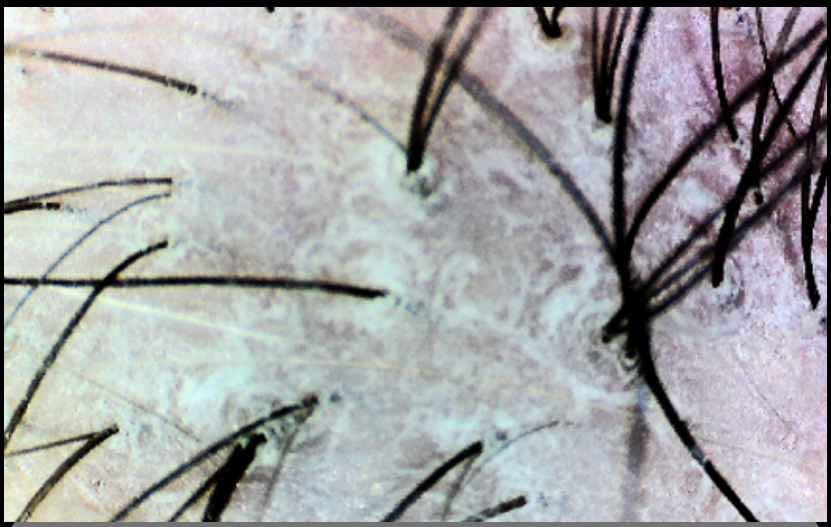
THE HAIR LAB REPORT

Published by TrichoEDU



Recognizing the signs of scarring hair loss,

Not Every Flake Is Buildup

When a scalp treatment becomes part of the problem.

TRICHOEDU SPOTLIGHT

From a career pivot to a thriving Scalp Health Business.

A TrichoEDU journey, in her own words

NOV. 2026 ISSUE 02

WHAT I'M SEEING IN CLINIC

Not Every Flake Is Buildup

When a scalp treatment becomes part of the problem.

A scalp care professional reached out to me with photos of a client's scalp. She had been offering scalp facials for several months and had recently invested in a dermascope. She was excited about her new services, but one client had her stumped.

The client had already had three treatments. Each time, the professional worked to remove what looked like stubborn buildup. But the scale wasn't clearing, the scalp was becoming tender, and the client was noticing more hair loss.

When I looked at the photos, I was concerned. This was not a scalp that needed another exfoliation.

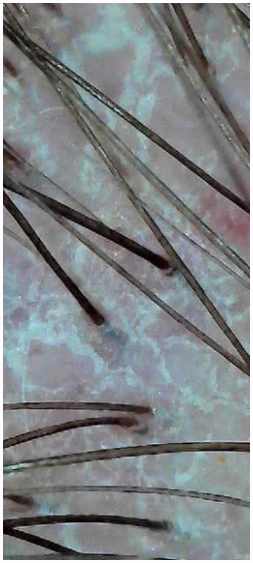
What the photos raised

The photos raised concern for scarring alopecia, a group of conditions that can permanently damage hair follicles. A photo can raise concern, but only an evaluation, sometimes with a biopsy, can confirm it. Repeated scrubbing can aggravate an already inflamed scalp.

How common is it?

More common than most of us realize. In a 2019 to 2024 analysis of US health data, about 37 in every 100,000 people had one of the main lymphocytic scarring alopecias, and lichen planopilaris was the most frequent.[1] Among African American women aged 30 to 60, central centrifugal cicatricial alopecia alone reached 0.15%.[1] In hair clinics, roughly 7% of alopecia patients have a scarring type.[2] New diagnoses overall held steady during that period, but specialists have reported more frontal fibrosing alopecia over the past two decades, though some of that may reflect better recognition.[3] Many people also see several providers before getting the right diagnosis.[4]

> *"Sometimes the most important treatment decision is knowing when not to treat."*



Stop and refer if you see:

- Scale that doesn't clear after treatment
- Tenderness, burning, or pain
- Redness or scale around the follicles
- Smooth, shiny areas with no visible follicle openings
- Hair loss that gets worse during treatment

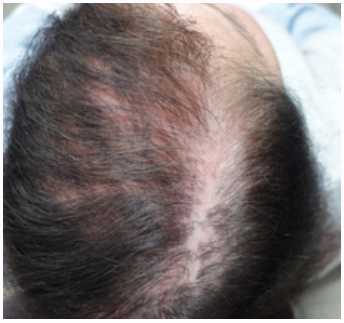
The lesson for our industry

Head spas are bringing needed attention to scalp health, and I love seeing that. But we can't assume every flake needs exfoliating, every red scalp needs calming, or every client needs the same treatment. A dermascope shows us what's happening on the surface. Education helps us recognize when something isn't right. That's the difference between offering a scalp treatment and becoming a scalp health professional.

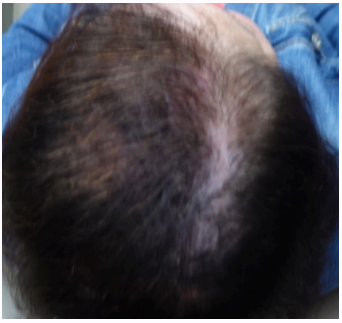
Before you treat the scalp, understand what you're looking at.

More Hair Was Possible. But Only Because the Disease Was Stable.

"Lichen planopilaris · Diagnosed by her doctor before she came to me



Baseline: scarring hair loss visible on the scalp and under the dermascope



Follow-up: improvement in visible density and coverage

The Timeline: 6 Months

Her Plan

- Diagnosis confirmed by her doctor before treatment began
- Disease stable at the start of treatment
- Scalp and follicle monitoring with dermascope imaging
- Growth factor treatments: 3 treatments
- Nutrition & Stress Support

The Assessment

Health History. She came to me already diagnosed with lichen planopilaris by her doctor. We reviewed her symptoms, when they started, her medical and autoimmune history, and what she had already tried. Some itching, and hair loss for the last 10 years. She had decided not to use medication, and that was her choice to make.

Scalp and Follicular Analysis. Dermascope imaging confirmed the scarring pattern and showed:

- Loss of follicular openings in the affected areas
- Perifollicular scale present in some areas
- Areas where follicles were still intact and viable

Why Stability Mattered. Lichen planopilaris is a scarring alopecia. Follicles that have been destroyed do not come back. Her disease was stable when we started, so there was no active inflammation to aggravate. That is what made it appropriate to support the follicles that were still viable.

What happens inside the follicles

In lichen planopilaris, the immune system attacks the upper part of the hair follicle, where the stem cells and the sebaceous gland sit.[5,6] As the disease progresses, the sebaceous gland shrinks and disappears, and the follicle is eventually replaced by scar tissue.[7] In some follicles the gland is gone entirely. In others, only part of it remains. Once the stem cell area is destroyed, the follicle can't regenerate. That is why the dermascope matters: the follicles that still have some structure intact are the ones we can support, and the ones that are gone are gone.

Why This Protocol

She wanted to support her hair without medication. Our goal was never to regrow hair from scarred follicles. It was to help the remaining follicles produce stronger, thicker hair and to watch the scalp closely while we did. Growth factor support fit that goal, and the dermascope let us confirm at every visit that the scalp stayed calm.

Know the diagnosis. Know whether the disease is active. Then decide.

From One Salon Room to a Thriving Scalp Spa

How Carisa Douglass turned 30 years behind the chair into a growing scalp health business.

Where it Started

I spent 30 years behind the chair as a hair stylist, but after relocating, I faced the daunting task of rebuilding my clientele completely from scratch. Rather than starting over with standard hair services, I decided to take a big leap and jump into head spa services. It was clearly the next huge wave in wellness. Once I got my hands in it, I fell in love with scalp health. I saw so many clients coming in with issues that doctors just weren't helping them with. I wanted to fill that gap, but I quickly realized that without proper training, head spas can actually damage hair follicles instead of helping them. That's what brought me to TrichoEDU.

What it changed in her business

In just two years, I went from renting a single room in a salon to owning my own storefront with a team of employees. Adding real scalp care to our head spa services completely changed my business. I quickly became the go to for scalp health in my area. My revenue doubled year-over-year. It also opened the door for me to start training other cosmetologists who have gone on to open their own head spa businesses.

What it actually taught her

The biggest shift was learning how to bridge the gap between clinical scalp care and a luxury experience. TrichoEDU taught me how to move past generic treatments and evaluate the scalp properly using scope analysis, barrier repair, and targeted protocols. It gave me the confidence to treat the root cause of scalp issues safely while elevating the entire service.

"I saw the need to bring the clinical side of scalp health into the luxury head spa room."



For every stylist reading this

Head spa treatments are a wonderful experience, but there's a major gap in the industry right now: the clinical side is missing. If you don't know how to pivot from what you see under the scope into the treatment room, you aren't just giving a basic service,you risk hurting your clients' scalp and hair health. That's why I started teaching classes to other stylists. My trainings are different because we focus on bringing the clinic to the spa. When you back up a luxury experience with real trichological education, you don't just protect your clients; you elevate your entire business.



Carisa Douglass
Trichologist | Owner
Serenity Scalp Spa

Food for Scarring Hair Loss

What it can and can't do

Clients with scarring hair loss often ask me what they should eat. The honest answer is that food will not stop scarring or bring back follicles that are gone. Diagnosis and medical care come first. What good nutrition and the right lab work can do is support your overall health and the follicles you still have.

What we know, and what we don't
In lichen planopilaris, the immune system attacks the stem cells in the hair follicle.

What the research does show
People with LPP have higher rates of some other health conditions, which is why labs matter.

- In one study of 166 LPP patients, 34% had thyroid disease compared with 11% of controls.[1] Other studies have been mixed, but a 2026 meta-analysis found a modest association.[2]
- In a study of 208 LPP patients, 41.8% had abnormal lipid profiles.[3]

Foods that help calm inflammation in the body



Research on the Mediterranean way of eating shows lower blood markers of inflammation, and the strongest evidence is for olive oil.[4] [5]

Build your plate around these:

- Healthy fats: extra virgin olive oil, avocado, walnuts, almonds, chia and flax seeds
- Fish, 2 to 3 times a week: salmon, sardines, mackerel, trout
- Vegetables, in many colors: spinach, kale, broccoli, cauliflower, carrots, beets
- Fruit: berries, cherries, citrus, apples
- Beans and whole grains: lentils, chickpeas, oats, brown rice, quinoa
- Plain yogurt, if it agrees with you
- Eat less of: sugary drinks, fried food, ultra-processed snacks, and heavy alcohol use

These foods lower inflammation markers throughout the body.

Give Her a Plan, and Someone to Lean On

The word "permanent" is hard to hear, and what I see in my chair is backed by research. In one study of 83 people with lichen planopilaris, 34% said the disease affected their quality of life at least moderately, and 29% showed at least mild depression.[1] Studies also find that people with scarring alopecia often feel they have little control over the condition or its treatment.[2] A plan and support are how we give some of that control back.

What helps a scared client

1. Listen before you explain. Let her tell the whole story first.
2. Fear grows when there's no plan.
3. Give her next steps she can see: baseline photos, rechecks on a schedule, and who to call if symptoms flare.
4. Be honest and kind. Don't promise regrowth. Do promise you'll be there.
5. Help her build support: regular sleep, gentle movement, a few quiet minutes a day, and someone to talk to.

> *"When a client hears 'scarring,' she stops hearing anything after it. So I slow down. I don't start with treatment. I start with: you're not alone, this isn't your fault, and we'll take it one step at a time. I can't promise her hair. I can promise her a plan." - Tabitha*

FROM TABITHA



I'm Tabitha Fredrichs, founder of TrichoEDU. Before I ever picked up a dermascope, I spent years behind the chair, cutting, coloring, and listening to clients tell me things I didn't yet have the training to answer. Everything in this report comes from that same place: real clients, real questions, and the belief that hair professionals deserve real education for what happens when hair starts to change.
Thank you for reading Issue 02. If one page in here changes one conversation you have this week, this whole thing was worth building.
- Tabitha

TrichoEDU Courses & Certifications
Scalp Lab Foundation - for scalp spa professionals and hairstylists ready to start understanding the scalp, not just the hair.

Full Trichology Practice - the complete path to practicing trichology with real clinical confidence. Board Certification through the American Naturopathic Medical Association
.
Scope of Practice - built for med spas and hair restoration physicians integrating trichology into existing care.

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COMING UP!

HAIR LAB LIVE - NASHVILLE Jan. 2027
Everything in this report, taught in person. Hair Lab Live is where TrichoEDU students and hair professionals come together for hands-on training, real case work, and the kind of education that doesn't fit on a page.

Open to anyone who wants to learn more. No prior TrichoEDU experience required.
Sign up: TrichoEDU.com/live

NEXT ISSUE - Jan. 2027

TrichoEDU Research Desk

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