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The use of doxycycline in lichen planopilaris and frontal fibrosing alopecia: a retrospective study of 138 patients at a tertiary referral clinic

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Background/Objectives: Lichen planopilaris (LPP) and frontal fibrosing alopecia (FFA) are lymphocyte-mediated primary cicatricial alopecias (1). They are rare, and limited evidence exists on treatment options (1-2). The best data supports hydroxychloroquine as the first-line systemic therapeutic agent (1,3), although expert opinion cites doxycycline as an acceptable first-line alternative and small series support its potential efficacy (4-5). The purpose of this study is to describe the use of doxycycline in patients with LPP and FFA at a single tertiary referral clinic.

Methods: After obtaining IRB approval, the authors reviewed the medical records of 138 patients with LPP and FFA who presented to the outpatient specialty Hair Clinic at Boston University Medical Center from 2015-2017.

Results: Of 138 subjects, 1 was excluded because there was no electronic medical record on file. Thirty-one subjects had a diagnosis of LPP, 103 had a diagnosis of FFA, and 3 were diagnosed with both LPP and FFA. Of the 31 LPP-only subjects, 16 had been prescribed doxycycline for their condition. Of these subjects, 9 (56.3%) reported or were observed to improve or stabilize, 2 (12.5%) did not improve, and 5 (31.3%) had unclear response or were lost to follow up. Of the 106 subjects with FFA, 40

had been prescribed doxycycline for their condition. Of these 40 subjects, 17 (42.5%) were felt to improve or stabilize, 7 (17.5%) did not improve, and 15 (37.5%) had unclear response or were lost to follow up. The average duration of use was 8 months. Of note, 14 of 56 (25%) subjects who took doxycycline discontinued the medication secondary to side effects, most commonly gastrointestinal.

Conclusion: Although a number of subjects did not tolerate the medication, the data confirm that doxycycline may be helpful in the treatment of LPP and FFA.

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