

Supporting Information for:

Self-assessments of standardized scalp massages for androgenic alopecia: survey results

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8 figures

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Materials

Materials S1. Literature Excerpt

All survey participants were exposed to literature detailing how to perform the standardized scalp massages (SSMs) along with directions for tracking hair changes using photographs. This literature is republished, with permission, through the following link:

https://perfecthairhealth.com/dermatology-and-therapy/excerpt_suppinfo1.pdf

Materials S2. Demonstration Video

All survey participants were exposed to a demonstration video detailing how to perform the SSMs. This demonstration video is republished, with permission, through the following link:

<https://vimeo.com/310444236/bed6eb03c2>

Materials S3. Survey Design, Skip Logic, & Questions

The following text shows the survey design, skip logic, and questions issued to all survey participants using SurveyHero.com (questionnaire begins on the next page). Full-width lines represent survey page breaks.

(1) What is your email? * This is just so I can verify when you received the book and videos

(2) What is your age? *

13-19

20-25

26-34

35-44

45-54

55-64

65-74

75+

(3) What is your gender? *

Male

Female

Other

(4a) (only if (3) = [Female]): Before starting any of the recommendations in the book or video, what kind of hair loss did/do you have? * Please check all that apply to you

Temple / frontal recession (a receding hairline)

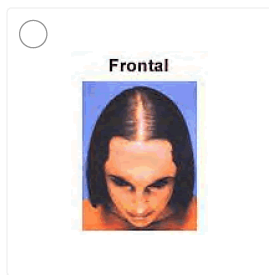
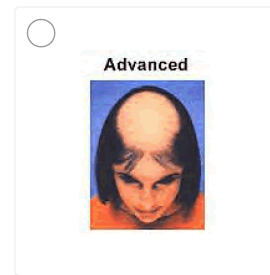
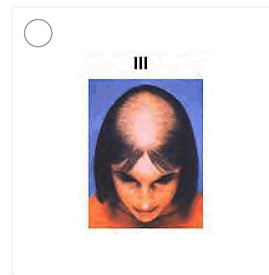
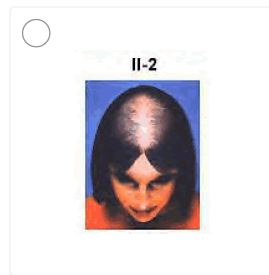
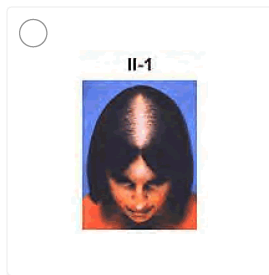
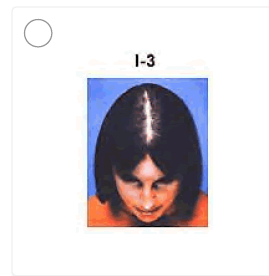
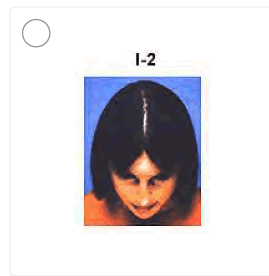
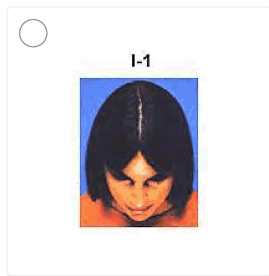
Vertex thinning (a balding spot)

Diffuse thinning (hair thinning all over the scalp)

Alopecia areata (hair loss from an autoimmune condition)

Telogen effluvium (temporary, patchy hair shedding – often related to stress)

(5a) (only if (3) = [Female]): Which of the following images best represents your kind of hair loss? * Click on any image to make a selection



(4b) (only if (3) = [Male]): Before starting any of the recommendations in the book or video, what kind of hair loss did/do you have? * Please check any that apply to you

Temple / frontal recession (a receding hairline)

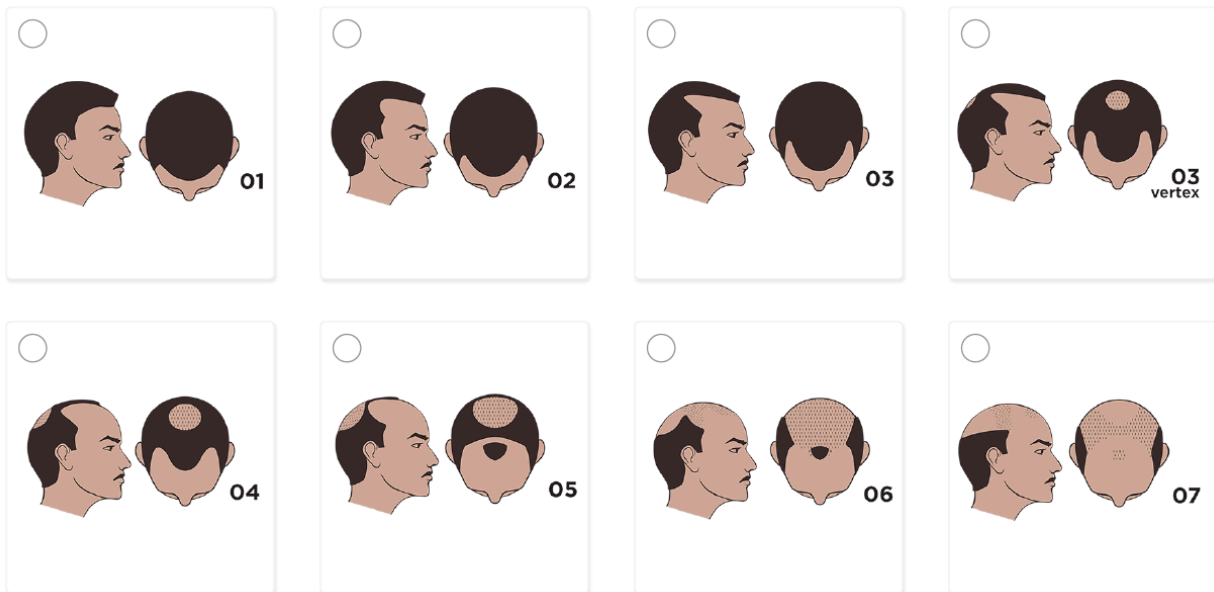
Vertex thinning (a balding spot)

Diffuse thinning (hair thinning all over the scalp)

Alopecia areata (hair loss from an autoimmune condition)

Telogen effluvium (temporary, patchy hair shedding – often related to stress)

(5b) (only if (3) = [Male]): Which of the following images best represents your kind of hair loss? * Click on any image to make a selection



(4a) (only if (3) = [Other]): Before starting any of the recommendations in the book or video, from what kind of hair loss did/do you suffer? *

Please check any that apply to you

Temple / frontal recession (a receding hairline)

Vertex thinning (a balding spot)

Diffuse thinning (hair thinning all over the scalp)

Alopecia areata (hair loss from an autoimmune condition)

Telogen effluvium (temporary, patchy hair shedding – often related to stress)

(5) Have you had a chance to read the book and watch the video? *

Yes

No

(if (5) = [Yes], continue to (6); if (5) = [No], skip to (20))

(6) Have you had a chance to try any of the recommendations in the book and video? * This includes any dietary, lifestyle, or massage exercises (and for any length of time)

Yes

No

(if (6) = [Yes], continue to (7); if (6) = [No], skip to (20))

(7) Since getting the book, have you tried to do the massages? * This is for any length of time
(even if just once)

Yes

No

(if (7) = [Yes], continue to (8); if (7) = [No], skip to (20))

(8) Since getting the book, which other mechanical stimulation therapies have you tried (if any)? * Please check all that apply to you

None (just massaging)

Dermalrolling

Boar bristle brushing / brush taps

Low-Level Laser Therapy

Platelet-Rich Plasma Therapy (PRP)

Botox injections (in the scalp)

Acupuncture (in the scalp)

Other _____

(9) Roughly how many months have you been massaging your scalp? *

0

1

...

36

37+

(10) On average, how many minutes per day do you massage your scalp? *

0-10 minutes daily

11-20 minutes daily

21-30 minutes daily

31-40 minutes daily

41+ minutes daily

(11) Since getting the book, have you applied any topicals to your scalp on a consistent basis? * Please only check "yes" if you've applied a topical regularly and for longer than two months

Yes

No

(if (11) = [Yes], continue to (12); if (11) = [No], skip to (13))

(12) Which topical(s)? * Please check all that apply to you

Minoxidil (Rogaine)

Fat-based oils (like emu, castor, olive, pig lard, or pumpkin seed oil)

Essential oils (like rosemary, peppermint, or lavender oil)

Caffeine

Spironolactone

Other _____

(13) Since getting the book, which of the following best resembles your own diet? *

None (I don't follow any particular diet)

Danny Roddy / Ray Peat Diet

Low Carb Diet (but not paleo)

Mediterranean Diet

Paleo: Ketogenic / Low-Carb

Paleo: Moderate Carbohydrate (no ketosis)

Paleo: plus modifications from the book: white rice, no cruciferous vegetables, etc.

Veganism

Vegetarianism

Other _____

(14) Since implementing any of the book's recommendations, how has your hair changed?*

Significant hair regrowth (significant thickening and significant visible improvements to balding areas)

Slight hair regrowth (slight thickening and slight visible improvements to balding areas)

Stabilization (no hair regrowth, but no further hair loss)

Slight hair loss (hair loss at the same pace since before trying any of the book's recommendations)

Significant hair loss (accelerated hair loss since trying any of the book's recommendations)

(15) Which of the following statements best applies to you? * These statements pertain to the use of finasteride (Propecia) and dutasteride (Avodart)

I've never taken finasteride (Propecia) or dutasteride (Avodart)

I used to take finasteride (Propecia) or dutasteride (Avodart), but stopped before I read the book

I used to take finasteride (Propecia) or dutasteride (Avodart), but stopped after I read the book

I currently take finasteride (Propecia) or dutasteride (Avodart)

(if (15) = ["never"], skip to (18); if (15) = ["used to"], skip to (16); if (15) = ["currently"], skip to (17))

(16) (if (15) = ["used to"]) How long did you take finasteride (Propecia) or dutasteride (Avodart)? *

0-6 months

7-12 months

12-24 months

24+ months

(17) (if (15) = ["currently"]) How long have you been taking finasteride (Propecia) or dutasteride (Avodart)? *

0-6 months

7-12 months

12-24 months

24+ months

(18) Since getting the book, have you taken any supplements on a consistent basis? * Please only check "yes" if you've taken a supplement regularly and for longer than two months

Yes

No

(if (18) = [Yes], continue to (19); if (18) = [No], skip to (20))

(19) Which supplements? * Please check all that apply to you

Multivitamin (any brand)

Curcumin / Turmeric (any brand)

- Saw Palmetto (any brand)
 - Biotin (any brand)
 - Iron (any brand)
 - Ashwaganda (any brand)
 - Provillus™
 - Hair Essentials™
 - Vitamin D (any brand)
 - Calcium (any brand)
 - Zinc (any brand)
 - Vitamin B-12 (any brand)
 - Fish oil (any brand)
 - Callagen (any brand)
 - Nutrafol™
 - Viviscal™
 - Other _____
-

(20) Do you have anything else you'd like to share? (optional) Ex: suggestions, questions, topics you want me to research, statements about your progress, etc.

(21) Please indicate your ethnicity (optional)

Ethnicity encompasses a person's feelings of belonging to others who share a similar ancestry, color, language, or religion. You can check any that apply, but you're more than welcome to leave this blank.

- Caucasian
- Latino / Hispanic
- Middle Eastern
- African
- Caribbean
- South Asian
- East Asian
- Mixed
- Other

Materials S4. Bias Exploration

Background. In our original survey issued in December 2017, photos cataloguing hair changes were not requested of participants. However, the standardized scalp massage-related materials recommended that each prospective participant track their progress through monthly photos (Materials S1). Also included were instructions on how to take photos using similar lightings, angles, distances, hair styles, lengths, and wetness. Accordingly, several survey participants also submitted unsolicited photos representative of their hair change scores.

Objective. We reviewed all submitted photos and filtered by standardized scalp massage participants and photoset quality. Then we used these photosets to evaluate bias in self-reporting data; specifically, for self-assessed hair change scores.

Methods. In August 2018, survey participants who entered a valid email address during the December 2017 survey were randomized into 8 groups of equal numbers ($n = \sim 43$) and recontacted once through email. Using the same 5-point assessment scale as the original survey, we asked each group to evaluate the hair change of one before-after photoset of an SSM participant who had completed the initial survey, submitted a quality hair change photoset (similar lighting, photo angle, and hair length), and granted permission for its redistribution. Photo-submitting participants rated their own hair changes as -2 ($n = 1$), 0 ($n = 1$), 1 ($n = 4$), or 2 ($n = 2$). Each group was exposed to only one photoset to eliminate comparative biases across photo-submitting participants.

Results. 185 of 342 (54.1%) recontactees responded, yielding an average of 23.1 evaluations per photoset (Figure S7). On average, group-perceived hair change scores were 0.07 units higher than self-perceptions. At the time of the original survey, 6 of 8 photo-submitting participants evaluated their hair change as worse than the corresponding recontactee group. Negative and neutral self-perceived hair change scores (i.e., 0, -1, and -2) were, on average, 0.93

units lower than group-perceived scores, whereas positive self-perceived hair changes (i.e., +1 and +2) were 0.24 units higher than group-perceived scores. Differences in self- versus group-perceived hair scores were largest at endpoint endorsements (i.e., -2 and +2), indicating that SSM participants tended to directionally overstate self-perceived hair changes of the most negative or positive magnitude.

Conclusions. While SSM participants tended to overstate both negative and positive self-perceived hair changes, self-assessment biases washed out across all hair change scores (Figure S8). However, these conclusions are a function of the quality of photographs submitted by participants and are thereby variable. Dermatological assessments are needed to determine if self-perceptions align with actual hair changes.

Figures

Figure S1

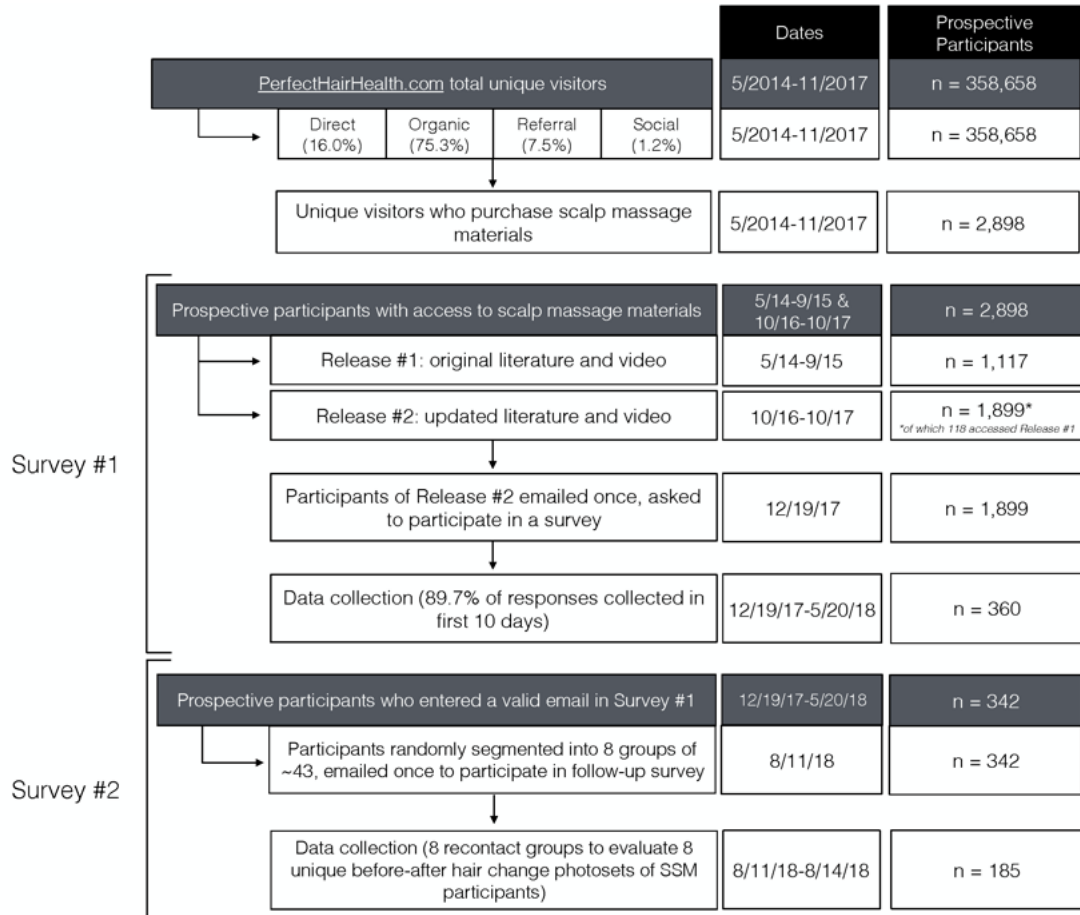


Figure S1: a flowchart detailing 1) participant selection criteria, 2) dates of contact and inclusion, and 3) total participant numbers for the initial survey and recontact surveys. For full size and resolution, please see the following link: https://perfecthairhealth.com/dermatology-and-therapy/figure_s1_SuppInfo.pdf

Figure S2

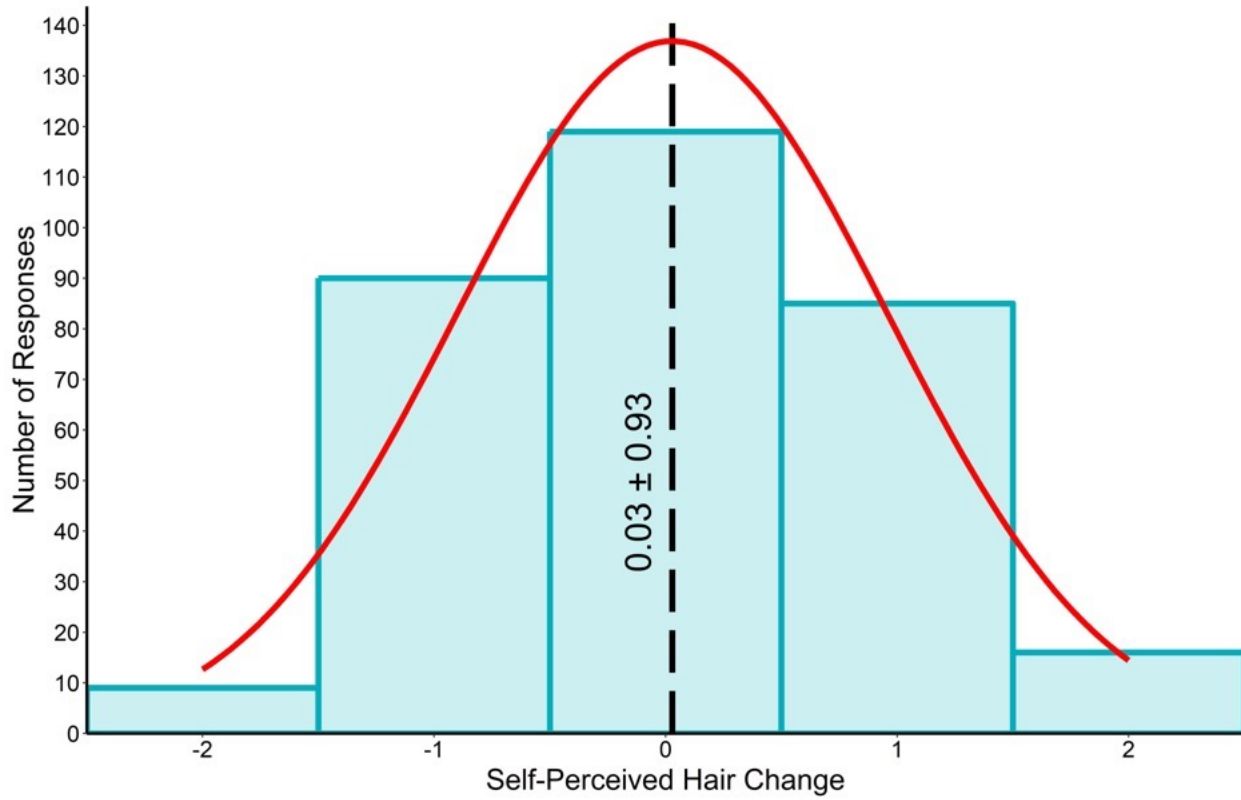


Figure S2: a histogram representing self-perceived hair change response frequencies across all respondents endorsing SSM participation. For full size and resolution, please see the following link: https://perfecthairhealth.com/dermatology-and-therapy/figure_s2_SuppInfo.jpg

Figure S3

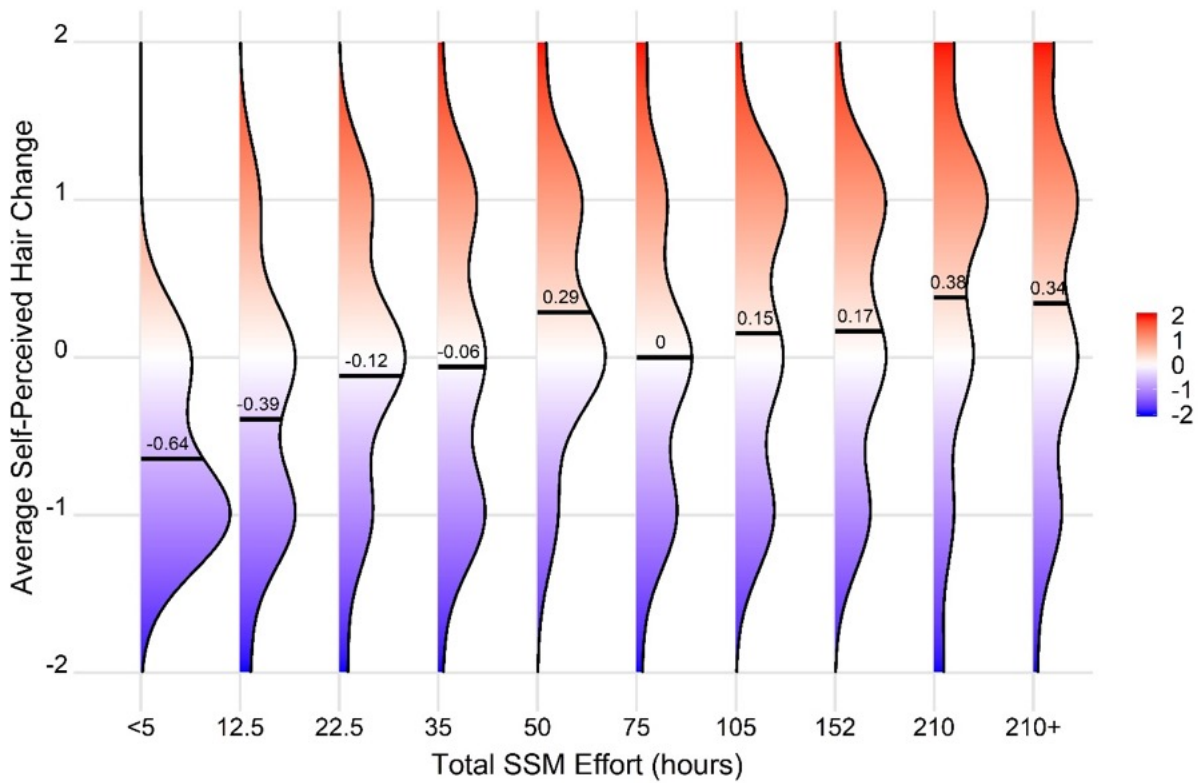


Figure S3: self-perceived hair changes for SSM participants organized by 10% increments of total SSM effort (hours). Black horizontal lines represent the average across response bins. Color codes represent the distribution of reported self-perceived hair changes per bin; red hues as hair regrowth (+1 or +2), white as stabilization (0), and blue hues as hair loss (-1 or -2). For full size and resolution, please see the following link: https://perfecthairhealth.com/dermatology-and-therapy/figure_s3_SuppInfo.jpg

Figure S4

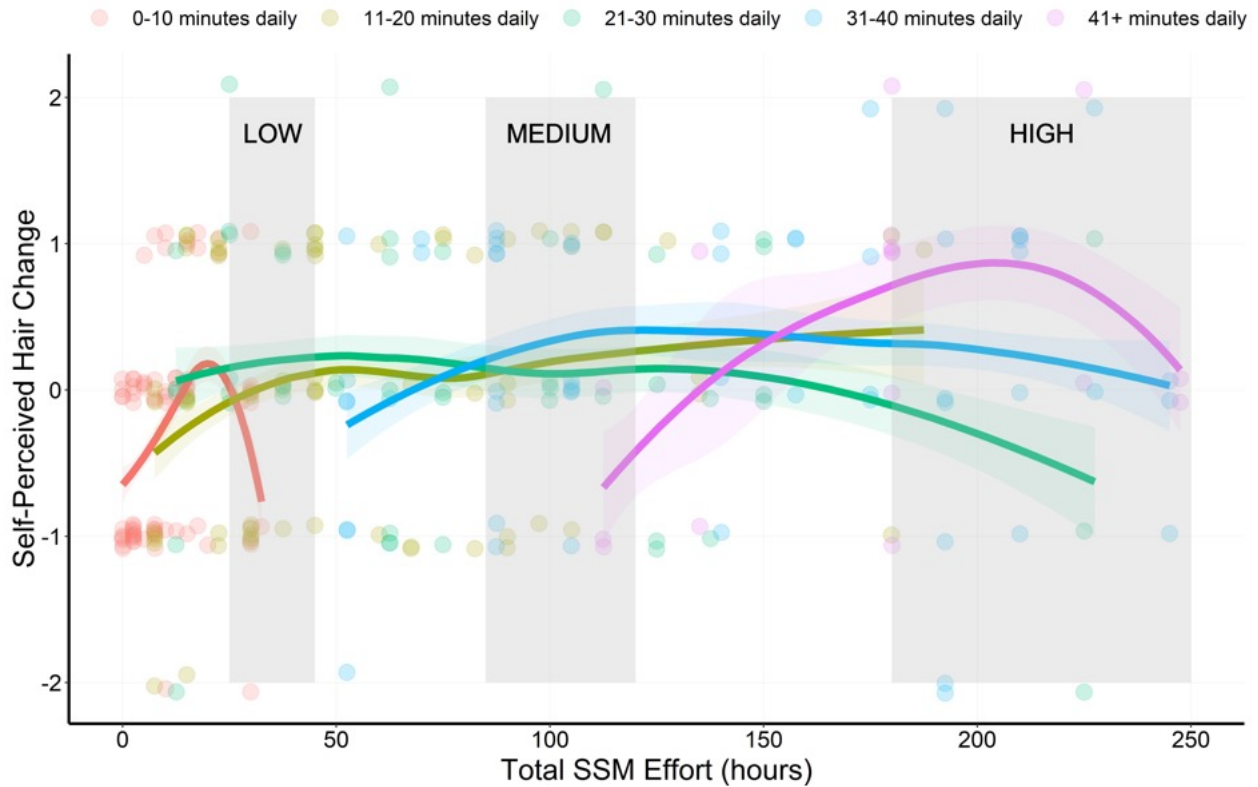


Figure S4: discrete data of endorsed hair changes for all SSM participants, organized by total SSM effort, with grey bands indicating effort groups of low (25-45 hours), medium (85-120 hours), and high (180-250 hours). Data are color-coded by minutes daily endorsements with red, yellow, green, blue, and purple trend lines indicating the mean self-perceived hair changes of SSM participants endorsing 0-10, 11-20, 21-30, 31-40, and 41+ minutes daily, respectively. Corresponding color-shaded bands represent a 50% confidence interval. For full size and resolution, please see the following link: https://perfecthairhealth.com/dermatology-and-therapy/figure_s4_SuppInfo.png

Figure S5

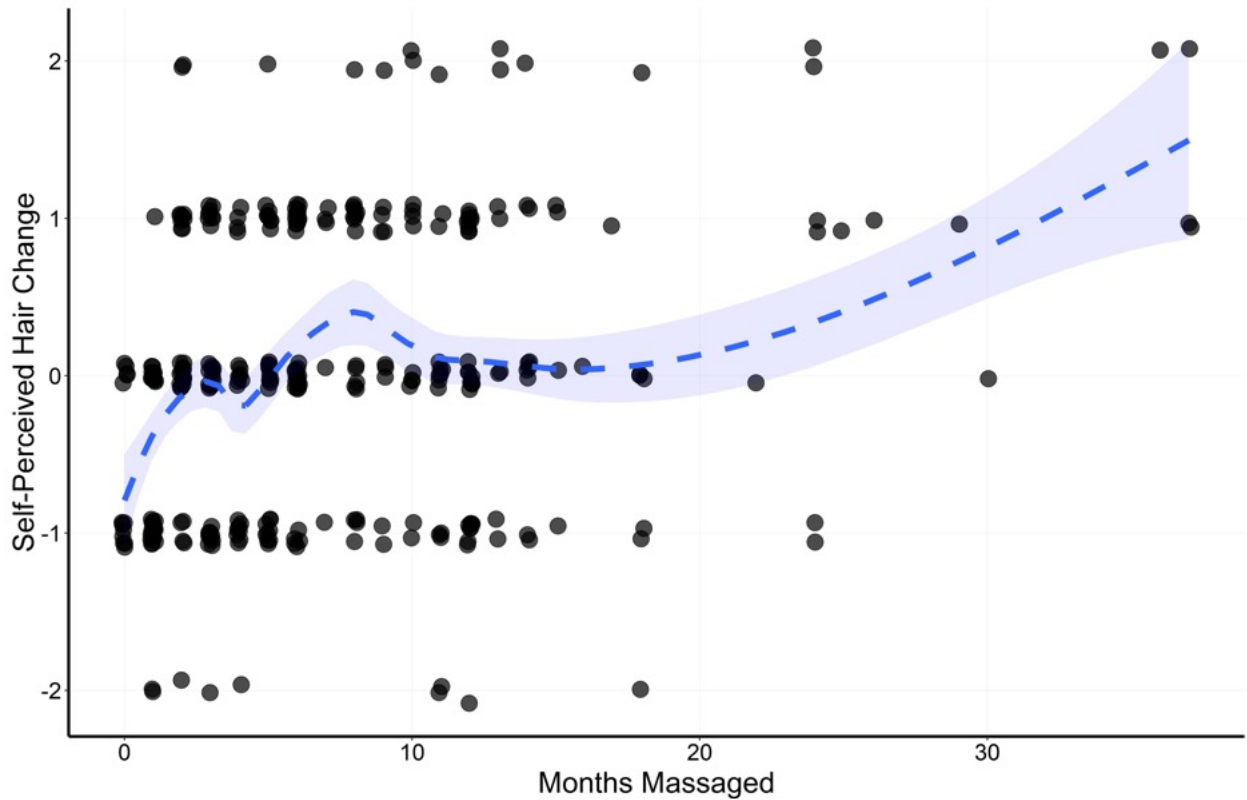


Figure S5: discrete data of endorsed hair changes for all SSM participants, with the blue dashed line corresponding to the average self-perceived hair change for any given month of SSM adherence and blue-shaded bands indicating an 85% confidence interval. For full size and resolution, please see the following link: https://perfecthairhealth.com/dermatology-and-therapy/figure_s5_SuppInfo.jpg

Figure S6

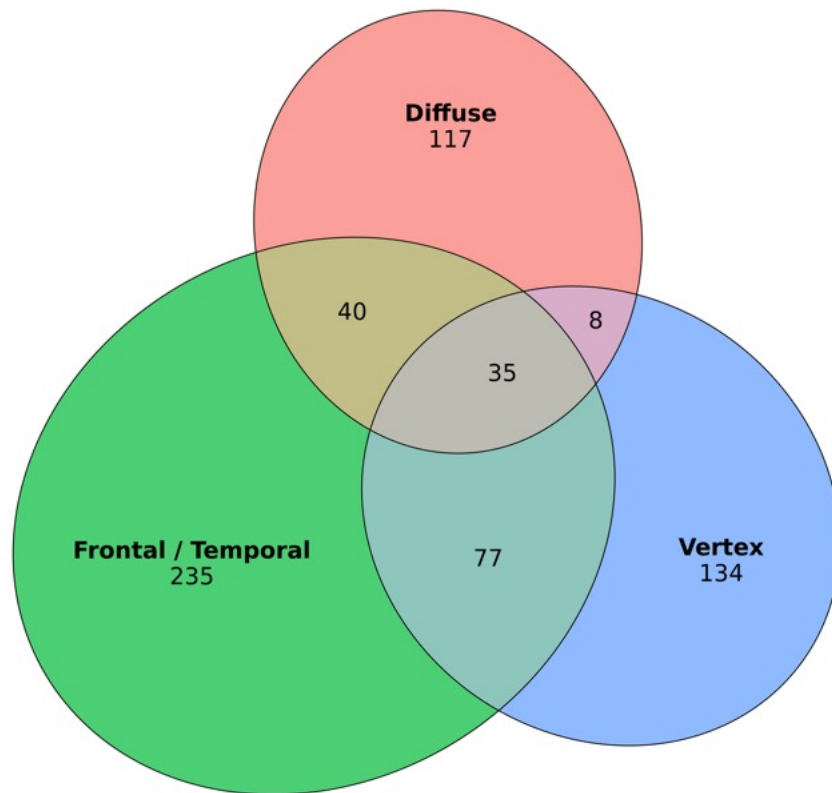


Figure S6: Venn diagram showing the incidence of endorsements for hair loss regions frontal / temporal, vertex, and diffuse thinning across SSM participants. For full size and resolution, please see the following link: https://perfecthairhealth.com/dermatology-and-therapy/figure_s6_SuppInfo.png

Figure S7

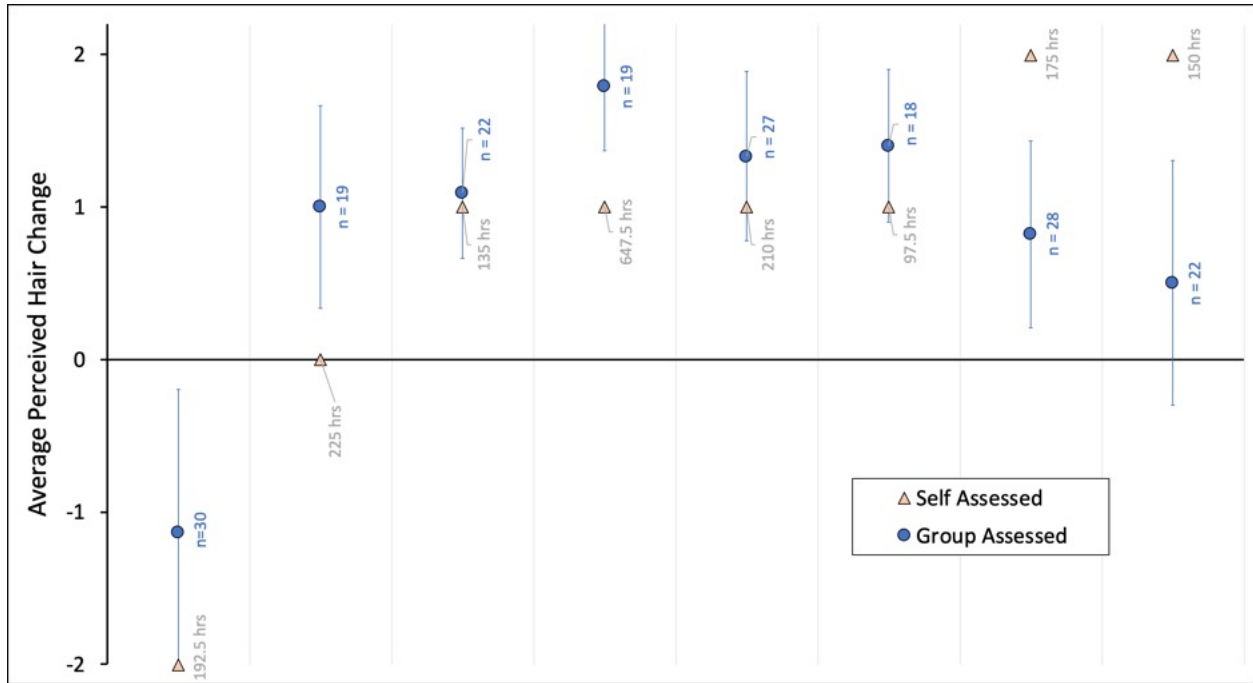


Figure S7: self-perceived hair changes compared to SAGASs-perceived hair changes for SSM participants. Photosets and analyses can be found in Figure S8. For full size and resolution, please see the following link: https://perfecthairhealth.com/dermatology-and-therapy/figure_s7_SuppInfo.jpg

Figure S8

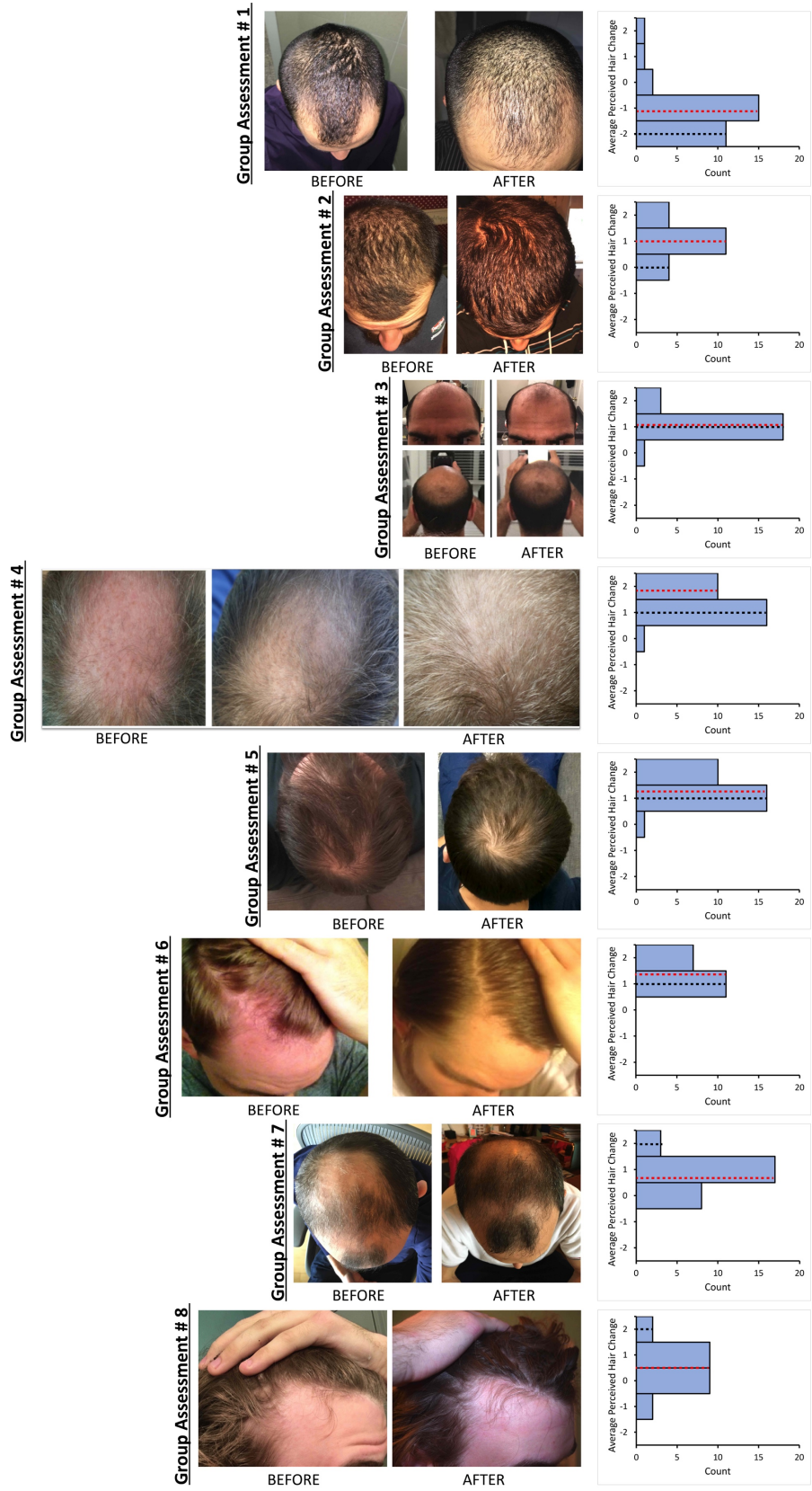


Figure S8: left-hand column: voluntarily submitted before-after photos from survey respondents representing their hair change during SSM participation; right-hand column: evaluations of that respondent's self-perceived hair change (black-dotted line) versus the hair change scores and averages (red-dotted line) given by each respective recontact group following exposure to that photoset. For full size and resolution, please see the following link:

https://perfecthairhealth.com/dermatology-and-therapy/figure_s8_SuppInfo.jpg