

Visual Treats in Dermatology

Trichoteiromania: A trichoscopic challenge

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An 18-year-old female student presented to the Dermatology OPD with patchy hair loss and itchiness of the scalp for 2 years. The patient denied ever pulling her hair out. However, she

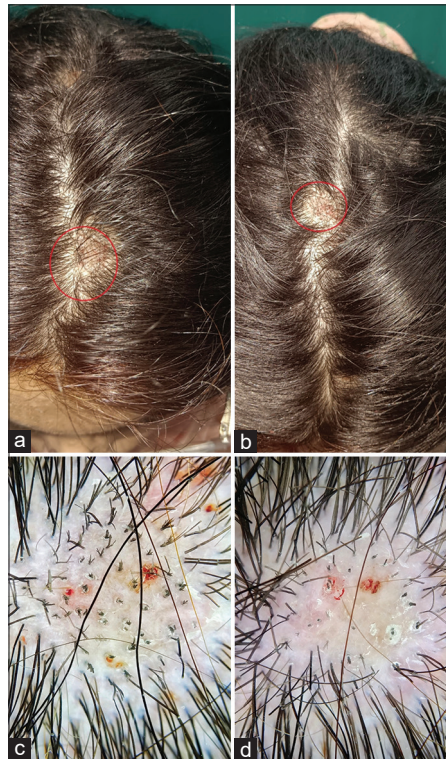


Figure 1: Clinical images (a and b) of trichoteiromania showing well-defined lichenified plaques with broken hairs on the vertex (red circle). Trichoscopic image of trichoteiromania showing broken hairs, longitudinal splits forming a broomstick appearance, white nodes at distal ends, white scales, circumferential grayish-brown pigmentation around the follicles and signs of hemorrhages (c and d).

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admitted to regularly rubbing the area of concern to relieve discomfort. Examining the vertex of the head revealed two separate lichenified plaques with broken hairs and scaling [Figure 1a and b]. A systemic examination was normal and potassium hydroxide mount was negative for fungus. Trichoteiromania, scalp dysesthesia, trichotillomania, and trichotemnomania were considered as differentials.

Trichoscopic examination revealed several broken hairs, longitudinal splitting along each hair's whole length, and white flecks at the distal end. Most of the hair had three to five splits. There were white scales and excoriation marks [Figure 1c and d]. These features led to the diagnosis of trichoteiromania. The patient was referred for cognitive behavioral treatment to the psychiatry department.

Trichoscopy of the scalp and hair is a handy tool for correctly identifying many hair disorders. In this case, trichoscopy revealed distinctive "broom hairs," which were small, broken hairs with longitudinal splits running the length of the hair. Broom hairs can be found in scalp dysesthesia. Trichotillomania involves repetitive hair pulling, and dermoscopic features include irregular hair lengths with perifollicular hemorrhage, vellus hair, V-hair, black dots, flame hair, and trichoptilosis. Trichotemnomania involves compulsive cutting or shaving of hair, and dermoscopic features include very short, cleanly cut hair.^[1-3]

Declaration of patient consent

Patient's consent not required as patients identity is not disclosed or compromised.

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Nil.

Conflicts of interest

There are no conflicts of interest.

Use of artificial intelligence (AI)-assisted technology for manuscript preparation

The authors confirm that there was no use of artificial intelligence (AI)-assisted technology for assisting in the writing or editing of the manuscript and no images were manipulated using AI.

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