A 59-year-old woman sought care at our dermatology clinic. For the previous 4 years, she had been noticing hair loss that manifested in the form of frontotemporal hairline recession mimicking the shape of a headband. The hair loss had forced the patient to adopt complex hairstyles to conceal the condition. Gradual loss of eyebrow hair took place over the same period; the patient now uses makeup every day to recreate the brows. Before visiting our clinic, she had engaged in haphazard self-treatment with oral vitamins, anti-hair-loss shampoos, and revitalizing ampoules obtained from a hair salon (Fig. 1).

Physical examination revealed the typical clinical characteristics of frontal fibrosing alopecia, an acquired primary scarring alopecia first described by Kossard in 1994. Frontal fibrosing alopecia is characterized by recession of the frontotemporal hairline and the loss of eyebrow hair. The vellus hair was not affected and no facial papules were observed. In assessing the diagnosis, we also found that the patient had the usual—although not exclusive—epidemiologic characteristics, including female sex and postmenopausal age. The patient had no other disease and a blood workup, which included immunologic tests, found no changes of interest.

In addition, the patient presented notable depression of the frontal veins, a sign that was first described only recently and has rarely been reported. The role of this clinical finding in frontal fibrosing alopecia is currently unknown; for now, it is yet another clinical element that can guide the physician in establishing a diagnosis.

Figure 1

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