



TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

According to NAAF (National Alopecia Areata Foundation), “While none of the medications or devices commonly used to treat alopecia areata are approved specifically for this disease by the Food and Drug Administration (FDA), they have been approved for other diseases. It’s important to know that while these therapies may offer benefits to some people with alopecia areata, there is no single option that will work for everyone. Even if your hair is regrown, there is no guarantee that it won’t fall out again once treatment is stopped.” (NAAF.org)

The only guarantee of health is supporting your immune system, supporting your body and environment, changing your diet and lifestyle so that hair and health can surge and remain. Follow the [Alopecia Angel program](#) and see results. True healing for long life longevity and health.

Please note, avoid these medications on children and while pregnant. Just because some have no studies, does not imply it is safe. Rather, if there are no studies, more than likely it’s because they want to avoid possible side effects, birth defects, developmental effects, and lawsuits. Please be a conscientious person when looking at “treatments” they might end up costing you more than just your hair.

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

ROGAINE

- Severe scalp irritation;
- Unwanted growth of facial hair;
- Chest pain, fast heartbeats;
- Swelling in your hands or feet, rapid weight gain;
- A light-headed feeling, like you might pass out;
- Headache, dizziness, confusion; or.
- Flushing (warmth, redness, or tingly feeling)
- Scalp sensitivity.
- Skin dryness.
- Skin flaking.
- Irritation or burning sensation at and around the application site.
- Increased heart rate.
- Low libido
- Erectile dysfunction

MINXOIDIL

- Itching or skin rash (continued)
- Acne at site of application
- Burning of scalp
- Facial hair growth
- Increased hair loss
- Inflammation or soreness at root of hair
- Reddened skin
- Swelling of face
- Blurred vision or other changes in vision
- Chest pain
- Dizziness
- Fainting
- Fast or irregular heartbeat
- Flushing
- Headache
- Lightheadedness
- Numbness or tingling of hands, feet, or face
- Swelling of face, hands, feet, or lower legs
- Weight gain (rapid)

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

XELIJANZ

- Upper respiratory tract infections
- Headache
- Diarrhea, and
- Cold symptoms such as sore throat, runny or stuffy nose.
- Tell your doctor if you experience serious side effects of Xeljanz including:
 - Feeling very tired
 - Yellow skin or eyes (jaundice)
 - Loss of appetite
 - Vomiting
 - Dark urine
 - Clay-colored stool
 - Skin rash,
 - Clay-colored stools,
 - Skin rash,
 - Fever or chills,
 - Night sweats,
 - Weight loss,
 - Changes in bowel habits,
 - Pain or burning when you urinate
 - Sores in your mouth or throat
 - Stabbing chest pain
 - Shortness of breath
 - Cough with mucus or blood, or
 - Skin redness or swelling.
 - Allergic reaction: hives; difficult breathing; swelling of your face, lips, tongue, or throat.
 - You may get infections more easily, even serious or fatal infections.
- Fever, chills, sweating;
- Skin sores;
- Tiredness, muscle pain;
- Increased urination, pain or burning when you urinate;
- Stomach pain, diarrhea, weight loss; or
- Cough, shortness of breath, coughing up pink or red mucus
- Bladder pain
- Bloody or cloudy urine
- Blurred vision
- Body aches or pain
- Chills
- Cough
- Difficult, burning, or painful urination
- Difficulty breathing
- Dizziness
- Ear congestion
- Fever
- Frequent urge to urinate
- Headache
- Loss of voice

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

XELIJANZ

- lower back or side pain
- muscle aches
- nervousness
- pounding in the ears
- slow or fast heartbeat
- sneezing
- sore throat
- stuffy or runny nose
- unusual tiredness or weakness
- Incidence not known
- Bloating or swelling of the face, arms, hands, lower legs, or feet
- confusion
- dark urine
- decreased urination
- dry mouth
- fainting
- increase in heart rate
- labored breathing
- large, hive-like swelling on the face, eyelids, lips, tongue, throat, hands, legs, feet, or genitals
- light-colored stools
- lightheadedness
- nausea
- pale skin
- persistent non-healing sore
- rapid breathing
- rapid weight gain
- reddish patch or irritated area of the skin
- sunken eyes
- thirst
- tightness in the chest
- tingling of the hands or feet
- troubled breathing with exertion
- unusual bleeding or bruising
- unusual weight gain or loss
- upper right abdominal or stomach pain
- vomiting
- wrinkled skin
- yellow eyes and skin
- death

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

JAKAFI:

- bruising,
- dizziness,
- headache,
- urinary tract infections,
- weight gain,
- bloating,
- gas,
- low blood platelet levels (thrombocytopenia),
- anemia,
- fatigue,
- diarrhea,
- shortness of breath, and
- nausea.
- pale skin,
- lightheadedness,
- shortness of breath,
- rapid heart rate,
- trouble concentrating,
- easy bruising,
- unusual bleeding (nose, mouth, vagina, or rectum),
- purple or red pinpoint spots under your skin,
- fever,
- chills,
- body aches,
- flu symptoms,
- vomiting,
- sores in your mouth and throat,
- pain or burning when you urinate, or
- blisters or painful skin rash
- blisters or painful skin rash;
- changes in the size, shape, or color of a mole or skin lesion;
- problems with speech, thought, vision, or muscle movement (these symptoms may start gradually and get worse quickly);
- nausea, vomiting, weakness, general ill feeling;
- pain or burning when you urinate;
- low blood cell counts--fever, chills, tiredness, mouth sores, skin sores, easy bruising, unusual bleeding, pale skin, cold hands and feet, feeling light-headed or short of breath; or
- signs of tuberculosis: fever, cough, night sweats, loss of appetite, weight loss, and feeling very tired.

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

CORTICOSTEROIDS: GLUCOCORTICOIDS:

hydrocortisone (Cortef)

- cortisone
- ethamethasoneb (Celestone)
- prednisone (Prednisone Intensol)
- prednisolone (Orapred, Prelone)
- triamcinolone (Aristospan Intra-Articular, Aristospan Intralesional, Kenalog) Methylprednisolone (Medrol, Depo-Medrol, Solu-Medrol)
- dexamethasone (Dexamethasone Intensol, DexPak 10 Day, DexPak 13 Day, DexPak 6 Day)

CORTICOSTEROIDS CAN:

Cause sodium (salt) and fluid to be retained in the body and cause weight gain or swelling of the legs (edema)

- High blood pressure
- Loss of potassium
- Headache
- Muscle weakness
- Puffiness of the face (moon face)
- Facial hair growth
- Thinning and easy bruising of the skin
- Slow wound healing
- Glaucoma
- Cataracts
- Ulcers in the stomach and duodenum
- Loss of diabetes control
- Menstrual irregularity
- "Buffalo hump," a condition described as a rounding of the upper back

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

The prolonged use of corticosteroids can cause obesity, growth retardation in children, and even lead to convulsions and psychiatric disturbances. Reported psychiatric disturbances include depression, euphoria, insomnia, mood swings, and personality changes. Psychotic behaviors also have been reported.

Corticosteroids, since they suppress the immune system, can lead to an increase in the rate of infections and reduce the effectiveness of vaccines and antibiotics. The long-term use of corticosteroids may cause osteoporosis which can result in bone fractures. Shrinking (atrophy) of the adrenal glands can be caused by the long-term use of corticosteroids resulting in the body's inability to produce cortisol, the body's natural corticosteroid, when the systemic corticosteroids are discontinued.

Another condition that can result from the long-term use of corticosteroids is adrenal necrosis of the hip joints, a very painful and serious condition that may require surgery. Any symptoms of hip or knee pain in people taking corticosteroids require prompt medical attention.

Corticosteroids should not be stopped suddenly after prolonged use as this can result in adrenal crisis because of the body's inability to secrete enough cortisol to make up for the withdrawal. Nausea, vomiting, and shock are the reported side effects of adrenal crisis.

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

INJECTED CORTICOSTEROIDS

Corticosteroids injected into muscles and joints may cause some pain and swell at the site of the injection. However, this should pass within a few days.

Over time, repeated steroid injections into a muscle can weaken it. Intravenous corticosteroids (injected into the blood) can cause side effects including:

- stomach irritation, such as indigestion or heartburn,
- tachycardia (rapid heartbeat),
- nausea,
- insomnia, and
- a metallic taste in the mouth.

You may also experience mood changes. You could go from feeling very happy one minute to being irritable, depressed or restless the next.

ORAL CORTICOSTEROIDS

Side effects of oral corticosteroids that are used on a short-term basis include:

- an increase in appetite,
- weight gain,
- insomnia,
- fluid retention, and
- mood changes, such as feeling irritable, or anxious.

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

Side effects of oral corticosteroids used on a long-term basis (longer than three months) include:

- osteoporosis (fragile bones),
- hypertension (high blood pressure),
- diabetes,
- weight gain,
- increased vulnerability to infection,
- cataracts and glaucoma (eye disorders),
- thinning of the skin,
- bruising easily, and
- muscle weakness.

Even if your side effects become troublesome, do not suddenly stop taking your medication. While you are taking steroids, your body will reduce the production of natural steroids.

If you do suddenly stop taking them, your body will not have enough steroids to work properly, and it is likely that you will have symptoms such as:

- fatigue,
- weight loss,
- nausea,
- dizziness,
- vomiting,
- diarrhea, and
- abdominal pain.

If a decision is made to end your treatment, your doctor will gradually reduce the amount of corticosteroids that you are taking. This will give your body the opportunity to increase its production of natural steroids

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

SIDE EFFECTS OF TOPICAL CORTICOSTEROIDS

Topical corticosteroids can lead to thin skin, red skin lesions and acne.

Dermatological changes: Skin thinning, purpura, acne, mild hirsutism, facial erythema, and striae. Purpura generally affects the sun-exposed areas of the dorsum of the hands and forearms, as well as the sides of the neck, face, and lower legs. Red striae generally appear on the thighs, buttocks, shoulders, and abdomen. Impairment of wound healing is another common and a potentially serious side effect of systemic glucocorticoid use. Corticosteroids interfere with the natural wound-healing process by inhibiting leukocyte and macrophage infiltration, decreasing collagen synthesis and wound maturation, and reducing keratinocyte growth factor expression after skin injury.

Cushing syndrome, cushingoid features and weight gain: The development of cushingoid features (redistribution of body fat with truncal obesity, buffalo hump, and moon face) and weight gain are dose and duration-dependent and can develop early. Cushingoid features showed a linear increase in frequency with dose.

Glucocorticoid therapy is the most common cause of Cushing syndrome. The clinical presentation in the pediatric population is similar to that in adults and includes truncal obesity, skin changes, and hypertension. In children, growth deceleration is also observed.

Ophthalmologic: The risk of both cataracts and glaucoma (open-angle) is increased in patients on glucocorticoids and is dose-dependent in a linear fashion. This form of glaucoma occurs most commonly in patients using eye drops. Glaucoma (increase in intraocular pressure) is often painless and leads to visual field loss, optic disc cupping, and optic nerve atrophy. Once systemic therapy is discontinued, the elevation in intraocular pressure usually resolves within a few weeks, but the damage to the optic nerve is often permanent.

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

SIDE EFFECTS OF TOPICAL CORTICOSTEROIDS

A rare adverse effect of systemic, local, or even topical use of glucocorticoids is central serous chorioretinopathy. This leads to the formation of subretinal fluid in the macular region which leads to the separation of the retina from its underlying photoreceptors. This manifests as central visual blur and reduced visual acuity.

Cardiovascular: Glucocorticoid use has been associated with a variety of adverse cardiovascular effects including fluid retention, premature atherosclerotic disease (increased risk of heart attack and stroke), and arrhythmias. Cardiovascular disease risk is dose-dependent.

Gastrointestinal (GI): Glucocorticoids increase the risk for adverse GI effects, such as gastritis, gastric ulcer formation, and GI bleeding. The use of NSAIDs and glucocorticoids is associated with a 4-fold increased risk of a GI adverse effect compared with non-use of either drug. Other complications associated with glucocorticoid use include visceral perforation and hepatic steatosis (fatty liver) that can rarely lead to systemic fat embolism or cirrhosis.

Bone and Muscle: This includes osteoporosis, osteonecrosis, increased risk of fractures, muscle weakness and myopathy. Corticosteroids stimulate osteoclastic activity initially (first 6 to 12 months of therapy), followed by a decrease in bone formation by suppressing osteoblastic activity in the bone marrow, decreasing osteoblast function and lifespan, and promoting the apoptosis of osteoblasts and osteocytes. Myopathy is a direct result of muscle breakdown and occurs in both upper and lower limbs. It is reversible and painless. "Critical illness myopathy" may also develop in patients admitted in the intensive care unit (ICU) requiring large doses of IV glucocorticoids and neuromuscular blocking agents. It is characterized by severe, diffuse proximal and distal weakness that develops over several days. Although it is usually reversible, critical illness myopathy can lead to prolonged ICU admissions, increased length of hospital stays, severe necrotizing myopathy, and increased mortality.

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

SIDE EFFECTS OF TOPICAL CORTICOSTEROIDS

Neuropsychiatric: Patients receiving glucocorticoids often experience an improved sense of well-being within several days of starting the medications; mild euphoria or anxiety may also be seen. Hypomanic reactions and activated states are more common early in the therapy than depression, but the prevalence of depression is greater in patients on more longstanding therapy. Psychosis can occur but does so almost exclusively at doses of prednisone above 20 mg per day given for a prolonged period. Disturbances in sleep are reported, especially with split doses that may interfere with the normal pattern of diurnal cortisol production. Akathisia (motor restlessness) is a common glucocorticoid side effect. The risk of developing a given neuropsychiatric disorder following Glucocorticoids therapy may be increased among patients with a history of that condition. Rare cases of pseudotumor cerebri have also been associated with glucocorticoid use.

Metabolic and endocrine: Systemic glucocorticoids cause a dose-dependent, usually mild, increase in fasting glucose levels and a greater increase in postprandial values in patients without preexisting diabetes mellitus, but the development of de novo diabetes in a patient with initially normal glucose tolerance is uncommon. Risk factors for new-onset hyperglycemia during glucocorticoid therapy are thought to be the same as those for other patients. However, patients with diabetes mellitus or glucose intolerance exhibit higher blood glucose levels while taking glucocorticoids, leading to increased difficulty with glycemic control. [7]

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

SIDE EFFECTS OF TOPICAL CORTICOSTEROIDS

Immune system: Systemic glucocorticoids have many effects upon innate and acquired immunity that predispose to infection, resulting in a linear increase in the risk of infection, especially with common bacterial, viral, and fungal pathogens. In addition, patients taking glucocorticoids may not manifest signs and symptoms of infection as clearly, due to the inhibition of cytokine release and the associated reduction in inflammatory and febrile responses. This can impair the early recognition of infection.

Hematologic effects: Pharmacologic doses of glucocorticoids often result in an increased white blood cell count (leukocytosis) that is due primarily to an increase in neutrophils (neutrophilia). This phenomenon is due to a decreased proportion of neutrophils that are adhering to the endothelium (Marginal pool).

Hypothalamic-pituitary-adrenal axis suppression: Administration of Glucocorticoids can suppress the hypothalamic-pituitary-adrenal (HPA) axis decreasing corticotropin-releasing hormone (CRH) from the hypothalamus, adrenocorticotropic hormone (ACTH) from the anterior pituitary gland and endogenous cortisol. Prolonged ACTH suppression cause atrophy of adrenal glands and abrupt cessation or rapid withdrawal of Glucocorticoids in such patients may cause symptoms of adrenal insufficiency. The clinical presentation of adrenal suppression is variable. Many of the signs and symptoms are non-specific and can be mistaken for symptoms of intercurrent illness or the underlying condition that is being treated (weakness/fatigue, malaise, nausea, vomiting, diarrhea, abdominal pain, headache usually in the morning, fever, anorexia/weight loss, myalgia, arthralgia, psychiatric symptoms, poor growth and weight gain in children). Adrenal suppression is the most common cause of adrenal insufficiency in children.

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

SIDE EFFECTS OF TOPICAL CORTICOSTEROIDS

Adrenal insufficiency is associated with higher mortality in the pediatric population. In adults, the symptoms of adrenal suppression are nonspecific; therefore, the condition may go unrecognized until exposure to physiological stress (illness, surgery or injury), results in adrenal crisis. Children with adrenal crisis secondary to adrenal suppression may present with hypotension, shock, decreased consciousness, lethargy, unexplained hypoglycemia, seizures, and even death.

Growth impairment: The impairment of growth in young children and delay in puberty is commonly seen in children receiving glucocorticoids for chronic illnesses like nephrotic syndrome and asthma. The effect is most pronounced with daily therapy, and less marked with an alternate-day regimen. This can also occur with inhaled Glucocorticoids. It is important to note that although growth impairment can be an independent adverse effect of corticosteroid therapy, it can also be a sign of adrenal suppression.

WHAT ARE THE POSSIBLE SIDE EFFECTS OF STEROIDS?

The chance of side effects depends on the dose, type of steroid, and length of treatment. Some side effects are more serious than others. Common side effects of systemic steroids include:

- Increased appetite, weight gain
- Sudden mood swings
- Muscle weakness
- Blurred vision
- Increased growth of body hair
- Easy bruising
- Lower resistance to infection
- Swollen, "puffy" face

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

WHAT ARE THE POSSIBLE SIDE EFFECTS OF STEROIDS?

- Acne
- Osteoporosis (bone-weakening disease)
- Worsening of diabetes
- High blood pressure
- Stomach irritation
- Nervousness, restlessness
- Having difficulty sleeping
- Cataracts or glaucoma
- Water retention, swelling

FINASTERIDE (ORAL)

- Impotence
- Decreased libido
- Ejaculation disorders
- Breast tenderness and enlargement
- Testicular pain

PREDNISONE SIDE EFFECTS

- Blurred vision, eye pain, or seeing halos around lights;
- Hives; difficult breathing; swelling of your face, lips, tongue, or throat.
- Swelling, rapid weight gain, feeling short of breath;
- Severe depression, feelings of extreme happiness or sadness, changes in personality or behavior, seizure (convulsions);
- Bloody or tarry stools, coughing up blood;
- Pancreatitis (severe pain in your upper stomach spreading to your back, nausea and vomiting, fast heart rate);

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

PREDNISONE SIDE EFFECTS

- Low potassium (confusion, uneven heart rate, extreme thirst, increased urination, leg discomfort, muscle weakness or limp feeling); or
- Dangerously high blood pressure (severe headache, blurred vision, buzzing in your ears, anxiety, confusion, chest pain, shortness of breath, uneven heartbeats, seizure).

Other common prednisone side effects may include:

- Sleep problems (insomnia), mood changes;
- Increased appetite, gradual weight gain;
- Acne, increased sweating, dry skin, thinning skin, bruising or discoloration;
- Slow wound healing;
- Headache, dizziness, spinning sensation;
- Nausea, stomach pain, bloating; or
- Changes in the shape or location of body fat (especially in your arms, legs, face, neck, breasts, and waist).

KENALOG-10/ KENALOG -40

Burning, itching, irritation, or dryness may occur when this medication is first applied to the skin. This should disappear in a few days as your body adjusts to the medication.

Tell your doctor promptly if any of these unlikely but serious stretch marks, skin thinning/discoloration, acne, greatly increased hair growth, "hair bumps" (folliculitis).

Skin infections can become worse when this medication is used. Notify your doctor if redness, swelling, or irritation do not improve.

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

KENALOG-10/ KENALOG -40

Rarely, it is possible this medication will be absorbed from the skin into the bloodstream. This can lead to side effects of too much corticosteroid.

These side effects are more likely in children, and in people who use this medication for a long time or over large areas of the skin. Tell your doctor right away if any of the following side effects occur: unusual/extreme tiredness, weight loss, headache, swelling ankles/feet, increased thirst/ urination, vision problems.

SPIRONOLACTONE

Spironolactone Warnings

Spironolactone carries a black-box warning for tumor risk, due to chronic toxicity studies that show spironolactone can cause tumor development in rats.

Spironolactone shouldn't be taken with potassium-supplementing drugs or diets because the excessive potassium intake may cause hyperkalemia, which can lead to abnormal heart rhythms (arrhythmias). Your doctor should also know if you have severe heart failure because hyperkalemia has an increased risk of death in such cases. Additionally, tell your doctor if you have liver problems such as cirrhosis, as even minor changes in fluid and electrolyte balance may cause liver-related coma. Spironolactone shouldn't be used if you have certain kidney problems or conditions associated with hyperkalemia, including the adrenal gland disorder known as Addison's disease.

PREGNANCY AND SPIRONOLACTONE

Spironolactone may pose risks to a developing fetus.

Some research suggests that spironolactone has the potential to feminized male fetuses during early pregnancy and cause endocrine problems in late pregnancy by inhibiting the activity of male hormones (androgens). In general, diuretics such as spironolactone aren't recommended for pregnant women.

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

Unless the drug is absolutely necessary, it's not recommended for women who are breastfeeding because canrenone, a byproduct of spironolactone, is excreted in breast milk.

SPIRONOLACTONE SIDE EFFECTS

Common Side Effects of Spironolactone

- Vomiting, diarrhea, and stomach pain or cramps
- Dry mouth and thirst
- Dizziness, unsteadiness, and headache
- Gynecomastia (enlarged breast tissue) in men, and breast pain in women
- Irregular menstrual periods and post-menopausal vaginal bleeding
- Erectile dysfunction
- Deepening of the voice and increased hair growth
- Drowsiness, tiredness, and restlessness

Severe Side Effects of Spironolactone

- Muscle pain or weakness
- Numbness or tingling
- Paralysis in the arms or legs
- Arrhythmia
- Confusion, extreme tiredness, and fainting
- Unusual bleeding or bruising
- Life-threatening skin reactions
- Flu-like symptoms, pain in the upper right abdomen, loss of appetite, vomiting blood, or bloody stools
- Difficulty breathing or swallowing
- Decreased urination

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

WHAT IS CLOBETASOL AND HOW DOES IT WORK?

Clobetasol is a prescription topical steroid used to treat the inflammation and itching caused by a number of skin conditions such as allergic reactions, eczema, and psoriasis. Clobetasol is a very strong (super-high-potency) corticosteroid.

Clobetasol is available under the following different brand names: Temovate, Temovate E, Cormax, Clobex, Clobex Spray, Clarelux, Cormax Ointment, Cormax Scalp Application, Olux, Olux-E, and Olux-E Foam.

WHAT ARE SIDE EFFECTS ASSOCIATED WITH USING CLOBETASOL ?

Side effects of clobetasol include:

- thinning or softening of your skin
- skin rash or irritation around your mouth
- swollen hair follicles
- temporary hair loss
- spider veins
- changes in the color of treated skin
- blisters
- pimples
- acne
- crusting of treated skin
- extreme/unwanted hair growth
- stretch marks
- burning
- itching
- dryness
- redness
- rash

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

WHAT ARE SIDE EFFECTS ASSOCIATED WITH USING CLOBETASOL ?

Side effects of clobetasol include:

- cracking/fissuring of the skin
- irritation
- numbness
- itching
- stinging
- loss of skin color (hypopigmentation [high potency topical steroids])
- intracranial high blood pressure (hypertension) reported in children with use of topical formulation
- adrenal suppression
- Cushing syndrome (weight gain, irregular menstrual periods, high blood pressure, changes in memory, mood and concentration)
- high blood sugar
- acne form lesions
- secondary infection

hypothalamic-pituitary-adrenal (HPA) suppression (with higher potency used over 2 weeks); doses as low as 2 g/day can produce HPA suppression

- Burning or stinging at the application site
- Burning sensation of the skin
- dry skin
- flushing or redness of the skin
- itching, scaling, severe redness, soreness, or swelling of the skin
- skin irritation
- skin rash, encrusted, scaly and oozing
- thinning of the skin with easy bruising, especially when used on the face or where the skin folds together (eg, between the fingers)
- Thinning, weakness, or wasting away of the skin

TYPICAL TREATMENTS FOR ALOPECIA AND THEIR SIDE EFFECTS

WHAT ARE SIDE EFFECTS ASSOCIATED WITH USING CLOBETASOL ?

- Backache
- blindness
- blurred vision
- burning, itching, and pain in hairy areas, or pus at the root of the hair
- change in vision
- dry mouth
- eye pain
- facial hair growth in females
- fractures
- fruit-like breath odor
- full or round face, neck, or trunk
- hair loss
- headache
- hives
- increased hunger
- increased thirst
- increased urination
- irritability
- loss of sexual desire or ability
- menstrual irregularities
- muscle wasting
- nausea
- redness and scaling around the mouth
- stomach pain
- sugar in the urine
- sweating
- tearing
- thinning of the hair
- troubled breathing
- unexplained weight loss
- unusual tiredness or weakness
- vomiting

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