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## Dealing With Hair Loss After Craniotomy

A craniotomy is a surgical intervention in which a flap of your skull is cut open to access the problem area in the brain. For example, it helps the surgeons need to access the site of an aneurysm, tumor, or an infection in the brain. After the procedure, the surgeon repositions the flap back to its original position and stitches or rather, glues it for fixation. The surgery leaves a scar, the size of which varies from patient to patient. While there are numerous discomforts that patients undergoing craniotomy are likely to suffer, hair loss is one common problem. Hair is unlikely to grow in the scar tissue.

Moreover, craniotomy patients often complain of alopecia areata after the procedure. They may experience graying of hair on the scalp, which may eventually start to fall out. This is especially seen in the case of patients who undergo radiation therapy after craniotomy. Such a side effect may result due to excessive stress or the impact of anesthesia administered during the surgery.

Dealing with hair loss after brain surgery can be difficult for some patients, especially the younger ones. Hair does come back after brain surgery and things get better. However, the process is slow and may last over a few months to years. Nevertheless, there are several options that a patient can resort to for hair growth after recovering from the craniotomy. Some of these options are discussed in the sections below.



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### Options That Can Help With Hair Growth After Craniotomy

#### Natural Mane

Hair growth after craniotomy may take some time. However, hair does grow back on the scalp, except at the site of craniotomy scar. The best for a patient suffering from hair loss after brain surgery is to wait for natural hair to grow back. The hair surrounding the craniotomy scar would eventually outgrow to cover and conceal the scar. But a patient may have to wait for months to experience natural hair growth and have their scar concealed.

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## Cortisone Injections

Cortisone is an anti-inflammatory medication that treats hair loss in some cases. An injection of the medication, triamcinolone acetonide (Kenalog), manages the bald spots or the area of alopecia areata. The number of injections administered may vary from 2 to 50 or even more, depending on the needs of the patient.

Some patients experience as much as 95 percent hair growth after getting cortisone injections. However, not all patients can undergo this form of therapy. This is most suitable for a young individual who used to have a beautiful mane prior to the surgery. A patient must seek approval from their doctor before heading to a dermatologist to discuss this treatment for hair re-growth.

## Hair Transplantation

Hair transplantation is yet another promising option to deal with hair loss after brain surgery. However, this treatment works the best only in the case of a small craniotomy scar. Patients who have one or more large craniotomy scar must discuss this option thoroughly with an experienced cosmetic surgeon before opting for the same.

Hair transplantation is a great way to camouflage the brain surgery scar. But there are several considerations that a patient and the cosmetic surgeon, together have to make to before selecting this option.

The following hair transplant considerations should be kept in mind by the doctor and the candidate to manage hair loss after brain surgery:

- Transplanted hair follicles tend not to grow in the scar tissue in a single session. Therefore, a patient with craniotomy scar must undergo at least three to four sessions for full coverage.
- Because the elasticity of the scalp is affected as a result of scarring, donor harvesting is required only via follicular unit extraction (FUE) incisions.
- Patients who have an implanted ventriculoperitoneal (VP) shunt must seek approval from their neurosurgeon. This is because there is a risk of shunt puncture during a hair transplant.
- Prior radiation therapy may pose a challenge to the success and healing of transplanted hair. This is because the radiation may cause permanent damage to the scalp.
- Patients who have had their flap of skull secured with a foreign material such as cement, plates, mesh, or screws may end up getting an infection in the material after a hair transplant. Such infections, although rare, may require a second surgery and a long course of antibiotics.

## Scalp MicroPigmentation

[Scalp micropigmentation](#) (SMP) is a special technique that involves placing indelible pigments into the dermis of the bald patch. This technique is similar to tattooing with a difference that it requires custom pigments and highly-skilled technicians. In fact, the entire procedure is quite tedious.

Depending on the history of surgeries conducted in the past, size of the head, and the area of

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baldness, the procedure may take around 5 to 8 hours. SMP gives long-lasting results and does not require the patient to visit the clinic often for enhancement or maintenance.

Only trained and certified cosmetologists or experts perform SMP and not tattoo artists. The placement of pigments in the scalp gives the look of a colored mane over the bald patch. Patients with craniotomy scar must discuss their case with their doctor and the SMP expert before actually making up their mind.

Recovery after SMP is quite quick. The redness and pain subside within a day or two of the procedure.

## Scar Revision

A [scar revision surgery](#) is a type of cosmetic surgery conducted with a vision to make the scar less prominent. Depending on the type, size, and exact location of the scar, the plastic surgeon may recommend a specific approach. It may include the use of specific dermal fillers (injectable treatment) or surface treatment to fill the indentations in the scar. All these approaches make the surface of the skin look normal.

## Which treatment to go for?

Many patients go for scar revision prior to hair transplantation to deal with hair loss after craniotomy. Some patients must undergo a combination of SMP and hair transplant for better results.

The treatment that is most likely to work the best for patients differs on the basis of individual needs and scar characteristics. Therefore, the best is to speak to your neurosurgeon and cosmetic surgeon to choose the technique that is most likely to work.