

A comment on A Study of Donor Area in Follicular Unit Hair Transplantation

Sir,
Nirmal *et al.* published a study of donor area in follicular unit transplantation.^[1] A study of donor area in follicular unit hair transplantation. It is a good thing that studies be carried out to further improve the outcome in surgical hair restoration.

Strip Follicular unit hair transplantation (FUHT) scar is definitely an area of concern for the patient and the doctor. However, for a study of the sort detailed above, there are a few things to keep in mind:

a. Studies like this should be submitted with high quality

- pictorial proof. For 30 patients being followed up, picture proof of all of them should be submitted along with graft details and the Norwood level of the patient.
- b. Ideally, such studies should feature the different type of donor closure on different part of the same patient. This will reduce bias that may occur due to the patient's personal healing character. (e.g. Some patients have a barely visible scar even when no trichophytic closure is performed.)
- c. Patient's satisfaction has to be pre-determined on both counts:
- Donor area healing.

- Cosmetically pleasing result in the bald recipient area.

If we take too narrow a donor strip, grafts obtained would be reduced and the patient may not feel satisfied with the outcome in the recipient area, especially, if he has extensive hair loss.

Filling the strip scar at a later date with grafts extracted from scalp/body by Follicular unit extraction (FUE) would be a better alternative in my opinion.^[2] That way the physician can maximise the grafts harvested and later, if the strip scar bothers the patient, he can get it filled with hair. An additional benefit of this approach is that the grafts can be transplanted at the desired angle and direction. Whereas in trichophytic closure, hair direction in strip scar is usually an issue. Grafts can be extracted from the beard or robust body donor areas for this purpose.^[1]

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