

Hair loss

Information for people affected by cancer

This fact sheet provides information on hair loss that may result from cancer treatment.

Hair loss (also called alopecia) can be a side effect of cancer treatment. Not all cancer treatment causes hair loss. The information provided is a guide only and does not replace the advice of health professionals at your treatment centre.

Cancer treatment and hair loss

Hair growth takes place in the cells of the hair follicles (roots). Healthy hair follicles divide every one to three days, and new hair cells form and build the hair shaft in a cyclical pattern of growth and rest. Treatments that affect the rapidly dividing cancer cells also affect other rapidly dividing cells, such as the hair follicles. Ask your doctor if the drugs you are receiving are likely to cause hair loss.

Chemotherapy and hair loss

Chemotherapy is the use of drugs to reduce or stop the abnormal growth of cancer cells. Not all of them cause hair loss. Chemotherapy drugs are usually given in cycles (sometimes weekly or every two or three weeks) and the amount of hair loss depends on the type of drug, the dose and the timing of treatment.

Hair loss can occur anywhere on the body including the scalp, eyebrows, eyelashes, chest, underarms, pubic area and the moustache and beard areas in men. Eyelashes and eyebrows may take longer to fall out.

Chemotherapy causes the hair to break off at or near the scalp. Shortly before the hair falls out you might feel some scalp irritation, discomfort or itchiness. You may notice hair on your pillow and sheets and when you brush or wash it. The hair may fall out over a very short period of time (days). It is common for hair loss to begin about 2–4 weeks after starting treatment.

“I thought I would keep my eyelashes and eyebrows. They fell out weeks after my hair—it was a shock all over again.”

Radiotherapy and hair loss

Radiotherapy is the use of high energy x-rays to stop cancer cells from growing and multiplying. Normal cells in the path of the beam will also be affected and this can include the hair follicles.

Hair will only fall out in the area of the body being treated. For example, if you are having radiotherapy to your head you will probably lose some hair from your scalp. If the area being treated includes an armpit or your chest, then it is only hair in these regions that is likely to fall out.

Coping with hair loss

People experiencing hair loss can have a range of different emotions ranging from anger to anxiety and feeling low or depressed. These reactions are common and quite natural. It can make you feel self-conscious about your appearance and act as a constant reminder that you ‘have cancer’. Some people find that it is not as bad as they expected.

Being prepared and talking about how you feel can help you adjust to this temporary change in your appearance. It may be difficult to cope with people’s reactions to your hair loss. If you are not comfortable talking about it, give a simple response that creates boundaries and people often follow your lead eg. “I have had to have some treatment for my health and this is the side effect.”

Some treatment centres offer Cold Caps which are said to help reduce the amount of hair loss. Not all treatment centres offer these as they can be expensive and not always successful. If you are interested, ask your treatment centre if they are available and the cost.

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Taking care of hair and scalp during and after treatment

If you have lost your hair:

- gentle massage and moisturising of the scalp can be invigorating and reduce flaky areas
- protect your scalp from the sun with sunscreen or a scarf or hat
- use a pillow case made from satin, polyester or cotton
- you may like to wear a soft cap or beanie to keep your head warm as having no hair or less hair can make you feel cold.

If your scalp is sensitive and your hair is thin:

- use a gentle shampoo and conditioner
- brush your hair gently with a soft bristle brush
- dry your hair naturally or use a cool setting on the hair dryer
- avoid heated rollers, curling wands or straightening irons
- avoid harsh chemicals such as hair colouring, gel, mousse and perming agents
- if you have lost hair under your arms avoid perfumed deodorants.

If you have any concerns, discuss them with your doctor or nurses and follow their specific advice on caring for your scalp during treatment.

Taking back some control

It can help to plan ahead for how you might deal with the possibility of hair loss.

- Consider cutting your hair before treatment starts to give yourself time to adjust. Some people cut their hair short before treatment starts, while others prefer to cut their hair in stages.
- Prepare children for your hair loss to help reduce their feelings of fear or anxiety. Cancer Council's *Talking to Kids About Cancer* includes tips on how to talk to children about the changes cancer treatment may cause. Call Cancer Council 13 11 20 for a copy or visit your local Cancer Council website to download or order a copy.

tip

Talking to someone else who has experienced hair loss may be helpful, call Cancer Council 13 11 20 for information and support.

Wigs, turbans, scarves and hats

Some people choose to wear a wig, hat, scarf, turban or beanie after losing their hair, others prefer not to wear anything on their head.

The important thing is to do whatever makes you feel comfortable and gives you the most confidence.

- Scarves usually need to be at least 50 cm long to cover the scalp. Cotton, lightweight wools or blends are the best fabrics to use as nylon or silk tend to slip off the head too easily. Scarves can be tied in lots of different ways.
- A beanie, soft cap, or turban is often a comfortable choice.
- Bucket hats are popular and they offer more protection for the face.

Choosing a wig or hairpiece

Wigs are made from real hair or synthetic materials. Both can look natural.

- **Human hair wigs** – tend to be more expensive and need to be washed and styled like normal hair with hot rollers, curling wands and straighteners. They can be trimmed and coloured darker but not lighter, they are heavier and will last longer.
- **Synthetic wigs** – are less expensive, lighter, dry quickly and need less care. They can't be restyled or recoloured but they can be trimmed. Synthetic wigs will only last about nine months but this may be all you need.

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Before selecting a wig

Take a friend or family member along with you for support and to help you choose your wig.

- Check if your treatment centre or local Cancer Council has a wig loan service or donated wigs at a reduced price. This can be an economical alternative to buying a new wig.
- Ask your hairdresser or speak to the consultant at a wig salon about a style of wig that would suit you. There may be a cost involved for a wig consultation. Remember to ask about the cost when making an appointment or a decision.
- Visit specialty wig suppliers who are experienced in fitting wigs for people receiving chemotherapy. Look in the Yellow pages for suppliers or contact Cancer Council 13 11 20.
- if you want to match your wig to your own colour and style, start looking for it before hair loss begins or take a photo from before losing your hair. Some people like to try something different and choose a different style and colour.
- Look for a wig that adjusts to any head size to allow for variations as you lose your hair.

Paying for a wig or hairpiece

You may be able to get assistance with the cost of your wig or hairpiece.

- **Treatment in a public hospital** – you may be entitled to financial assistance towards the purchase of a wig. Ask your nurse or social worker for information.
- **Health insurance funds** – some will cover part of the cost of a wig if you are losing your hair due to disease or treatment. You will need a letter from your doctor to accompany a claim. Check your entitlement with your particular fund before you buy your wig.
- **Department of Veterans' Affairs** – will cover the total cost of a synthetic wig if you have full entitlements as a veteran.

Look Good... Feel Better workshops are dedicated to teaching men and women techniques to help restore appearance and help maintain self-image during treatment for cancer which can improve self-confidence. Look Good...Feel Better workshops are held regularly in metropolitan and some regional areas.

Call Cancer Council **13 11 20** for support and information about services, resources and Look Good... Feel Better workshops or visit lgfb.org.au

After your treatment

Hair loss is usually temporary. After chemotherapy your hair will grow back. Often the first soft hairs reappear within a month or six weeks of treatment ending, and you can expect to have a reasonable head of hair three to six months later.

When you finish radiotherapy your hair will usually grow back. The time it takes and the way it grows back depends on the dose of radiotherapy you have received. Your hair will usually have grown back within six to twelve months of completing your treatment. Occasionally after a large dose of radiotherapy the hair may not recover completely, new growth can be rather patchy and there may be some permanent hair loss. Talk to your doctor about what to expect as your hair grows back.

As your hair grows back you may notice some changes. It may be a little more curly, thicker or finer than it was before or it may grow back a slightly different colour. A hairdresser may be able to help you with thinning hair and hair care during regrowth. If your hair loss is partial talk to your hairdresser about different styling as this can give the appearance of thicker hair. Hairpieces are available and may be helpful.

Before starting to colour or tint your hair again seek advice from a professional about the colours or chemicals that may be suitable for you. It is understandable that you might not want to wait to dye your hair. If your scalp is sensitive you can ask your hairdresser to recommend henna dyes or vegetable-based dyes as these may be gentler on the hair and scalp than chemical hair colours.

Hair loss

Where to get help and information*

* Not all states and territories have all services available

Cancer Council 13 11 20 information and support

Talk to a consultant for more information and support and with any questions you may have.

Information

Cancer Council has many resources available to provide information and support to people with cancer, their family and friends. Call 13 11 20 or visit your local Cancer Council website.

Types of support

There are many ways to connect with others for mutual support and to share information. This includes:

- **face-to-face support groups** – often held in community centres or hospitals.
- **telephone support groups** – facilitated by trained counsellors.
- **peer support programs** – match you with someone who has had a similar cancer experience e.g. Cancer Connect.
- **online forums** – such as www.cancerconnections.com.au.

Practical issues

- Call **13 11 20** for access to services to help with the practical impact of cancer, transport, accommodation, legal and financial issues.

Cancer Council websites

- **Cancer Council ACT**
actcancer.org
- **Cancer Council Northern Territory**
nt.cancer.org.au
- **Cancer Council NSW**
cancerCouncil.com.au
- **Cancer Council Queensland**
cancerqld.org.au
- **Cancer Council SA**
cancersa.org.au
- **Cancer Council Tasmania**
cancertas.org.au
- **Cancer Council Victoria**
cancervic.org.au
- **Cancer Council Western Australia**
cancerwa.asn.au

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Note to reader

Always consult your doctor about matters that affect your health. This fact sheet is intended as a general introduction and is not a substitute for professional medical, legal or financial advice. Information about cancer is constantly being updated and revised by the medical and research communities. While all care is taken to ensure accuracy at the time of publication, Cancer Council Australia and its members exclude all liability for any injury, loss or damage incurred by use of or reliance on the information provided in this fact sheet.



For information and support on cancer-related issues, call Cancer Council **13 11 20**. This is a confidential service.