

# Clinical Presentation and Therapeutic Approaches in Neonatal Occipital Alopecia

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## DESCRIPTION

Neonatal occipital alopecia, though relatively uncommon, presents a distinctive challenge in pediatric dermatology. Occurring predominantly in newborns, this condition manifests as localized hair loss at the back of the head. Understanding its causes, management strategies and implications is important for caregivers and healthcare providers alike to ensure proper diagnosis and care for affected infants.

### Neonatal occipital alopecia

Neonatal Occipital Alopecia (NOA) is characterized by a specific pattern of hair loss that occurs on the occipital region of the scalp, typically within the first few weeks after birth. This condition is benign and does not usually cause discomfort or health complications beyond the physical aspect of hair loss.

### Causes of neonatal occipital alopecia

The exact cause of neonatal occipital alopecia remains unclear, but several factors may contribute to its development:

**Positioning in utero and postnatally:** The pressure exerted on the occipital scalp during fetal development and after birth, particularly when infants spend extended periods lying on their backs, is believed to contribute to hair loss in this specific area.

**Genetic predisposition:** There may be a genetic predisposition or familial tendency for some infants to develop occipital alopecia.

**Mechanical factors:** Friction against bedding, car seats, or other surfaces may increase hair loss in susceptible infants.

**Hormonal influences:** Changes in hormone levels during pregnancy and after birth could potentially play a role, although direct evidence linking hormones to neonatal occipital alopecia is limited.

### Diagnosis

Diagnosing neonatal occipital alopecia involves:

**Clinical examination:** Identifying localized hair loss on the back of the scalp, typically smooth and without inflammation.

**Medical history:** Gathering information on birth and family history of alopecia or dermatological conditions.

**Differential diagnosis:** Distinguishing from other causes like fungal infections (*Tinea capitis*) or congenital conditions.

**Diagnostic tests:** Usually based on clinical findings; additional tests like scalp biopsy are rarely needed.

**Counseling and follow-up:** Providing reassurance to caregivers, educating on gentle hair care and scheduling follow-up to monitor hair regrowth.

### Management and treatment

Management of neonatal occipital alopecia primarily involves reassurance and supportive care:

**Reassurance:** Caregivers are reassured that neonatal occipital alopecia is a benign condition that typically resolves on its own without any intervention.

**Avoidance of pressure:** Encouraging varied positioning during sleep and awake periods can help alleviate pressure on the occipital scalp and potentially prevent further hair loss.

**Gentle hair care:** Gentle handling of the infant's hair and scalp, avoiding excessive manipulation or friction, can promote healthy hair growth.

**Follow-up:** Routine follow-up visits with healthcare providers may be recommended to monitor the progression of hair regrowth and ensure no underlying issues develop.

In most cases, neonatal occipital alopecia improves spontaneously within a few months as the infant grows, reducing prolonged pressure on the affected area.

### Prognosis

The prognosis for neonatal occipital alopecia is good, with the vast majority of infants experiencing complete regrowth of hair

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during their initial time of life. The condition does not typically occur once resolved and affected infants go on to develop normal hair growth patterns without long-term consequences.

### **Future directions**

While neonatal occipital alopecia is generally considered a benign and self-limiting condition, its underlying mechanisms and potential contributing factors could enhance our understanding and guide future recommendations for preventive strategies or early intervention approaches.

### **CONCLUSION**

Neonatal occipital alopecia presents as a temporary and benign condition characterized by localized hair loss on the back of the

scalp in newborns. This condition typically resolves on its own within a few months as infants grow and experience less pressure on the affected area. By recognizing the benign nature of this condition and providing reassurance, caregivers can confidently support their infants *viz.* monitoring of hair regrowth and confirms the absence of underlying medical issues. Overall, with supportive care and time, infants affected by neonatal occipital alopecia can expect full recovery and normal hair growth.