (spa, easy listening, smooth jazz, etc). I believe that EFS has a better physiological response when my client is relaxed.

All metal jewelry is removed. I prep my client's scalp by shampooing with a scalp stimulating shampoo. Menthol hair products (peppermint/spearmint) are considered helpful for hair growth because it is known scientifically as a vasodilator. This means that it has the ability to stimulate blood circulation to the scalp and cause hair follicles to open up, leading to more hair growth. Rinse thoroughly with warm water and towel dry. You do not need to use aids (products) with the service but if you do, now would be the time to apply it.

The electrode that I use is the comb (for wide areas) or the pointed rod (for spot treatment). The argon gas (blue violet) produces the sensation of heat while it stimulates the follicle and improves blood circulation providing nutrition to the papilla. EFS also has germicidal benefits effectively sterilizing skin, killing surface bacteria and calming inflammation.

I place the electrode on their arm first so they can feel the pinprick sensation and know what to expect when it is placed on their scalp. With each visit, I start on the scalp with the lowest frequency (30 Khz) and gradually turn it up according to their comfort level and document the number of the dial for returning visits. I move the electrode from the front to the crown and ear to ear. If servicing from the occipital area down to the nape, I have the client sit up with his/her head tilted forward using the electrode with the same movement. I do not hold the electrode on one spot for more than 10 seconds to avoid the skin overheating. EFS should be no longer than 20 minutes and no more than 3 days a week (every other day). Results may vary but with consistency, clients may see results within six weeks.

It would be wise for you to have shampoo and conditioner available for retail. That way clients can stay engaged in the process of hair growth. EFS should only be administered by a licensed professional.