

Short Communication

Trichotillomania...

How Orofacial Myofunctional Therapy can Help

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Trichotillomania (pronounced /ˌtrɪkəˌtɪləˈmeɪniə/ TRIK-ə-TIL-ə-MAY-NEE-ə, also known as trichinellosis or hair-pulling disorder) is the compulsive urge to pull out (and in some cases, eat) one's hair leading to noticeable hair loss, distress, and social or functional impairment. It is classified as an impulse control disorder by DSM-IV and is often chronic and difficult to treat.

Trichotillomania may be present in infants, but the peak age of onset is 9 to 13. It may be triggered by depression or stress. Owing to social implications the disorder is often unreported and it is difficult to accurately predict its prevalence; the lifetime prevalence is estimated to be between 0.6% (overall) and maybe as high as 1.5% (in males) to 3.4% (in females). Common areas for hair to be pulled out are the scalp, eyelashes, eyebrows, legs, arms, hands, nose, and the public areas.

The name, coined by French dermatologist François Henri Hallopeau, derives from the Greek: trich- (hair), till (en) (to pull), and mania ("madness, frenzy").

Some feel that "TRICH" is created by a sense of stress and tension before the person pulls, and a huge sense of relief when the hair is pulled. I feel that it is more related to tongue posture.

Trichotillomania ("trich") might be considered on the obsessive-compulsive spectrum, similar to other compulsive behaviors like nail-biting and skin picking.

These conditions might share genetic components however, there are only slight differences in the ages of onset between males and females.

Treatment approaches in my practice are similar for all age groups. It does depend on whether the trich is “automatic” or “focused.” Children are more in the “automatic” mode where it is simply an unconscious habit. However, teens and adults tend to be more in the “focused” mode as they have rituals associated with their hair pulling which might include specific hairs or types of hairs to pull.

Causes and pathophysiology

People who pull their hair often have anxiety, depression and obsessive-compulsive disorders. They might also have post-traumatic stress disorders. One study has shown that these patients have reduced cerebellar volume and more gray matter than people who do not suffer from this disorder. There is much more research needed to determine if it might be gene-related.

Signs and Symptoms



Figure -1

**TRICHOTILLOMANIA
RESULTS IN 2 WEEKS...**



Figure-2

Trichotillomania...



Figure-3

People who suffer from trichotillomania often pull only one hair at a time. These hair-pull episodes can last for hours at a time. Trichotillomania can go into remission-like states where the individual may not experience the urge to "pull" for days, weeks, months, or even years.

A psychological effect can be low self-esteem.

The boy in photo #1 has had extreme difficulty with relationships at school. He is twelve. His father, a doctor, has tried everything possible to help him stop pulling. He has been on every psychotropic drug imaginable. Nothing worked.

The girl in photo #2 began to pull her eyelashes and eyebrows at age four. Her parents attempted to get her to stop using punishment which did not work; and then rewards, which also did not work. She was almost reclusive and had few friends.

The girl in photo #3 had worn a hat full-time since age seven. She was sixteen when she came to my office. She was anorexic, grossly underweight, had few friends and had been treated with many drugs and psycho-therapies, all with no results

My referral sources are psychiatrists, psychologists, pediatricians and parents who have just heard about the successes of my patients.

For both children and adults, I begin with a behavior modification program using a basic myofunctional therapy structure. I discovered early, that when the tongue is resting in a proper position, the hair-pulling stops.

I focus on tongue posture because of the research that shows when the tongue rests up, the pressure during a swallow can release the 'happy chemicals' endorphins, serotonin and dopamine. This is what happens when people suck thumbs, fingers and pacifiers.

My patients all stop pulling on the FIRST day!

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