

## **MANAGING YOUR HIRSUTISM**

### **What Is Hirsutism?**

Hirsutism refers to the growth of too much hair on the face and body in women. Thick, dark hair grows in areas where men have hair: upper lip, chin, and sideburns. Hirsutism is very common, occurring in 5% to 10% of women, and it's usually not serious. Increased body hair is also normal in Caucasian women of Mediterranean origin. Most women do not need medical care. Therapy may improve hirsutism, but it may take months to work. Hirsutism cannot be prevented.

### **What Causes Hirsutism?**

The cause is production of too much male sex hormones (called androgens). Women normally make small amounts of androgens in their ovaries and adrenal glands. Problems in these organs can lead to too much hormone being made. Certain endocrine disorders (e.g., Cushing syndrome, acromegaly) may cause hair to grow. Tumors in adrenal glands or ovaries may also cause high hormone levels. Other less serious disorders of these organs, including polycystic ovary syndrome (PCOS) and congenital adrenal hyperplasia (CAH), can also lead to hirsutism.

Other sources of androgens are medicines, including steroids, phenytoin, diazoxide, progestins, cyclosporine, and minoxidil.

Some women have idiopathic hirsutism, meaning that the cause is unknown.

### **What Are the Symptoms of Hirsutism?**

Hair develops on the face (as a beard or mustache) and body, specifically the upper lip, chin, sideburns, upper back, neck, chest, thighs, belly, and around the nipples. Hair becomes thick and dark. Women may also have problems with periods, with fertility, and have acne.

Serious causes can mean rapid growth of hairs, balding, deepening of the voice, muscle development, change in sexual desire, or infertility.

### **How Is Hirsutism Diagnosed?**

The health care provider will do a physical examination and take blood and urine samples to measure levels of the androgens called testosterone and dehydroepiandrosterone sulfate (DHEAS). The health care provider may order computed tomography (CT) or magnetic resonance imaging (MRI) to check organs that may be the cause.

### **How Is Hirsutism Treated?**

Treatment depends on the cause. No treatment may be needed for a mild case with no menstrual problems. Ways to remove unwanted hair include medicines, shaving, plucking, bleaching, waxing, using creams (depilatories), and electrolysis or laser light (for permanent removal).

For hirsutism related to menstrual problems, the health care provider may prescribe medicine that contains female sex hormones. Other treatment may be needed to get pregnant.

Growths on ovaries or adrenal glands can be removed surgically.

### **DOs and DON'Ts in Managing Hirsutism**

- ✓ **DO** follow your doctor's advice. Contact your health care provider if you had successful treatment and unwanted hair returns.
- ✓ **DO** lose weight if you're overweight. Weight loss reduces hirsutism.
- ✓ **DO** tell your health care provider if you shaved, plucked, or bleached your hair or if you received electrolysis.
- ✓ **DO** tell your health care provider if you want to become pregnant.

- ✓ **DO** consider bleaching, shaving, and electrolysis.
- ✓ **DO** call your health care provider if you notice male pattern hair growth.
- ✓ **DO** call your health care provider if you have side effects from your medicine.
- ⊗ **DON'T** use medicine that contains male sex hormones unless your health care provider prescribes it.
- ⊗ **DON'T** expect hirsutism to go away completely or immediately. Successful drug treatment may take 3 to 6 months.

FROM THE DESK OF

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FOR MORE INFORMATION

Contact the following source:

- The Endocrine Society: Tel: (301) 941-0200; Website: <http://www.endo-society.org>

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