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A RETROSPECTIVE STUDY ON INTEGRATIVE MANAGEMENT OF ANDROGENIC ALOPECIA WITH INDIVIDUALIZED HOMOEOPATHY, XOGEN THERAPY AND LIFESTYLE OPTIMIZATION- A CASE SERIES

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ABSTRACT: This article deals with retrospective case series conducted on five adult male patients diagnosed with androgenic alopecia with a minimum 6-month follow-up, and adherence to the integrated protocol. The treatment consisted of individualised homoeopathic remedies, Xogen therapy (a combination of low-level laser therapy and a topical nutrient serum), dietary optimisation, vitamin supplementation, and specific scalp care instructions. Outcome measures included the Hair Pull Test (HPT), standardised patient-reported hair fall counts, investigator assessment of scalp health, and standardised clinical photography. All five patients demonstrated a progressive reduction in hair fall, with HPT scores improving from a baseline of 0-2/3 to 0-1/3. Patient-reported daily hair fall decreased significantly, and Improvements in scalp conditions (dandruff, oiliness, itching) were noted in all relevant cases. Visible increases in hair density and thickness were documented through clinical photography and confirmed by patient satisfaction scores. No adverse events were reported.

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INTRODUCTION

Androgenic alopecia (AGA) is a prevalent, genetically and hormonally mediated hair loss disorder affecting both men and women, characterised by progressive miniaturisation of hair follicles[1]. Clinically, it manifests as receding hairlines, vertex thinning, and reduced scalp hair density, often leading to significant psychological distress. Conventional interventions include topical minoxidil, oral finasteride, and hair transplantation; however, patient adherence can be limited by concerns over side effects and the need for continuous treatment[2]. This has led to growing interest in complementary and integrative therapies. Homoeopathy offers a holistic, individualised approach, aiming to address systemic imbalances that may contribute to hair follicle dysfunction [3]. Adjunctive therapies like XOGEN, which combines low-level laser therapy (LLLT) with a nutrient-rich topical serum, are designed to improve the scalp microenvironment and directly stimulate follicular activity[4]. This case series evaluates the clinical outcomes of five AGA patients managed using an integrated protocol of homoeopathy, XOGEN therapy, and targeted lifestyle and nutritional guidance, aiming to assess the potential synergistic benefits of this multifaceted strategy.

AIM AND OBJECTIVE

To evaluate the clinical outcomes of an integrative treatment protocol combining individualised homoeopathy, XOGEN therapy, and nutritional/lifestyle guidance for patients with androgenic alopecia (AGA).

METHODOLOGY

STUDY DESIGN: A retrospective, descriptive case series analysis of five patient records.

Inclusion Criteria:

1. Male patients, 18-50 years of age, with a clinical diagnosis of AGA (Hamilton-Norwood grade II-V).
2. Patients who underwent the integrated treatment protocol at Dr Batra's clinic
3. Minimum follow-up period of 6 months.
4. Availability of complete baseline and follow-up documentation, including clinical photographs.

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Exclusion Criteria:

1. Patients with other concurrent forms of alopecia (e.g., alopecia areata, scarring alopecia).
2. Use of other AGA treatments (minoxidil, finasteride) within 6 months before or during the study period.
3. Incomplete follow-up data.

INTERVENTION:

INDIVIDUALISED HOMOEOPATHY: A comprehensive homoeopathic case history was taken for each patient, covering hair loss pattern, scalp condition, associated systemic symptoms, diet, lifestyle, and mental/emotional state. Based on this analysis, a single homoeopathic remedy was prescribed in centesimal potency (e.g., 30C or 200C), with dosage and frequency individualised to patient response. Commonly indicated remedies included *Lycopodium clavatum*, *Silicea terra*, *Thuja occidentalis*, and *Acidum fluoricum*, selected based on symptom similarity.

XOGEN THERAPY: This proprietary therapy involves two components administered concurrently:

Low-Level Laser Therapy (LLLT): A device emitting red light (630-670 nm) was used for 20 minutes per session, twice weekly, to stimulate cellular activity and prolong the anagen phase of the hair cycle.

Topical Nutrient Serum: A serum containing peptides, growth factors, and botanical extracts (e.g., saw palmetto, caffeine, biotin) was applied post-laser therapy to provide direct follicular nourishment.

NUTRITIONAL AND LIFESTYLE GUIDANCE:

All patients received standardised dietary advice to optimise intake of key hair nutrients (protein, iron, zinc, biotin, vitamins D and B12). Recommendations included incorporating nuts, seeds, flaxseeds, and turmeric. Vitamin supplementation (Vitamin D3, B12, Iron, Biotin) was provided based on baseline blood test results. Patients were also advised on stress management techniques and a scalp care regimen (e.g., alternate-day washing with gentle shampoos, scalp massage with jojoba oil).

OUTCOME MEASURES:

Primary: Hair Pull Test (HPT) score (0-3 hairs pulled = negative, >3 = positive).

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Secondary:

1. Patient-reported daily hair fall count (collected via diary).
2. Investigator assessment of scalp health (dandruff, oiliness, itching on a 0-3 scale).
3. Standardised clinical photography (frontal, vertex, and temporal views taken at baseline, 3 months, and 6 months under consistent lighting and positioning).
4. Patient satisfaction score (1-5 Likert scale, where 5 = highly satisfied).
5. Ethical Considerations: This retrospective case series was conducted in accordance with ethical guidelines. Written informed consent was obtained from all patients for their treatment and for the use of their anonymized data and clinical photographs for publication and research purposes.

RESULT

A total of five male patients met the inclusion criteria. Baseline demographics and clinical characteristics are summarized in Table 1. All patients completed at least 6 months of follow-up.

Case	Age (yrs)	AGA Classification (Hamilton-Norwood)	Duration of Hair Loss	Key Initial Complaints	Baseline Lab Values (Relevant)	Previous Treatments
1	38	III vertex	3 years	Receding hairline, mild dandruff	B12: Normal, Vit D: Low, Iron: Normal	None
2	35	II	1 year	Diffuse thinning, oily scalp	Ferritin: 45.7 ng/mL, Vit D: 21.6 ng/mL	None
3	42	IV	Several years	Receding hairline, crown thinning	Vit D: Low, B12: Normal	Homeopathy (7 years prior)
4	45	V (post-transplant)	Since age 25	Poor density post-transplant	B12: 217 pg/mL, Vit D: 19.5 ng/mL	Hair transplant (3000 grafts)

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5	32	II	2 months	Acute hair fall, oily scalp	Baseline tests advised	None

Table 1: Baseline Demographics and Clinical Characteristics of 5 Patients with Androgenic Alopecia

Clinical Outcomes: All five patients showed progressive improvement across all measured outcomes.

Case 1: HPT improved from a baseline of 2/3 to 0/3 by month 3. Daily hair fall reduced from an estimated 30-40 to 5-10 hairs. Dandruff and itching resolved by month 4. Patient satisfaction score was 5/5 at 6 months. [Figure 1: Representative clinical photographs of Case 1 at baseline and 6 months showing increased hair density at the vertex].

Figure 1.1: Before and After Treatment

Figure 1.2: Before and After treatment

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Case 2: HPT improved from 2/3 to 1/3 by month 3. Daily hair fall decreased from 40-50 to 10-15 hairs. Scalp oiliness and dandruff were significantly reduced. Patient satisfaction score was 4/5 at 6 months.

Figure 2.1: Before andAfter treatment

Figure 2.2: Before and After treatment

Case 3: HPT was 1/3 at baseline and 0/3 by month 4. New hair growth at the crown and hairline was visible by month 4. Patient reported significant improvement in hair thickness. Satisfaction score was 5/5 at 6 months.

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Figure 3.1: Before and After treatment

Figure 3.2: Before and After treatment

Case 4: HPT improved from 2/3 to 1/3 by month 3. Post-transplant hair fall was controlled (5-10 hairs/day). Scalp health normalised, and a modest increase in density and volume was observed. Satisfaction score was 4/5 at 6 months.

Figure 4.1: Before and After treatment

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Case 5: HPT improved from 2/3 to 0-1/3 by month 3. Acute hair fall subsided to physiological levels (<10 hairs/day) as stress was managed. New hair growth was noted at 6 months. Satisfaction score was 5/5 at 6 months.

Figure 5.1: Before and After treatment

Safety: No adverse events or side effects related to the homoeopathic remedies, XOGEN therapy, or nutritional supplements were reported by any of the patients during the study period.

DISCUSSION

This case series demonstrates that a structured, integrative protocol can yield significant clinical benefits for patients with AGA. The observed reductions in hair fall (as measured by HPT and patient counts), improvements in scalp health, and visible increases in hair density are consistent with the therapeutic goals of AGA management. The strength of this approach appears to lie in its multi-modal nature. While conventional medicine often targets a single pathway (e.g., androgenic blockade with finasteride), this protocol aims to address the condition from several angles:

Systemic Balance (Homoeopathy): The individualised homoeopathic approach targets the patient's unique "dysbiosis" or constitutional imbalance, which may be influencing follicular health.

Direct Follicular Stimulation (XOGEN): The LLLT component of XOGEN is a well-documented modality for increasing ATP production in follicular cells, while the nutrient serum provides essential building blocks for hair synthesis [4] .

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Foundational Support (Nutrition/Lifestyle): Correcting underlying nutritional deficiencies (e.g., Vitamin D, B12, ferritin) and managing stress are critical for creating a systemic environment conducive to healthy hair growth [5] .

A key limitation is the inability to isolate the effect of each component. The positive outcomes are likely synergistic, representing a "whole-systems" effect rather than the sum of monotherapies. This is a common challenge in integrative medicine research. However, the results are comparable to those reported for conventional monotherapies. For instance, clinical trials for 5% minoxidil typically show a significant increase in hair count over a 6-month period, which aligns with the visible improvements seen in our patients[2]. The inclusion of a post-hair transplant patient (Case 4) is noteworthy, suggesting this protocol may be a valuable adjunct to surgical procedures by improving graft survival and enhancing overall scalp health.

Limitations

This study has several limitations inherent to a retrospective case series design:

1. Small Sample Size: With only five patients, the findings are not generalizable to the wider AGA population.
2. Lack of a Control Group: Without a control arm, it is not possible to definitively attribute the observed improvements to the interventions, as placebo effects and natural variation cannot be ruled out.
3. Confounding Variables: The simultaneous use of multiple interventions (homeopathy, XOGEN, diet, supplements) makes it impossible to determine the relative contribution of each.
4. Subjectivity: While objective measures like HPT were used, patient-reported outcomes and satisfaction scores are inherently subjective.
5. Selection Bias: As a retrospective review, these cases may represent patients who were particularly motivated or had a positive response, and may not reflect average outcomes.

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CONCLUSION

The integrative management of AGA using individualized homeopathy, XOGEN therapy, and targeted lifestyle/nutritional guidance was associated with positive clinical outcomes in this case series of five male patients. All participants experienced a reduction in hair fall, improvement in scalp conditions, and increased satisfaction with their hair's appearance. The protocol was well-tolerated with no adverse effects. These preliminary findings support the potential value of a holistic, multi-modal approach to AGA management. To build upon these results, future research should include prospective, randomized controlled trials with larger sample sizes to compare the efficacy of this integrated protocol against standard treatments and placebo. Such studies would help to elucidate the specific contribution of each component and establish standardised protocols for integrative Androgenic alopecia care.

REFERENCES

1. Messenger AG, Sinclair R. Follicular miniaturization in androgenetic alopecia. J Investig Dermatol Symp Proc. 2006;11(1):25–28**.**
2. Olsen EA. Female pattern hair loss. J Am Acad Dermatol. 2001;45(3 Suppl):S70–S80.
3. Homeopathy in dermatology: Hair disorders. Indian J Dermatol. 2012;57(2):101–106.
4. XOGEN Therapy and scalp health: Clinical overview. J Cosmet Dermatol. 2023;22(1):120–128.
5. Trueb RM. The value of hair care in androgenic alopecia. Dermatol Ther. 2009;22(6):566–577.
6. Rossi A, et al. Low-level laser therapy for the treatment of androgenetic alopecia: A systematic review. Lasers Med Sci. 2022;37(4):2009-2020.
7. Gupta S, et al. Nutritional factors and hair loss. Clin Cosmet Investig Dermatol. 2019;12:967-975.

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8. Mathur J, et al. A systematic review of homeopathy in the treatment of dermatological disorders. J Altern Complement Med. 2021;27(10):865-876.
9. Kanti V, et al. The role of nutrition in hair health: A review. Skin Appendage Disord. 2023;9(2):85-95.
10. Blume-Peytavi U, et al. A randomized, double-blind, placebo-controlled, multicenter trial of the efficacy and safety of 5% minoxidil topical solution in the treatment of androgenetic alopecia in men. J Am Acad Dermatol. 2019;81(3):AB23.

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