DISSECTING CELLULITIS OF THE SCALP

What are the aims of this leaflet?

This leaflet has been written to help you understand more about dissecting cellulitis of the scalp. It tells you what it is, what it is caused by, what you can do about it, and where you can find out more about it.

What is dissecting cellulitis of the scalp?

Dissecting cellulitis of the scalp is a very rare scalp condition. Pus filled spots and lumps develop with subsequent hair loss over the area. Hair loss is permanent due to the development of scar tissue, which destroys the hair follicles.

The condition is occasionally referred to as perifolliculitis capitis abscedens et suffodiens (which means inflammation of the scalp hair follicles and surrounding skin which disappears and digs deep into the skin). It commonly affects black adult men but can affect any race, sex or age.

What causes dissecting cellulitis of the scalp?

The cause is still unknown. Theories are centred on blocking or plugging of the hair follicles by skin protein (keratin) leading to inflammation and secondary infection.

Is dissecting cellulitis of the scalp hereditary?

No, it is not believed to be hereditary.

What are the symptoms of dissecting cellulitis of the scalp?

Symptoms include painful spots and lumps that may ooze pus. In severe cases, there may be abscesses on the scalp.
Permanent hair loss on affected parts of the scalp is frequent, and it can be associated with other conditions such as acne and hidradenitis suppurativa.

**What does dissecting cellulitis of the scalp look like?**

The rash looks like spots or lumps that ooze pus with overlying areas of hair loss and scarring.

**How is dissecting cellulitis of the scalp diagnosed?**

The diagnosis is made by a dermatologist examining the scalp. A scalp biopsy may be required where one or two pieces of skin are removed from the scalp under local anaesthetic leaving one or two small scars behind. Swabs and plucked hair may also be taken to look for infections.

**Can dissecting cellulitis of the scalp be cured?**

No. There is no cure for the disease but various treatments can be used to control the disease and limit the symptoms. It is important to realise that scarred areas of scalp will never grow back hair so the hair loss is permanent. The disease does slowly tend to resolve but this may take several years and is unpredictable.

**How can dissecting cellulitis of the scalp be managed?**

There are several ways your doctor may try to manage the condition:

*Topical treatments*

These are usually first choice and part of the long term management of the condition. They should be applied directly to the affected areas. They generally work by decreasing the bacterial burden on the skin and preventing secondary infection and include topical antiseptics such as chlorhexidine and iodine and topical antibiotics such as clindamycin.

*Oral tablets*

There are several options:

- The safest for long term use are prolonged courses of antibiotics. They are used primarily for their ability to fight inflammation (redness and swelling) and drugs used include erythromycin, clarithromycin,
lymecycline, doxycycline, minocycline, oxytetracycline, clindamycin, and rifampicin. Combinations of antibiotics are sometimes given.

- Steroid tablets are another commonly used option. They work by reducing the inflammation in the scalp. Steroids are effective drugs and are sometimes used for short term management.

- Dapsone (an antibacterial medicine) can be given for longer term treatment, but requires regular monitoring blood tests (see Patient Information Leaflet on Dapsone for more information).

- Retinoids, such as isotretinoin, are another commonly used long-term medicine. Isotretinoin is most frequently prescribed for patients suffering from acne. It is a powerful drug and requires monitoring blood tests, but most patients tolerate the tablet very well. Women must not become pregnant whilst on the medication and for one month after it is finished, and must have regular pregnancy tests. For further information on Isotretinoin (male or female), please refer to the relevant BAD Patient Information Leaflets.

**Surgery**

Surgery can be used to incise (cut open) large abscesses (boils or collections of pus) or excise (cut out) persistent areas of inflammation. This will leave a scar but will remove part of the scalp affected. Rarely grafts are used to cover the defect if a large area of scalp is removed.

**Other treatments**

- Injections of steroids are sometimes given to areas of the scalp that are affected. This reduces the side-effects and complications compared to taking steroid tablets but can be a painful procedure.

- Laser hair removal has been attempted to control the disease as the process mainly occurs around the hair follicles. This treatment will, however, result in permanent loss of the hair.

- Wigs and toupees are another option available if the disease has been controlled and you have been left with scarring on your scalp. These can either be bought privately, or obtained through the NHS on a consultant’s prescription (a financial contribution is usually required).
There are new treatments called “biologic” agents that have been tried with some success for dissecting cellulitis, however they are still a very new type of treatment and long term side-effects have not yet been quantified.

Self care (What can I do?)

- Try not to pick and squeeze the spots as this will only aggravate them more.
- Keep the scalp as clean as possible using regular antiseptic wash and avoid the use of oil based hair toiletries.
- Get treatment quickly to try and reduce scarring on your scalp.
- Be prepared that none of the treatments work instantly and you may only see results after a few months rather than days or weeks.
- There is no evidence that food or diet affects this condition, so a normal healthy diet is recommended. If you are overweight losing weight to reach the normal range is generally considered to improve the course of the disease and reduce complications of the oral medications, if taken.

Where can I get more information about dissecting cellulitis of the scalp?

Web links to detailed leaflets:

http://dermnetnz.org/acne/scalp-folliculitis.html

Links to patient support groups:

Alopecia Help & Advice (Scotland)
Web: www.alopeciascotland.co.uk

Alopecia UK
Tel: (020) 8333 1661
Web: www.alopeciaonline.org.uk
E-mail: info@alopeciaonline.org.uk

Information about entitlement to free wigs is given in NHS leaflet HC11.
For details of source materials used please contact the Clinical Standards Unit (clinicalstandards@bad.org.uk).

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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