Commentary: Laser hair removal: Progress marches on

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A patient recently asked me whether there were any new advances in hair removal. The manuscript of Yeung and colleagues\(^1\) reminded me that there have been several good investigations advancing this field. They demonstrate the use of pneumatic skin flattening to decrease pain during treatment in Asian patients. Many laser treatment procedures, including laser hair removal, are still more challenging in patients of color. Investigations such as this that improve comfort, safety, or efficacy for these patients deserve recognition. Last year, Tanzi and Alster\(^2\) reported on a novel low-energy pulsed light device for home use. Such devices provide patients with an alternative hair removal option. Earlier this year, Desai and colleagues\(^3\) reviewed paradoxical hypertrichosis after laser hair removal in an effort to gain a better understanding of this phenomenon, with the hope that it can one day be avoided.

Unfortunately, ideal hair removal has not been achieved. To me and most patients, this would be permanent and complete or near-complete hair removal. I use the word “permanent” to mean not ever returning, not the more commonly used definition of “time greater than the duration of the complete growth cycle of hair follicles, which varies from four to twelve months” (http://www.fda.gov/Radiation-EmittingProducts/ResourcesforYouRadiationEmittingProducts/Consumers). Perhaps this is not a realistic goal, but it is possible that science and industry together could come closer to this aim, perhaps by identifying and specifically targeting follicular stem cells or combining the use of targeted irradiation and administration of a pharmaceutical that eliminates signals required for stem cells to prompt hair regrowth. I applaud innovative investigations that strive to achieve this goal and look forward to future investigations on this topic.

References


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