



## **HIRSUTISM**

### **What are the aims of this leaflet?**

This leaflet has been written to help you understand more about hirsutism. It tells you what it is, what causes it, what can be done about it, and provides sources of additional information.

### **What is hirsutism?**

Hirsutism is the term used when an individual grows too much body or facial hair; in females this would include in a pattern seen normally occurring only in men.

### **What causes hirsutism?**

Androgens are often thought of as 'male hormones' but, in fact both men and women produce them; men usually in greater amounts than women.

Testosterone is the best-known androgen, but there are several others too. Hirsutism can be caused either by excessive abnormally high levels of androgens, or by the hair follicles being more sensitive than usual to normal androgen levels.

A small minority of women with hirsutism produce too much androgen and sometimes this is due to an underlying medical condition. In addition, some medicines can cause hirsutism; these include hormones, anabolic steroids, androgenic progestins, and sometimes oral contraceptive pills. It is advised to consult your GP if you feel that your medicine is problematic.

In fact, most women with hirsutism have no hormone imbalance or underlying medical condition. Many women develop more facial or body hair gradually as they get older, especially after the menopause. In addition, women from

different ethnic backgrounds have different patterns of hair growth, which may make them prone to having hair on their face, nipples or stomach.

### **Is hirsutism hereditary?**

A tendency to hirsutism does run in some families; however this may not be associated with an excess of androgens.

### **What are the symptoms of hirsutism?**

Having too much hair anywhere on the face, limbs or trunk (can be highly embarrassing and cause great distress).

### **What does hirsutism look like?**

An excess of thick, often dark, hair may be seen on the face, neck, chest, abdomen and upper back, as well as on the upper lip, arms, legs and buttocks. The hair is characterised as being fine, often dark, and long.

Women tend to have more facial and body hair than men.

### **How will hirsutism be diagnosed?**

Women with mild hirsutism, and regular menstrual cycles, seldom have an underlying medical problem. However, if a medical problem exists, your doctor should be able to detect it by asking you questions and then, if necessary, by performing blood tests.

It is important to see your doctor if your hirsutism is any of the following:

- Severe
- Developing quickly (over 1-2 years), or before puberty
- Accompanied by menstrual problems
- Associated with features suggesting an increase in androgens such as thinning of the scalp hair, baldness, or deepening of the voice
- Accompanied by obesity or diabetes

### **Can hirsutism be cured?**

No, although local areas of excessive hair growth can often be cleared by electrolysis, laser therapy, or intense pulsed light (IPL). The treatment of hirsutism with medication is usually less satisfactory as the problem often comes back when treatment stops.

## How can hirsutism be treated?

Treatments for hirsutism fall into two broad groups:

1. Mechanical treatments . which remove the unwanted hair physically.
2. Medical treatments . most of which reduce the effect of androgens on the hair roots.

### ***Mechanical treatments***

Some simple methods (i.e. shaving, tweezing and waxing, along with the use of depilatories and bleaching creams) are discussed under the heading of [What can I do?](#)+below.

Other methods include:

- ***Electrolysis.*** An electrical current is passed into a hair follicle through a needle. The aim is to destroy the hair root permanently. Electrolysis is relatively expensive and time-consuming. Before you have electrolysis, check that the operator is properly qualified, and registered with the Institute of Electrolysis. Check that the practitioner uses new, disposable (not simply re-sterilised) needles. Equipment designed for electrolysis at home are not recommended. Scarring is a potential side effect of this treatment.
- ***Laser and intense pulsed light (IPL) treatments*** also aim to destroy the hair root permanently. Laser treatment and IPL is expensive and several treatments are given over a period of months. This form of hair reduction must be done at a special clinic by an operator who is properly qualified. Check that they are they registered with the Healthcare Commission or British Medical Laser Association. It is better to take the route of a referral from your medical practitioner to a specialist. Possible side effects include redness, darkening or lightening of the skin, and scarring. Total compliance during the treatment plan is required; this will include no sun bathing (or fake tanning) and cessation of all forms of hair removal with the exception of shaving.

### ***Medical treatments***

- ***Anti-androgens.*** Your doctor may prescribe these to block the action of the androgens that can cause hirsutism. Anti-androgens usually take four to six months to have an effect. Hair growth then slows, and the

hairs become thinner and less noticeable, but the problem tends to return when medication is stopped.

**N.B. An important side effect of all anti-androgen drugs is that they can harm an unborn male baby if you take them while you are pregnant. For this reason, they must not be taken unless you are using effective contraception.**

Anti-androgens include:

- **Oral contraceptives.** Some low-dose combined pills may help, and one has been designed specifically to have an anti-androgenic activity. Side effects include spotting (bleeding between periods), tender breasts, nausea and headaches, especially in the first few months. The oral contraceptive pill is not suitable for everyone.
- **Cyproterone.** Combined with an oral contraceptive this can help women with hirsutism. Larger doses of cyproterone (i.e. 50 to 200 mg for 10 days each cycle) can be used for more severe hirsutism. Side effects include weight gain, depression and loss of libido.
- **Spironolactone.** This is used more commonly in the USA than in the UK. It works as an anti-androgen but also increases the amount of urine that is passed - in other words it is also a water tablet (diuretic). Spironolactone (50 to 200 mg daily) can slowly reduce excessive hair growth. Side effects include tender breasts, irregular menstruation and liver damage.
- **Eflornithine cream.** This cream works by slowing hair growth. It is not a depilatory cream. It has recently been accepted for use in women for whom other medical treatments cannot be used or have been ineffective. It can be applied after any regular hair removal techniques. It is left on the skin to inhibit hair growth. The cream takes two to three months of regular use to have an effect. Side effects are usually mild and include burning or stinging of the skin and acne.

### What can I do?

- **Shaving.** Some think shaving encourages more hair growth but this is not true. However, the stubble that follows regrowth may be undesirable. Frequent shaving can irritate your skin.
- **Tweezing and waxing** are effective for some people, but can irritate the skin and should be used with caution on the face. Scarring occasionally follows. Folliculitis (inflammation of the hair follicles) can occur with shaving, tweezing and waxing.

- **Depilatories** (creams that remove hair) chemically dissolve hair shafts thereby leaving no stubble, but may also irritate your skin. Before using them you should first test your skin to see how sensitive it is. Always follow the manufacturer's instructions for testing and product applications.
- **Bleaching creams** are designed to make the dark hairs pale. They can irritate the skin and may be unsuitable for brown and black skins.
- **Threading.** Involves twisting a thread of pure cotton between the fingers and around rows of hair to pull them out of their roots.

### **Where can I get more information about hirsutism?**

*Web links to detailed leaflets:*

[http://www.uptodate.com/contents/patient-information-hirsutism-excess-hair-growth-in-women?source=search\\_result&selectedTitle=1~110](http://www.uptodate.com/contents/patient-information-hirsutism-excess-hair-growth-in-women?source=search_result&selectedTitle=1~110)  
[www.emedicine.com/derm/topic472.htm](http://www.emedicine.com/derm/topic472.htm)  
<http://www.dermnetz.org/hair-nails-sweat/hirsutism.html>

**This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: its contents, however, may occasionally differ from the advice given to you by your doctor.**

*This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel*

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