

BREAST CANCER AND HAIR LOSS



**BREAST
CANCER
NOW** The research
& care charity

CONTENTS

Introduction	4
How you may feel	5
Telling other people	7
Which treatments cause hair loss?	10
Preparing for hair loss	14
Preventing hair loss during treatment	16
If you lose your hair	21
When your hair grows back	45
Permanent hair loss or thinning	51
Further support	54
Useful organisations	55

INTRODUCTION

Many people will lose either some or all of their hair as a result of treatment for breast cancer. For some, hair loss can be one of the most distressing side effects of treatment. You may feel that your hair is an important part of how you feel about yourself and losing it may affect your confidence and self-esteem. Some people find that being prepared for hair loss before it occurs helps them cope better when it happens.

This booklet explains how you may lose your hair and the effect it can have on you. It includes information on preventing hair loss, and tips on how to care for your hair and scalp during and after treatment. There is also information on different headwear you can try, including step-by-step guides to tying headscarves and tips on recreating eyebrows and eyelashes.

Although this booklet mainly talks about women, men who have lost their hair during breast cancer treatment may also find the information useful.

The experience of hair loss, scalp and hair care and hair regrowth will be different for everyone. There are also differences according to hair types. Speak to your treatment team for individual advice and support. You will also find a list of helpful organisations at the end of this booklet.

HOW YOU MAY FEEL

Hair loss is a visible side effect of treatment and can change how you view yourself. For many of us, the way we feel about ourselves is closely linked to the way we look, and losing your hair can be devastating. You may feel anxious at the thought of losing your hair, or angry and unhappy that this has happened in addition to your cancer diagnosis and treatment.

Hair loss may also make you feel vulnerable and exposed. You may see it as a constant reminder of your treatment, labelling you as a 'cancer patient' or feel that hair loss has prevented you keeping your diagnosis private. Some people feel guilty about being upset when they lose their hair as they feel there are other, more important things to worry about.

There's no right or wrong way to feel and, whether you lose some or all of your hair, the experience can be very distressing.

Some people describe hair loss as the most difficult side effect to deal with. Others find that losing their hair isn't as upsetting as they thought it would be. While some people adjust quickly to hair loss, others find that it takes longer, or is more difficult to accept and adapt to than they imagined.

'I felt like I'd lost a massive part of my identity. I also felt a lot of guilt about obsessing over it and being so upset, when I felt as though I should be grateful I was able to receive treatment.'

Mia

‘I was surprisingly OK about it. To me it was just part of the treatment I had to go through and not nearly as big a deal as I might have expected. The days when I felt really ill on the chemo it was actually quite nice not to have to bother about my hair.’

Sandra

In some cultures and religions hair has a particular significance. If hair has a special significance for you, losing it may affect your cultural or religious identity as well as your body image and self-esteem. This can make it even more difficult to come to terms with. If you are finding these feelings overwhelming you may wish to speak to your treatment team or find further counselling and support.

If there’s a chance that you will lose your hair, your treatment team will talk to you about what might happen before treatment starts. This should include information about any risk of permanent hair thinning or hair loss that could happen due to the treatment (see page 10). As well as talking about practical issues such as caring for your scalp or wearing a wig, you can also discuss your feelings about losing your hair and what support might be available to help you adjust to it.

Each person will find their own way of dealing with hair loss, but it can be helpful to talk to others who have been through the same experience. You can call our free Helpline on **0808 800 6000** to talk through ways of doing this. See the ‘Further support’ section on page 54 for details on how Breast Cancer Now can support you during this time.

TELLING OTHER PEOPLE

You may feel that losing your hair means you will need to tell people about your diagnosis when you would prefer not to. However, it's up to you who you tell.

Some people tell just their family and close friends, while others are happy to let everyone know.

People will respond to you losing your hair in different ways, and you may find some reactions difficult to understand.

A change in appearance may make you feel less confident about socialising with friends and family. However, withdrawing from your social life may make you feel more isolated or that your diagnosis is preventing you from doing the things you enjoy. Many people find continuing to meet up with others is a useful distraction and helps to keep some normality.

You may feel anxious about other people's reactions at first, but these feelings should gradually improve over time. It might help to talk to others who have experienced hair loss. See the 'Further support' section on page 54 for more information.

‘A number of friends/acquaintances avoided me when we passed in the street, sometimes suddenly turning in the opposite direction or hastily searching in a bag – I felt that had I kept my normal hair this would not have happened. I think they felt embarrassed and avoided me out of not knowing what to say.’

Ann

‘I showed my new look to everyone – work, family and friends – everyone said I still looked beautiful and my dearest friend said I showed the world a new meaning to headscarf fashion.’

Lorraine

Talking to your children

Your children may find it upsetting to see you without any hair and it might help if you prepare them for the fact that this may happen. You could let them know that hair loss is not usually permanent and what, if anything, you are going to wear on your head.

Many children are more accepting of physical changes than adults can be. They might want to help you select wigs, scarves or different headwear.

See the 'Useful organisations' section on page 55 for useful organisations and resources for talking to children.

'My six-year-old daughter cried when I told her I might lose my hair. However, she coped well with my hair loss and my wig even provided some entertainment value!'

Christine

'I told my seven-year-old nephew I had a poorly head and the doctor said I had to have my hair cut so he could make it better and the headscarves were to keep my head warm. I showed these to my nephew before having my head shaved and he tried on my headscarves and said they looked really cool... so when he saw me the week later wearing them he was not at all worried.'

Lorraine

WHICH TREATMENTS CAUSE HAIR LOSS?

Chemotherapy

Chemotherapy destroys cancer cells by interfering with their ability to divide and grow. It can affect healthy cells throughout the body such as the cells in hair follicles, which is why chemotherapy can make your hair fall out. As well as the hair on your head, this can also affect your body hair including eyebrows, eyelashes, nasal and pubic hair, and chest hair for men (see page 37).

Not all chemotherapy will make your hair fall out. Some drugs don't cause any hair loss and some will cause hair to thin. However, others make hair fall out completely. The most commonly used chemotherapy drugs to treat breast cancer will cause some hair loss.

How much hair you lose will depend on the type of drugs you are given and the dose. Drugs that are given in smaller doses on a weekly basis or are taken by mouth are less likely to cause hair loss.

If you are receiving a combination of chemotherapy drugs you are more likely to have hair loss. Your treatment team or chemotherapy nurse will talk to you about your treatment and how likely you are to lose your hair.

When your hair will fall out or start to thin depends on the type of drugs used, the dose and how often you have chemotherapy. If you have chemotherapy every two to three weeks, hair loss will usually start two to three weeks after your first treatment. If you have chemotherapy every week, the hair loss may happen more slowly.

If you are going to use scalp cooling (see page 16) the timing of any hair loss may be different.

Your hair will usually start to grow back around three to six months after your chemotherapy has finished (see page 45). Some people find that it starts to grow back before they have completed all their chemotherapy.

The charity Cancer Hair Care has useful information on its website (cancerhaircare.co.uk) explaining the hair loss and regrowth cycle in more detail.

Hair loss from breast cancer treatment is almost always temporary, but in some cases it can be long lasting or permanent. For information on coping with long term or permanent hair loss see page 51.

Targeted (biological) therapy

Targeted (biological) therapies are treatments that block the growth and spread of cancer.

Some targeted therapies may cause hair loss or hair thinning. These include trastuzumab deruxtecan (Enhertu), trastuzumab emtansine (Kadcyla), abemaciclib, palbociclib and ribociclib.

How much hair you lose will depend on the drug and whether you are given it alongside other drug treatments like chemotherapy or hormone (endocrine) therapy. Your treatment team will tell you about the treatment they are recommending and how likely you are to lose your hair.

Your hair will usually grow back after your treatment has finished. However, people with secondary breast cancer may have treatment for a longer period. This is because treatment is given for as long as your treatment team feels you're benefitting from it. This means hair loss or thinning may be long term.

You may find it helpful to read our information about targeted therapies on our website breastcancer.org

Immunotherapy

Immunotherapy rarely causes hair loss. However, a small number of people may experience hair thinning or hair loss with the immunotherapy drug atezolizumab. Hair loss may be more likely if you have atezolizumab and nab-paclitaxel.

You can find out more about atezolizumab on our website **breastcancer.org**

Radiotherapy

Radiotherapy uses high-energy x-rays to destroy cancer cells.

Like chemotherapy, it affects healthy cells as well as cancer cells so can cause hair loss, but only in the specific area being treated. This means that you will only lose hair from that area.

If you're having radiotherapy to the lymph nodes in your armpit as well as your breast you'll lose underarm hair in the area that has been treated. Men may also lose chest hair from the part of their chest that has been treated.

If you are being given radiotherapy to treat breast cancer that has spread to the brain, you may experience hair loss on your head. If you're having stereotactic radiotherapy (a very precise radiation treatment given to targeted areas), this will just be in the area being treated. If you're having radiotherapy to the whole brain, this will usually cause complete hair loss on the head. The radiographer (person trained to give radiotherapy) or specialist nurse will talk to you about the likelihood of you losing your hair before treatment starts.

Hair loss usually starts two to three weeks after your first radiotherapy treatment.

Any hair you lose will usually start to grow back once you have finished radiotherapy treatment, although it can take several months. It may not grow back completely and might be patchy. For some people hair loss may be permanent.

Hormone (endocrine) therapy

Taking hormone therapy such as tamoxifen, anastrozole (Arimidex), exemestane (Aromasin) or letrozole (Femara) can cause hair thinning. This is usually mild and might only occur for a short time. However, in some cases it can continue until treatment ends, which can be many years. People don't always tell their treatment team or GP about hair thinning when they're having hormone therapy so it's difficult to say how common this is.

Hair loss may be more likely if you have hormone therapy and other drug treatments such as chemotherapy or targeted (biological) therapy.

PREPARING FOR HAIR LOSS

Some people find that being prepared beforehand means it's easier to come to terms with losing their hair.

While some people wait for their hair to fall out naturally, you might want to have your hair cut short or even shave it off completely using hair clippers before your treatment starts. For many people this is a way of taking control rather than waiting for hair loss to happen, which can help reduce stress. If you shave your hair off, avoid using a razor or clippers without a guard to reduce the risk of scratching or cutting the skin, which could lead to infection.

Some people donate their hair if they have it cut off. There are organisations that you can donate your hair to for them to make into wigs for anyone with hair loss (see page 57).

If you think you'll want to wear a wig, it can be useful to choose it before you lose your hair. Some people begin trying out wearing their wig before treatment starts to help them get used to it. It can also help if you want a wig that matches your natural hair colour and style. See page 27 for more information on choosing a wig.

Some hospitals and local organisations offer hair loss services. These provide practical support and information about hair loss for people who are likely to lose their hair or have already lost it. They may give you:

- Tips on caring for your hair and scalp before, during and after your treatment
- Information about cold caps (see page 16)
- The opportunity to try on different types of headwear, providing an alternative to wearing a wig
- Advice on feeling more confident about your appearance
- Information on hats, headscarves and fringe hairpieces and where to get them
- Practical tips on using makeup to give the illusion of eyelashes and eyebrows

You can ask your treatment team or local cancer information centre for more information about services available in your area.

The charity Cancer Hair Care has further information to help people prepare for hair loss ([cancerhaircare.co.uk](https://www.cancerhaircare.co.uk)).

‘Before I even started treatment, a great friend took me wig shopping so I wouldn’t have to do it at a time I’d feel emotional. That was one of the best things that happened to me.’

Eithne

‘I decided to book my hairdresser to come to my home to shave it. I had two of my dearest friends with me during the time, I put the iPod on with some happy music.’

Lorraine

PREVENTING HAIR LOSS DURING TREATMENT

Scalp cooling

Scalp cooling may stop you losing some, or all, of the hair on your head during chemotherapy. This technique works by reducing the blood flow to the hair follicles, which reduces the amount of chemotherapy drugs that reach them.

How well scalp cooling works depends on the chemotherapy drugs and doses used, and it does not work for everyone. If you do keep your hair, you may find that it's patchy or thinner.

Scalp cooling is suitable for all hair types, although it may be less effective on Afro hair. You can find more information about scalp cooling and caring for your hair type at coldcap.com

There are two widely available ways of cooling the scalp. One method uses a cold cap, which is a gel filled hat that is chilled and replaced at regular intervals during your chemotherapy treatment to keep the scalp cool. The other system uses a refrigerated cooling machine to continuously pump a liquid coolant through a single cap.

Both methods involve wearing a cold cap before, during and for one to two hours after your treatment. Increased cooling times may be recommended for different hair types. This may mean you're at the hospital for longer.

You can ask your treatment team or chemotherapy nurse if scalp cooling is available and whether it would be suitable for you. The condition of your hair and any previous use of chemicals on it may affect how well scalp cooling works. Your chemotherapy nurse will discuss this with you.

Some doctors have been concerned that scalp cooling may increase the risk of developing secondary cancers in the scalp due to the possibility of constricted blood vessels limiting the amount of chemotherapy reaching the area.

However, studies looking at people who had scalp cooling during their chemotherapy treatment have found that scalp cooling does not increase the risk of developing secondary breast cancer in the scalp.

Scalp cooling is not suitable if you're having radiotherapy to treat breast cancer that has spread to the brain, as hair loss can't be prevented.

The organisation Cancer Hair Care has more information and videos on scalp cooling that you may find useful, visit cancerhaircare.co.uk/scalp-cooling

Tips for scalp cooling

Your treatment team should give you guidance on scalp cooling depending on the type of cooling device your hospital uses.

The following tips may help:

- Removing hair extensions, weaves or braids before scalp cooling
- Gently combing back your hair with a wide tooth comb or your fingers so the front hairline is visible
- Lightly dampening your hair underneath the cap with lukewarm water
- Applying a small amount of conditioner to the hair to help remove the cap
- The cold cap should cover the whole scalp and fit snugly

You don't need to cut your hair short before you start using a cold cap. However, if your hair is very long or thick it may be helpful to cut it to reduce some weight and make it more manageable.

You may find the cap uncomfortable, as it's very cold and often quite heavy. Some people get headaches, but these usually wear off quickly once the cap is removed.

Being able to tolerate the cold will vary widely from person to person. Some people report feeling discomfort, aching and sometimes nausea in the first 10–15 minutes of the treatment. These side effects are usually mild and should go away as you get used to the cold. Wearing warm layers, sipping hot drinks and covering yourself with blankets can also help.

If you're struggling with the side effects of the cold cap speak to your chemotherapy nurse or treatment team. They may recommend taking mild pain relief, such as paracetamol, before wearing the cold cap.

As the hair will still be damp when the cold cap is removed you may find it more comfortable to take a hat or head covering with you to wear on the way home.

Things like water spray bottles, hair conditioner and extra layers may not be available in the chemotherapy day unit so you may want to bring your own.

'I did use the cold cap and can only explain the experience as having a brain freeze for 10–15 minutes. Once the freezing had taken place I did not feel the cold cap anymore. I'm so pleased I persevered with it, I kept a good covering of hair throughout treatment, which helped keep me much more positive.'

Amanda

Looking after your hair during treatment

If chemotherapy doesn't cause hair loss, it may make it brittle, dry or straw-like, so it's a good idea to treat your hair as gently as possible. Hormone therapy can also cause the hair to thin and feel fragile.

Due to its structure, African and Caribbean hair is the most vulnerable to damage of all hair textures so it is recommended to take special care and use specific products. Cancer Hair Care (cancerhaircare.co.uk) have a chemotherapy hair loss guide for people with Afro hair.

'I kept it moisturised with natural organic oils and wore satin head scarves (important for retaining moisture in Afro-Caribbean hair).'

Rebekah

Hair care tips

The following tips may be helpful for all hair types:

- Use a mild, unperfumed shampoo and conditioner
- Try not to wash your hair more than twice a week or less than once every ten days
- Use warm rather than hot water
- Pat your hair dry rather than rubbing it
- Brush or comb your hair gently with a soft hairbrush or wide tooth plastic comb
- Massage the scalp to improve the blood supply to the hair follicles

Things to avoid

You may want to avoid the following to help protect your hair:

- Overly tight plaits or braids as they may cause tension and this may damage your hair
- Using elastic bands to tie back hair
- Hair colours and dyes, perms, relaxers and other products containing strong chemicals
- Products containing alcohol, such as hairspray, which can irritate the scalp
- Excessive heat from hair straighteners, hairdryers, hot brushes and heated rollers
- Hair extensions, weaves and braids as these can weaken the hair

Hair thinning, poor condition or a dry and itchy scalp can also be related to poor diet, stress and drinking too much alcohol. Changes to your diet and lifestyle may help improve the condition of your hair. You can find out more about a healthy diet from our booklet **Diet and breast cancer**.

IF YOU LOSE YOUR HAIR

Hair loss will usually begin gradually within two or three weeks of starting chemotherapy. For some people it may be sooner and more sudden. Your scalp might feel tender as the hair thins and falls out.

The first signs that you are losing your hair may be finding hair on the pillow in the morning or extra hair in your hairbrush. This can still be a shock and very distressing even when you're prepared for it to happen. Wearing a soft hat or turban in bed to collect loose hairs might help.

Scalp care

Looking after your scalp if you experience hair loss is important as this area may feel tender and the skin may be sensitive.

If your scalp is dry, flaky or itchy you can use a small amount of unperfumed moisturiser or natural oils such as coconut or almond to help with this. Some people use aromatherapy oils, but it is best to consult a trained aromatherapist as the oils can be very strong.

If you are having radiotherapy to treat breast cancer that has spread to the brain, your treatment team may discuss what skincare products you can use on your scalp.

It's important to protect your scalp from the sun. Cover your head when in the sun or use a high protection factor sun cream at all times, as the scalp is particularly sensitive.

We lose a lot of heat from our heads so cover your scalp in colder weather.

Continue to wash your scalp regularly. If you are wearing a wig, head scarf or hat, wash these regularly to keep them clean and avoid irritation to your scalp.

What to wear

Many people wear wigs, headscarves, hats or other headwear until their hair grows back. There are many different reasons such as keeping warm, for cultural or religious reasons, personal preference or concern about what other people might say.

Different people prefer to wear different things so choose what you feel comfortable with at the time. You may want to wear a wig when going out or on special occasions, but feel more comfortable wearing a hat or headscarf around the house. Or you might prefer not to wear anything on your head.

'I did not want to always look like a cancer patient. There were many times, though, that my wig was too hot in the summer months. So I often would wear a hat or scarf.'

Veronica

'I chose not to wear a wig. I didn't want to feel artificial or someone else's hair on my head, plus it was a hot summer and I was always feeling hot anyway.'

Androulla

'I didn't even consider a wig. I've always had quite short hair anyway so no hair wasn't a massive change. I was more than happy to wear a baseball cap.'

Andrew

'[I] never [felt] very comfortable but knew that I did a lot more in the wig than I would ever have done without it.'

Ann



Wigs

Modern wigs are natural looking and comfortable. They can be made from real or synthetic hair or a mixture of both, and are available in many different colours and styles for both men and women.

‘I lost count of how many people genuinely commented on how well my hair had grown back when I was wearing [my wig], and really not aware it was a wig!’

Kim

Help with the cost of your wig

Synthetic wigs are available on the NHS. They are free in Scotland, Wales and Northern Ireland. In England, you’ll usually have to pay a charge for an NHS wig. Or you may qualify for a free wig if:

- You are an inpatient when the wig is supplied
- Your weekly income is low
- You or your partner are receiving Income Support, income-based Jobseeker’s Allowance, income-related Employment and Support Allowance, Pension Credit Guarantee Credit or Universal Credit and meet the criteria
- You have an NHS Tax Credit Exemption Certificate
- You are named on a help with health costs (HC2) certificate

Some hospitals give patients a free synthetic wig even if they are not eligible for help towards the cost. To find out if you’re entitled to a free wig, talk to your treatment team.

If you are entitled to a free wig through the NHS, you can get this from your hospital or a wig shop in your local area (see ‘Your wig fitting appointment’ section).

You may be entitled to a new wig on the NHS every six months if necessary. Your chemotherapy or breast care nurse should be able to advise you on how to go about getting your replacement wig.

If you aren't entitled to a free wig you can still get one through the NHS at a subsidised rate if you have a low income. To apply for this you'll need an HC1 form, which you may be able to get from your hospital or from nhsbsa.nhs.uk/nhs-low-income-scheme

If you're having treatment as a private patient the cost of a wig may be covered in your policy. Otherwise you'll need to pay for one.

Only wigs made of synthetic hair are available on the NHS, although real hair wigs can be supplied if you are allergic to acrylic wigs. If you prefer to buy a wig made of real hair, you'll need to pay for it. Real hair wigs are usually more expensive (see page 28).

People whose hair loss is caused by cancer treatment do not have to pay VAT on wigs bought from a shop or other supplier. To claim back the VAT you'll need to complete and post a VAT form. Most stores will provide this form at the time of purchase.

The tax can't be claimed back at a later date.

You may be able to get financial help towards the cost of a wig from Macmillan Cancer Support (see 'Useful organisations' on page 55) but your treatment team, GP or social worker will need to apply for you.

Your wig fitting appointment

Many hospitals have an appliance officer or specialist wig fitter who can give you advice and fit you with a suitable wig. Ask your breast care nurse or chemotherapy nurse what's available in your area.

Your hospital may have a limited range. If you cannot find a suitable wig at your hospital, your treatment team may be able to recommend another wig supplier in your local area.

If you're paying for your wig yourself you may prefer to go to a hairdresser, department store or wig retailer. This is usually more expensive. You can find a list of wig suppliers on page 56.

Being fitted with a wig can be a time when you have to face the reality of losing your hair, and it can be upsetting. Experienced wig specialists understand this and will do their best to make you feel at ease.

Most wig fitters have a private room where you can be fitted and try on wigs, but if not, don't be afraid to ask for one.

You may find it helpful to take a relative or friend with you for support and to help you choose.

Some wig fitters may offer telephone or video appointments where they are able to offer a wig fitting service.

'I took my daughter with me to help choose. That was really helpful. The shop was fantastic and spent lots of time helping me choose the right one, cutting it to just my style, showing me how to put it on etc... I felt I looked really good – in fact it looked better than my hair had!'

Sandra

Choosing a wig style

Some people want to match their wig to their hair type, colour and style. It can be easier to do this by choosing one before your hair falls out. Some people decide to have a complete change.

If you haven't yet lost your hair the wig should be quite tight when fitted so that it gives a good fit later on. This can be adjusted later if needed.

Wigs for black and ethnic minority groups

If your hospital wig fitting service or local wig supplier is unable to offer you a wig that matches your hair type and texture, you may need to find a specialist wig fitter. Your breast care nurse or treatment team may be able to offer information on what is in your area. For further support and advice you can contact Cancer Hair Care or Cancer Black Care, see 'Useful organisations' section for more information.

Synthetic and real hair wigs

Synthetic wigs are light and easy to care for. They're often pre-styled and can be washed and left to drip dry. They're also cheaper than real hair wigs. The cost of a real hair wig will depend on the length and style you choose.

The average costs:

- Synthetic wigs cost between £50 and £200
- Wigs made from real hair cost between £200 and £2,000

Wigs made from real hair can last longer but they need to be handled more carefully. They may need professional cleaning and restyling. If you're not feeling well during treatment, you may find this more difficult.

Getting your wig professionally styled

Wigs can be cut and styled to make them look more natural and feel more personal. The hair in some wigs is packed very densely, which can give them a slightly unnatural look. This can be thinned out by trained hair professionals to make the wig look like your own hair. It's a good idea to check that your hairdresser or wig specialist has experience of cutting wigs. You can find a directory of wig cutting salons in your area at mynewhair.org

‘I wanted to be/look as much like the old me as possible. My hairdresser was absolutely wonderful – tweaked my excellent NHS wig to take out heaviness in the bob and shaped hair around the face to resemble my normal style.’

Ann

Tips on wearing a wig

- Your wig should fit snugly and shouldn’t move around your head
- If you’re worried about it falling off, secure it with hypoallergenic double-sided tape (available from wig suppliers)
- If it feels hot and itchy, you can wear a thin cotton lining or skullcap under your wig
- Avoid excessive heat or steam if you have a synthetic wig as it can damage the wig
- Don’t get too close to flames as this can melt synthetic hair or damage real hair

If you have an ‘off-the-shelf’ wig and wear it every day it will last about three to four months. After that the elastic gets looser and this affects the fit, although it may be possible to replace the elastic. You may be able to get a new wig on the NHS if necessary (see page 25).

Donating your wig

Once you no longer need your wig you may consider donating it. See ‘Useful organisations’ section for more information on donating your wig.

Headwear

Some people choose not to wear a wig.

Whether or not you wear a wig, there may be times when you want to cover your head. Hats, headscarves and turbans can be found in a wide variety of styles and colours and can help you feel more confident about the way you look. They can also keep you warm in winter and protect your head from the sun in summer.

‘I did not want to try to look the same... [After shaving my head] I chose a headscarf to match my next day outfit and said to the mirror “You look OK” and I wore headscarves in all different designs and colours from that point forward.’

Lorraine

Headscarves and bandanas

Headscarves and bandanas (a triangular or square piece of cloth) can be worn in many different ways to create a variety of looks. Choose different colours, patterns and textures to suit your mood and coordinate your headwear with your outfit.

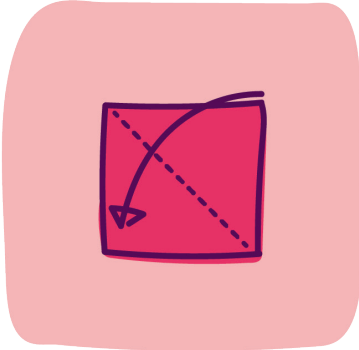
The most comfortable headscarves are made from a natural fabric that are gentle on the scalp and allow it to breathe. Soft cotton is probably best, as satin and silk materials can slide off the head more easily.

‘I wore and still do wear a lot of colourful wraps and scarves, I learnt to tie them in various ways from YouTube videos.’

Rebekah



How to tie a headscarf or bandana



1. Lay a square headscarf flat with the underside facing up. Fold the headscarf diagonally into a triangle.



2. Place the headscarf on your head with the folded edge up. Fold the headscarf about 2.5cm below your natural hairline and the points at the back.



3. Tie the outer points into a double knot behind your head over the middle triangle point (if you are doing more than the basic head wrap you may only need a single knot).



4. The flap should be underneath the knot. Pull any excess headscarf from under the knot.



Now you have the basic headwrap, you can experiment with different looks and styles.

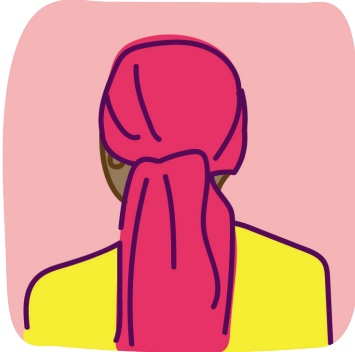
Tips

For a basic headwrap you will need a scarf at least 75cm x 75cm. For more elaborate styles it needs to be 100cm x 100cm.

To give more height and a better head shape you can:

- Scrunch or pleat the long edge of the headscarf
- Roll the edge of the headscarf around a 25cm long foam tube (such as a finger bandage) before putting it on your head
- Place a foam shoulder pad on the crown of your head under the headscarf. You can attach it with double-sided tape available from wig shops

Variations



Wear the ends of the headscarf loose – particularly if it's sunny or if you're going to wear a hat on top.



Tie the ends of the headscarf in a bow or gather all the ends in an elasticated ponytail band to help make loops and tails to form a bow.



Twist the three ends together – it will look like a twisted rope – and wrap tightly around the knot for the look of the bun or rosette. Secure the loose ends by tucking them through the centre of the bun.



If you have a twisted headband (see right), pull all three ends together and tuck securely over and under the knot to give the illusion of a French hair roll.

How to create a twisted headband



1. Twist the long ends separately.



2. Bring them forward and tie them at the front of your head.



3. Continue twisting and tucking the ends in around your head.



4. At the back, twist the short end and tuck it in.

Tips

You may find it helps to twist one end at a time and secure it with a hairgrip, paperclip or elastic band while you twist the other one.

You can vary this by twisting in coloured cord, beads or a contrasting headscarf to match what you're wearing.

The organisation HeadWrappers offers advice, online support, video tutorials and practical tips on wearing headwear. See headwrappers.org for details.

Hats

When looking for a hat, you may want to choose a style that can be pulled down to cover your hairline. As well as specialist hat shops and department stores, wig and headwear suppliers often stock suitable hats. You can also buy hats and caps with detachable hair pieces.

Turbans

Cotton or jersey turbans are light, comfortable and easy to wash. They can be bought from online wig and headwear suppliers, or in some stores, pharmacies and hospital shops.

Headbands

If you are experiencing hair thinning or have patches of hair loss, wearing a wide headband may cover the area that is thinning. Wide headbands can be bought online, in some department stores and from wig and headwear suppliers.

Fringes

If you normally have a fringe, you may feel that you still don't look right no matter what headwear you choose. Worn under a headscarf or hat, a fringe hairpiece on a Velcro band may work for you. Fringes can be trimmed and shaped and are available from wig suppliers.

You can also buy hairpieces that you can fix under the back of a hat. They give the appearance of hair and, like the fringes, can be styled to suit you.

You can find a list of suppliers of hats, turbans and fringes on our website at breastcancer.org/headwearsuppliers

‘I bought a fake fringe with long side pieces, which worked very well under a hat and was cooler than the wig in summer. Very good when running.’

Ann

Changing the emphasis

Some people feel more confident if attention is directed away from their hair and their head. There are a number of ways of doing this, such as with jewellery, makeup or clothing.

Body hair

You may lose some or all of your body hair after starting chemotherapy, including eyebrows, eyelashes, nose hair, underarm and pubic hair, and chest hair for men. This can be a shock, especially if you’re not prepared for it.

Avoid highly perfumed deodorants if you’ve lost hair under your arms, as they can irritate the skin.

‘I also lost all body hair, which was actually a blessing as it meant at least I didn’t have to shave my legs, bikini line and armpits during chemo. Every cloud has a silver lining! I lost all my eyelashes and nasal hair too.’

Amanda

Eyelashes and eyebrows

Losing your eyelashes and eyebrows can be upsetting, especially if you're not expecting it to happen. Some people don't lose their eyebrows or eyelashes, other people's eyebrows may thin, and others lose them altogether.

Boots, in partnership with Macmillan, offer trained beauty advisors who can give skincare and beauty advice for people having treatment for cancer.

See boots.com/macmillan/feelmorelikeyou for more details.

'I used a lovely eyebrow pencil and I used grey eye shadow and a liquid eye liner softy around my eyes. My friends said with my head shaved it showed my eyes more.'

Lorraine

Eyelashes

If you lose your eyelashes, your eyes may get sore easily. If your eyes become irritated ask your treatment team for some eye drops to help reduce the soreness.

You can use eyeliner to draw along the top of your eyelid to give the illusion of lashes. Choose eyeliner either the colour of your own lashes or a contrasting colour that goes with your skin tone.

If your eyes aren't feeling sore or sensitive you may want to try false eyelashes. Some people can be allergic or sensitive to the adhesive used to keep the eyelashes in place. Check with your treatment team if you're unsure.

False eyelashes come in many different styles, lengths and thicknesses. You could choose eyelashes that are similar to your own, or try ones that are completely different. You may find that lighter styles irritate your eyes less and will stay in place better. Makeup counters in department stores are a good source of help, or try a local beauty salon.

Eyelash extensions (usually applied to your existing eyelashes in a salon) are not recommended.

‘I used false eyelashes, which made a massive difference but were quite a hassle! I’m now using an eyelash serum.’

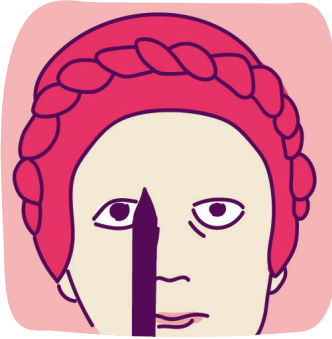
Mia

You can find quick and simple makeup video tutorials for people dealing with hair loss and skin changes after breast cancer treatment on our website breastcancer.org/makeup-tutorials

Eyebrows

If you lose your eyebrows or they are thinner, you may be very conscious of how this changes the way you look. You can recreate a natural appearance by using eyebrow makeup in a shade that matches your original hair colour.

To create a natural eyebrow shape



1. Hold an eyebrow pencil vertically against your outer nostril, in line with the inner corner of your eye. Mark a small dot above your eye. This is where your eyebrow will start.



2. Move the top of your pencil so it is now in line with the centre of your pupil, keeping the bottom end against your outer nostril. Mark another dot, slightly higher than the first one. This is where your eyebrow arch will be.



3. Line up the top of your pencil with the outer corner of your eye, and mark a final dot. This is where your eyebrow will end.



4. Join the dots using eyebrow makeup.

There are all kinds of eyebrow products available from the major cosmetic companies – from eyebrow shapers, stencils and finishers to pencils, pens and powders. There are also eyebrow kits. Makeup counter staff in department stores will be able to give you a demonstration and advise you on the most suitable products for your skin type and colour.

Stick-on eyebrows for people experiencing hair loss are available in a range of shades and shapes, and come in synthetic or human hair. You can find them at many cosmetic retailers and wig suppliers. Visit breastcancer.org/headwearsuppliers

Stick-on eyebrows are developed for people who have hair loss for a range of reasons and not specifically for people experiencing hair loss from chemotherapy treatment. Chemotherapy can cause skin changes and sensitivity so the adhesive may cause irritation. Test a small area of skin first (patch test) to check for any reactions.

Semi-permanent makeup

Some people have their eyebrow shape recreated with micropigmentation or microblading. Both micropigmentation and microblading are types of semi-permanent makeup.

Both use a tattooing technique where colour (pigment) is implanted into the skin. They are given in slightly different ways.

Micropigmentation

A machine is used to add small dots of colour to the skin, allowing colour to gradually build up.

This technique can be used to create eyeliner to give the illusion of eyelashes and to recreate eyebrows that have thinned or been lost. Micropigmentation can also be used on the scalp where the hair has thinned.

The colour is implanted slightly deeper into the skin and this means it can last longer. How long it lasts depends on your skin type but usually it will last between two and three years.

Microblading

Microblading is done by hand and involves drawing precise hair strokes that recreate the look of natural eyebrows.

The colour is not implanted as deep into the skin as micropigmentation, which means it doesn't last as long. How long it lasts depends on your skin type but usually it will last between one year and 18 months.

Things to consider

These treatments are not available on the NHS so you will have to pay privately. As the results are semi-permanent, make sure you choose a reliable provider that has good recommendations. You may want to look for a provider that specialises in hair loss. The provider should do a skin-sensitivity test (patch test), usually a minimum of 24 hours before having any semi-permanent makeup.

There is more information about permanent makeup on the Cancer Hair Care and NHS websites (see page 55).

If you are considering semi-permanent makeup it is best to check with your treatment team. They will be able to offer advice around timing of having these procedures done. If you are currently having chemotherapy, there may be a risk of infection from having these procedures done.

See page 49 for information on when your eyelashes or eyebrows might grow back.

Look Good Feel Better workshops

Look Good Feel Better is an organisation offering free hair care, skincare and makeup workshops to help women and men with the visible side effects of cancer treatment. This includes redefining the eye area for people who have lost their eyebrows and eyelashes. The workshops are held online and throughout the UK in hospitals, cancer care centres and the community and cater for women and men of all skin tones.

Look Good Feel Better runs a workshop presented by Cancer Hair Care on hair loss, wig and scalp care, headwear, eyelashes, eyebrows and new growth.

Visit lookgoodfeelbetter.co.uk for more details and to find your nearest workshop. Alternatively, you can call 01372 747500 or email info@lgfb.co.uk



WHEN YOUR HAIR GROWS BACK

For most people hair usually starts to grow back once their treatment is finished, and sometimes it may start to grow back before it's finished. It may be weak and fragile or softer to begin with but over time the condition and texture of hair becomes stronger.

Will hair grow back differently?

Hair can sometimes grow back differently to what it was like before treatment. For example:

- The colour may change
- The texture may be different
- It may be curlier
- It may be straighter

This change may only be temporary but occasionally it will be permanent.

For some people having hair grow back differently to what they are used to can be very difficult. You may feel it is another change to your appearance that you need to cope with, especially if you're not able to treat or style your hair in the way you're used to.

How quickly does hair grow back?

How quickly hair regrows will vary from person to person but most people will have a full covering of hair three to six months after treatment finishes. For some people this may be patchy.

Many women wonder whether there is anything that can speed up hair regrowth.

There is limited evidence that a drug called minoxidil may help when applied to the scalp. Minoxidil can also be found in some hair loss treatments. You can talk to your GP, a dermatologist (doctor who specialises in skin problems) or a trichologist (person who specialises in hair loss problems but is not medically trained) about the possibility of using minoxidil.

The condition of our hair is strongly linked to lifestyle factors including diet. A healthy diet that is balanced and varied provides all the nutrients needed for healthy hair. You can find out more about a healthy diet from our booklet **Diet and breast cancer**.

Although there are supplements available that claim to help strengthen hair or promote hair growth, there is limited evidence to support this. If you are considering taking any supplements, it is always best to check with your treatment team first, particularly if you are receiving treatment such as chemotherapy or hormone therapy.

Although there is some evidence that caffeine shampoos may promote hair regrowth, there is currently no evidence that these shampoos work for people who have had breast cancer treatment.

New hair growth can be fragile and it's best to treat it with care until it feels stronger. You might find the tips on page 20 useful. You can also talk to your hairdresser about how best to look after your hair. Visit Cancer Hair Care for more information on how best to look after your hair when it grows back.

You may also find there is a period when your hair is still growing back but you aren't quite ready to go out with your own hair. You may choose to continue wearing a wig or other headwear until your hair is longer.

‘I like using conditioner to make it soft rather than spiky, and I used [hair thickening fibres], which is excellent for adding a bit of thickness and covering bald patches.’

Mia

‘My hair grew back fairly patchily so I shaved my head at the beginning in order to keep it looking even. Even now, nearly three years after my hair has grown back it’s still a lot thinner than it was before so I tend to keep it very short.’

Andrew

‘I took frequent selfies and shared with a Breast Cancer Now Forum group – very encouraging to see everybody’s hair returning and share stories.’

Ann



Eyelashes and eyebrow regrowth

Body hair, such as your eyebrows and eyelashes, may grow back more quickly or more slowly than the hair on your head.

Eyelashes can be quite patchy when they start to grow back. They may take up to a year to grow back fully although they will usually grow back six months after treatment finishes. Studies have also shown that applying the drug bimatoprost to the eyelids may improve the regrowth of eyelashes. You can talk to your GP, a trichologist or a dermatologist about whether this is an option for you.

Eyebrows will usually start to grow back after treatment finishes, but they may grow back thinner or patchier. They tend to grow back slower than head hair and in rare cases they don't grow back at all.

'My eyelashes grew back about three quarters of how much I had before. My eyebrows grew back but much less and so the colour is much lighter.'

Androulla

Colouring your hair

It's best to wait until your hair is longer and your hair and scalp are in good condition before applying permanent hair colour.

Although there is limited research in this area Cancer Hair Care recommends you allow at least an inch (2.5cm) of hair to grow before colouring it, so you can be sure the hair is of a good quality.

For some people this may be six months to a year, for others it will be sooner. You can talk to your hairdresser about when to begin colouring your hair. Before you have a permanent hair dye applied, your hairdresser should check how your scalp and hair may react by doing a skin-sensitivity test (patch test). They may recommend using more natural hair dyes such as henna or vegetable-based dyes as these tend to be gentler on the hair and scalp. Natural hair dye brands can be found online, in health food shops and some pharmacies.

Temporary or semi-permanent dyes are a good way to find out if a hair colour suits you before you try a permanent colour.

For more information see My New Hair and Cancer Hair Care websites (see 'Useful organisation' section).

PERMANENT HAIR LOSS OR THINNING

Hair loss caused by chemotherapy is almost always temporary.

However, there is evidence that some chemotherapy drugs may result in long lasting or permanent hair loss. Permanent hair loss is described as incomplete regrowth of hair six months or more after completing treatment.

Although uncommon, taxane drugs such as docetaxel may cause long lasting or permanent hair loss. There is some limited evidence to suggest that paclitaxel may also cause long lasting hair loss.

Hair loss is common in both people with cancer and in the general population. This can make it difficult to be sure whether problems with hair regrowth are due to treatment, genetics or other factors such as extreme stress or medical conditions. It could be down to a combination of these things.

After radiotherapy, any hair that you have lost from the treated area will usually grow back (see page 45). However, the hair may grow back thinner, patchy or may not grow back at all. This will depend on the dose of radiotherapy and the number of treatments you've had. Your treatment team will be able to let you know how likely this is to happen.

Some people continue taking hormone therapy for up to ten years, which may cause some hair loss and hair thinning. Once you finish this treatment your hair should return to how it was before treatment (see page 45). However, this may take time and for some people hair may not fully return to the same thickness.

It's important to talk through any concerns you may have about hair loss with your treatment team when making decisions about treatment.

Treating long-term hair loss

If hair loss after treatment persists, you may wish to ask for advice from a specialist.

Your treatment team or GP may be able to refer you to a dermatologist (doctor who specialises in skin problems) who has a specialist interest in managing hair loss. They can offer information and advice to people experiencing hair loss. You can find the contact details of your nearest specialist on the British Hair and Nail Society website bhns.org.uk

There are also a number of trichologists (people who specialise in hair loss problems but are not medically trained) who can offer advice. The Institute of Trichology provides details of registered practitioners. See trichologists.org.uk for more information.

If you are experiencing long-term hair loss or thinning you may want to seek further support from the organisation Alopecia UK (alopecia.org.uk).

Camouflaging long lasting hair loss or thinning

Semi-permanent makeup

Micropigmentation can be used on the scalp, eyes and eyebrows to recreate the illusion of hair. Microblading is another technique that can be used to create the illusion of eyebrows. See page 41 for more information.

Hair concealers

A concealer is a temporary cosmetic that can be used to disguise thinning hair and camouflage the scalp. Hair concealers can be bought over the counter or online as coloured shampoos, mousses, creams, wax pencils, powders, hair fibres or aerosols and should be applied as directed. You may need to check if a skin-sensitivity test (patch test) is needed before applying. Some concealers may not be waterproof so will need to be reapplied regularly. You can read more about hair concealers on the British Hair and Nail society website bhns.org.uk

Hair replacement systems

Cosmetic hair restoration is a solution for hair loss in which human hair can be fixed to the scalp using a specialist scalp glue or hair bonding technique. This is usually only an option for people who have permanent hair loss.

The most common type of hair replacement system works by attaching a fine mesh to any remaining hair. This allows hair to be added where needed to give the illusion of a full head of hair.

Making it look like hair is growing from the scalp, the replacement can usually be cut to recreate the hairstyle you had before your hair loss. However, these types of hair replacement are not currently available in the NHS and can be time consuming and expensive.

FURTHER SUPPORT

Breast Cancer Now

Losing your hair can be a particularly distressing side effect of treatment. Finding ways to feel more confident in your new appearance can help you to accept and adjust to what has happened, and feel more like yourself again.

Everyone's experience of hair loss is different and there's no right or wrong way to feel. It's important you find your own way of dealing with it, but it can be helpful to talk to others and find out what worked for them. Some areas have support groups where you can talk to other women who have experienced hair loss. Your breast care nurse or cancer information centre will also be able to tell you about local support.

You can find your local cancer information centre through the NHS website at [nhs.uk/service-search](https://www.nhs.uk/service-search)

Breast Cancer Now has a number of services to help support you:

- Speak to our nurses or trained experts by calling our Helpline on **0808 800 6000** (Monday to Friday 9am–4pm and Saturday 9am–1pm)
- When you're facing breast cancer treatment and hair loss, it can help to talk it through with someone who's been there too. Call our Someone Like Me service on **0114 263 6490**
- You can also chat to other people who understand what you're going through in our friendly community for support day and night. Look around, share, ask a question or support others at [breastcancernow.org/forum](https://www.breastcancernow.org/forum)
- Join one of our courses or support groups, based in your local area or online. We'll give you the chance to find out more about treatments and side effects as well as meet other people like you. Visit [breastcancernow.org](https://www.breastcancernow.org) for more information

Find out more about the support services we offer at [breastcancernow.org/oursupport](https://www.breastcancernow.org/oursupport)

For people with secondary breast cancer, you can register for our Living with Secondary Breast Cancer online course. This course contains videos and support for secondary breast cancer and hair loss.

Useful organisations

Hair loss support

Alopecia UK – alopecia.org.uk

A charity supporting people with all types of alopecia in the UK, offering information, advice and support to people of all ages. They have an online meeting space called Alopecia Café, and a Facebook group for men.

British Hair and Nail Society – bhns.org.uk

Brings together dermatologists, specialists and scientists interested in hair loss and nail disorders and provides patient information leaflets.

Cancer Black Care – cancerblackcare.org.uk

A charity providing support for Black Minority Ethnic (BME) groups affected by cancer in the London area.

Cancer Hair Care – cancerhaircare.co.uk

A charity providing expert consultations, information, support and services for people experiencing hair loss due to chemotherapy and other cancer treatments. Their website has information and tutorials on hair loss, scalp and hair care, wigs and headwear and hair regrowth. They also have useful resources for talking to children about hair loss.

Fruitfly Collective – parents.fruitflycollective.com

A website to support parents who have cancer. They have resources and special kits to help with difficult conversations and to help children understand what cancer is.

Institute of Trichologists – trichologists.org.uk

A professional association of trichologists. Includes a directory of qualified trichologists.

Look Good Feel Better – lookgoodfeelbetter.co.uk

Offers professionally run skincare and makeup workshops in hospitals and cancer support centres around the country for women living with cancer. Their website and workshops include practical tips for women who have lost their eyelashes and eyebrows. You can also order a 'Confidence Kit' from their online shop, which includes a DVD and booklet full of tips.

Headwear, wig and eyelash suppliers

The Breast Cancer Now website lists organisations who supply headwear designed to meet the needs of people experiencing hair loss. You can find these at breastcancer.org/headwearsuppliers

Chemo Hair Loss Coach – chemohairlosscoach.com

An online supplier of hair loss products such as headwear and fringes specifically for people with cancer-related hair loss and new growth. You can also order free resources such as hair loss dollies for children.

Lucinda Ellery – lucindaellery-hairloss.co.uk

A company offering solutions for managing hair loss and thinning. They specialise in permanent hair loss solutions and hair loss caused by cancer treatment.

My New Hair – mynewhair.org

Lists a national network of independent salons and professionals who offer a wig styling service for people suffering from cancer and medical hair loss.

HeadWrappers – headwrappers.org

HeadWrappers is a hair loss advisory service, focusing on alternatives to wigs and practical tips. They also have a directory of headwear suppliers.

Hair and wig donations

Little Princess Trust – littleprincesses.org.uk

Provides real hair wigs to boys and girls across the UK and Ireland that have lost their own hair through cancer treatment.

Wig Bank – wigbank.com

Wig bank is a charity that collects wigs people no longer need, cleans them and sells them at a discounted rate. There are Wig Bank services available in different parts of the UK.

Twice as nice – cancerhaircare.co.uk

Twice as nice, run by Cancer Hair Care, recycles wigs and headscarves that are no longer needed. They clean them and give them to others when needed.

Other organisations

Macmillan Cancer Support – macmillan.org.uk

0808 808 0000

Provides specialist information and financial support to people with cancer, including one-off grants that can be used towards the cost of a wig.

Black Women Rising – blackwomenrisinguk.org

A platform to showcase the stories and provide vital support for Black people affected by breast cancer. They provide support from awareness to diagnosis, treatment and life after treatment.

HELP US TO HELP OTHERS

Breast Cancer Now is a charity that relies on voluntary donations and gifts in wills. If you have found this information helpful, please visit breastcancer.org/give to support our vital care and research work.

ABOUT THIS BOOKLET

Breast cancer and hair loss was written by Breast Cancer Now's clinical specialists, and reviewed by healthcare professionals and people affected by breast cancer.



For a full list of the sources we used to research it:
Email health-info@breastcancer.org



You can order or download more copies from
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BREAST CANCER

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At Breast Cancer Now we're powered by our life-changing care. Our breast care nurses, expertly trained staff and volunteers, and award-winning information make sure anyone diagnosed with breast cancer can get the support they need to help them to live well with the physical and emotional impact of the disease.

We're here for anyone affected by breast cancer. And we always will be.

For breast cancer care, support and information, call us free on **0808 800 6000** or visit **breastcancernow.org**

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