

# Coping with hair loss





**“ The treatment side effect I was least looking forward to was hair loss. But I thought, ‘Maybe this is a chance to have a different hair style’. ”**

Lurline, who had hair loss from chemotherapy

# About this booklet

This booklet is about hair loss. It is for anyone whose hair may be affected by cancer treatment, or who is coping with changes to their hair. It has information for people with all types of hair. When we use the term Afro hair in this booklet, we mean type 4 coily hair.

The booklet explains:

- how cancer treatment may affect your hair
- how to prepare for hair loss
- ways to cope with and manage hair loss
- what to expect after treatment ends.

We hope it helps you deal with some of the questions or feelings you may have. You can also talk to your doctor or nurse about how cancer treatment may affect you.

## How to use this booklet

This booklet is split into sections to help you find what you need. You do not have to read it from start to finish. You can use the contents list on page 3 to help you. It is fine to skip parts of the booklet. You can always come back to them when you feel ready.

On pages 100 to 103, there are details of other organisations that can help. There is also space to write down questions and notes for your doctor or nurse (page 104).

If you find this booklet helpful, you could pass it on to your family and friends. They may also want information to help them support you.

### Quotes

In this booklet, we have included quotes from people whose hair has been affected by cancer treatment. These are from people who have chosen to share their story with us. This includes Lurline and Doug, who are on the cover of this booklet. To share your experience, visit [macmillan.org.uk/shareyourstory](https://macmillan.org.uk/shareyourstory)

### For more information

If you have more questions or would like to talk to someone, call the Macmillan Support Line free on **0808 808 00 00**, 7 days a week, 8am to 8pm, or visit [macmillan.org.uk](https://macmillan.org.uk)

If you would prefer to speak to us in another language, interpreters are available. Please tell us, in English, the language you want to use.

If you are deaf or hard of hearing, call us using Relay UK on **18001 0808 808 00 00**, or use the Relay UK app.

We have some information in different languages and formats, including audio, interactive PDFs, easy read, Braille, large print and translations. To order these, visit [macmillan.org.uk/otherformats](https://macmillan.org.uk/otherformats) or call **0808 808 00 00**.

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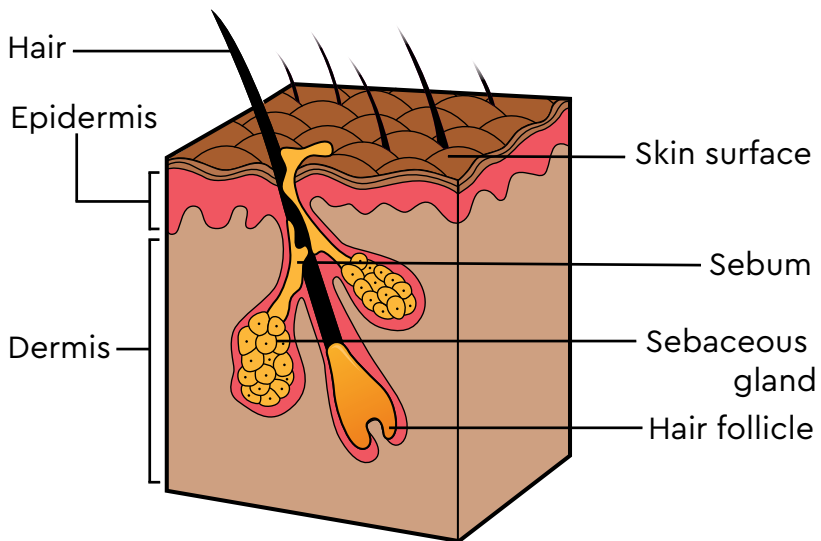
# Cancer and hair loss

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# Cancer treatment and hair loss

Hair grows from tiny dents in the skin called follicles. Each hair grows, rests and then falls out. In a healthy body, about 90% of the hairs (9 out of 10) are at the growing stage of this cycle.

## Structure of the skin





## Causes of hair loss

Hair loss is not a symptom of cancer and cancer does not cause you to lose your hair. But cancer treatments can affect your hair in the following ways:

- Some treatments may make your hair fall out. You may lose just some of your hair or it may all fall out. This is usually temporary.
- Other treatments can cause permanent hair loss in parts of your body.
- You may not lose your hair, but the condition and texture of your hair may change. This is usually temporary.

If you do lose your hair, you could use a wig, scarf or bandana to cover up hair loss from your head. There is more information about options for people with hair loss on pages 56 to 65.

**“ In the end, I really liked the shaved head look. My hair's a lot curlier now though, when it gets longer. ”**

Jon, who had hair loss from chemotherapy

# Chemotherapy

Chemotherapy uses anti-cancer drugs to destroy cancer cells. These are called cytotoxic drugs. Chemotherapy drugs disrupt the way cancer cells grow and divide. They also affect some normal cells. This includes the cells of the hair follicles (page 6).

Hair loss caused by chemotherapy is called chemotherapy-induced alopecia (CIA).

Healthy cells can usually recover from damage caused by chemotherapy. This means that after chemotherapy treatment ends, your hair will usually grow back.

Many people worry that they will lose their hair if they have chemotherapy. A lot of chemotherapy drugs cause hair loss, but not all of them. Your specialist nurse or chemotherapy nurse can tell you if your treatment is likely to cause hair loss.

If you are having chemotherapy and you do not lose your hair, this does not mean that the chemotherapy is not working.

The level of hair loss can vary. It may be hardly noticeable, or you may lose all your hair. This depends on the:

- drug or combination of drugs you are having
- dose of each drug
- way your body reacts – different people react in different ways to the same drug.

Before you start chemotherapy, your cancer doctor or chemotherapy nurse will talk to you about side effects and how likely you are to lose your hair. You will not start treatment until you have given your consent.

A process called scalp cooling can reduce or prevent hair loss due to chemotherapy (pages 38 to 43). It is not suitable for everyone having chemotherapy.

As well as the hair on your head, you may lose other body hair, such as:

- eyebrows and eyelashes
- nasal hair
- facial hair (beard or moustache)
- chest hair
- leg, arm and underarm hair
- pubic hair.

These changes are almost always temporary. We have some practical tips to help you cope with this (pages 46 to 53).

There is more information about this treatment and its side effects in our booklet **Understanding chemotherapy** (page 94) and on our website at **[macmillan.org.uk/chemotherapy](http://macmillan.org.uk/chemotherapy)**

## When hair falls out

If your treatment causes hair loss, it will usually start about 2 to 3 weeks after your first chemotherapy session. Sometimes it can start within a few days, but this is rare.

You may notice hair on your pillow in the morning. You may also see more hair coming out when you brush, comb or wash it.

Hair loss affects people in different ways. Some people only lose some of their hair. Others lose all their hair over several weeks. Occasionally, people lose all their hair over 1 or 2 days. This can be very upsetting. Sometimes your hair may start to grow back between treatments.

Even if you do not lose all your hair, it may become dry and break more easily. All types of hair can be affected. But Afro hair (type 4 coily hair) is naturally more fragile and more vulnerable to damage from chemotherapy. Looking after your hair may help it stay in good condition (pages 46 to 48).

When your hair falls out, your scalp may feel tender or sore. There are things you can do to help look after your scalp (page 49).

## Hair regrowth after chemotherapy

Hair loss from chemotherapy is almost always temporary. Your hair should start to grow back after treatment ends, but it may be different from the hair you had before. It may grow back:

- curlier, straighter, finer or fluffier
- a different colour
- unevenly, or at different speeds in different areas.

Facial hair, such as beards and moustaches, may also grow back patchy or a different colour. It may take a while for facial hair to get back to what it was like before treatment.

About 3 to 6 months after treatment ends, your head will probably have a covering of very short hair. By 12 months after your treatment ends, you should have an idea of how thick your hair will be. Afro hair grows more slowly so it may take longer to know what your hair will be like.

Very rarely, hair loss can be permanent. Some chemotherapy drugs can permanently damage the hair follicles. Other chemotherapy drugs can have the same effect in high doses.

Your hair may only partly grow back. It may also be thinner than before. Your doctors or nurses can talk to you about this before you start treatment. Unfortunately, there is no way to tell if hair loss will be permanent. Scalp cooling may help reduce the risk of permanent hair loss in some situations (pages 38 to 43).

# Radiotherapy

Radiotherapy uses high-energy rays called radiation to treat cancer. It destroys cancer cells in the area where the radiotherapy is given.

Some normal cells in the area being treated can also be damaged by radiotherapy. This can cause side effects, including hair loss.

For external beam radiotherapy, a radiotherapy machine aims high-energy rays at the area of the body being treated. You may lose hair where the radiation beam:

- enters the body
- leaves the body.

**“ I was receiving radiotherapy to the neck, so I lost facial hair from the side of my face. ”**

Jamal, who had hair loss from radiotherapy

You can ask your cancer doctor or radiographer to show you where your hair may fall out.

The amount of hair loss depends on the dose of radiotherapy, and the number of treatments. It also depends on where you have radiotherapy. For example:

- If you have radiotherapy to your head, you will probably lose some hair from your scalp. This will be in the areas where the radiotherapy beam enters and leaves your head.
- If you have radiotherapy for breast cancer, and the treatment area includes your armpit, you are likely to lose your underarm hair.
- If you have radiotherapy to your head or neck, you may lose your beard.

Hair usually begins to fall out after 2 to 3 weeks. It takes about a week for the hair in the treatment area to fall out completely.

There is more information about this treatment and its side effects in our booklet **Understanding radiotherapy** (page 94) and on our website at **[macmillan.org.uk/radiotherapy](http://macmillan.org.uk/radiotherapy)**

## Hair regrowth after radiotherapy

Hair regrowth after radiotherapy depends on different things, including the:

- type and dose of treatment
- number of treatments
- area of your body affected.

Your radiographer can usually tell you if your hair is likely to grow back.

Your hair can start to grow back once the skin has healed. This is usually 3 to 9 months after treatment ends. If you have had treatment with a high dose of radiotherapy, it may take longer. The hair that grows back may be:

- thinner
- patchy
- a different colour.

Sometimes the hair loss is permanent (page 90). This can be more upsetting if it affects the hair on your head. You may find it helpful to talk to your specialist nurse or radiographer. Or you can talk to one of our cancer support specialists on **0808 808 00 00**.





**“ A few days before I started radiotherapy, I dyed my hair as a good send-off. My hair is not as thick as it used to be, but I’m quite used to shaving it now ”**

Vivek, who had hair loss from radiotherapy

# Surgery

If you are having an operation on a part of the body that has hair, that area will be shaved. Your hair will grow back after the operation. However, it may not grow back along the scar line.



# Other treatments

Some people having hormonal therapy, targeted therapy or immunotherapy notice that their hair becomes thinner. This is usually mild, and the hair grows back after treatment ends. If you have a beard, you may have less beard growth.

Your hair may:

- change colour
- be finer
- be curlier
- be more brittle.

Different therapies have different side effects. Your cancer doctor or specialist nurse can tell you more about the treatment you are having and its possible effects on your hair.

# Questions to ask your healthcare team

Different treatments affect hair in different ways. Your doctor, nurse or radiographer can tell you more about what to expect. Here are some questions you may like to ask them:

- How will the treatment affect my hair?
- How soon after starting treatment will my hair start falling out?  
How quickly will it fall out?
- Will I lose hair from other parts of my body?
- Which parts of my body might be affected by hair loss from radiotherapy?
- Is there anything I can do to prevent hair loss?
- Is scalp cooling an option for me to help prevent hair loss from chemotherapy?
- Will my hair grow back after treatment ends?
- How long after treatment will my hair start to grow back?
- Can I get financial help to buy a wig or hairpiece?
- Where can I get suitable scarves, hats and other head coverings?





# Your feelings about hair loss

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# Your feelings

People have different feelings about losing their hair. For some, losing their hair is one of the hardest parts of cancer treatment. For others, it is not as bad as they expected. Some people are not concerned about losing their hair.

Hair can be an important part of your appearance and identity. Losing your hair can have a big effect on how you feel about yourself.

You may feel uncomfortable around other people. You may lose your self-confidence, or feel anxious or depressed. You might also worry about how losing your hair will affect relationships with family or friends.

For some people, hair plays an important part in their religion or culture. For example, many Sikh people do not cut their hair or shave, and some people in the Orthodox Jewish community may have sidelocks (payot).

If you have had long hair, a beard or moustache for a long time, losing this can be difficult. You may think of your hair, beard or moustache as part of your usual appearance and not feel right without them for a while.

Losing your hair can also be a visible reminder of the cancer for you and other people. You might think that your hair loss tells other people you are having cancer treatment, even if you have not told them yourself. This might mean you want to avoid people.

All these feelings are completely normal. We have more information about the emotional effects of cancer, ways to help manage difficult feelings, and body image in our booklets **How are you feeling?** **The emotional effects of cancer** and **Body image and cancer** (page 94).



## Other people's reactions

Many people know that cancer treatment can affect your hair. Your family or friends may be upset by your hair loss. This can be difficult for you when you already have a lot to cope with. But their reaction is usually because they are concerned for you. They may not know how to react.

Remember, it is your choice whether you tell people you have cancer. You should not feel under pressure to tell people if you do not want to.

**“ I still have down days when I don't like the way it looks. But I am not ashamed of how I look. That's who I am. ”**

Sara, who had hair loss from chemotherapy

**“The first couple of weeks I was conscious of it, so I wore headscarves. But after my second chemo, I walked out of the chemo unit with my bald head. My head is bald because I’m on chemo to treat breast cancer. I shouldn’t be ashamed of that. ”**

Natasha, who had hair loss from chemotherapy

# Emotional support

Many people find that their family or friends are very supportive. You may find it helpful to talk with them about how losing your hair makes you feel.

But you may not want to talk with people you know. Or they may not feel comfortable talking about cancer and treatment side effects.

Whatever your situation, it can take time to come to terms with hair loss and be able to talk about it with other people.

Some people find it easier to talk to people they do not know. At the hospital you will probably meet other people who have lost their hair. They may be able to give you advice and tips on how they have coped.

You can also meet people at cancer support groups, or online. Our Online Community is a place to chat with other people, make friends and join support groups. You can also read posts or blogs that other people have written about hair loss, or write about your experiences. Visit [macmillan.org.uk/community](https://www.macmillan.org.uk/community)

If you are finding it hard to cope with hair loss, cancer or your treatment, you can also call our cancer support specialists on **0808 808 00 00**. They can listen to you, provide emotional support and tell you about other sources of help. The charity Cancer Hair Care also offers a free phone advice service (page 100).

You may find our booklets **How are you feeling? The emotional effects of cancer** and **Talking about cancer** helpful (page 94).



# Preparing for hair loss

How to prepare for hair loss

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# How to prepare for hair loss

Before your hair starts to fall out, there are things you can do to prepare yourself practically and emotionally.

## Talk to people

You may worry about how other people will react when you lose your hair.

Some people may feel uncomfortable and be unsure what to say. It can help to talk to people about it before you lose your hair. This can help them know how you feel and how they can help support you. For example, they may be able to help you choose a wig or hairpiece that suits you.

You may find it helpful to talk to your hairdresser or barber. They may already have clients who have lost their hair due to cancer treatment. They may be able to offer advice and support. And they will know what to expect next time you come in.

If you have children, you may worry that they will be scared if they see you without hair. Remember, you will still sound and feel like you. When children are told about changes to your appearance before they happen, they usually cope well.

Cancer Hair Care has dolls in a variety of skin tones to help explain hair loss to children (page 100). We have more information about talking about cancer and talking to children and teenagers on our website, and in our booklets **Talking about cancer** and **Talking to children and teenagers when an adult has cancer** (page 94).

You may find it helpful to talk to other people who have, or have had, hair loss. Ask your doctor or nurse about cancer support groups in your local area or visit [macmillan.org.uk/localsupportgroups](https://www.macmillan.org.uk/localsupportgroups)

The charities Look Good Feel Better and Cancer Hair Care run monthly workshops about hair loss and scalp care (page 100).

You can also contact Macmillan on **0808 808 00 00** and talk to a cancer support specialist. Or you can find support from people in the same situation on our Online Community. Visit [macmillan.org.uk/community](https://www.macmillan.org.uk/community)

**“ Nothing prepared me for the loss of my hair. Because it happened so quickly, it took me by surprise. But I got support and eventually got through it. ”**

Lurline

## Get a wig before treatment starts

If you think you would like to wear a wig, it is a good idea to get one before you start treatment. This means:

- it is easier to match the wig to your own hair colour and style
- you can get used to wearing it before your hair starts to fall out
- it will be ready in case you lose your hair earlier or more quickly than expected.

You may feel that everyone will notice that you are wearing a wig. But wigs are often very good and can be cut and styled so people may not realise. Some salons have specially trained hairdressers who can style your wig ready for you to use. Contact the charity My New Hair to find out more (page 101).

Your specialist nurse can tell you how to get a wig on the NHS. It may be a good idea to take a family member or friend with you when you are choosing a wig. They can give an honest opinion about what suits you. We have more information about wigs on pages 70 to 81.



## Buy a hat or other headwear

You will probably not want to wear a wig all the time. For example, you might not want to wear a wig at home, or when you are on your own.

However, your scalp will be more sensitive to cold, windy or sunny weather. If you are used to having a full head of hair, your head may feel cold even when you are at home.

There are different options for keeping your head warm or protected. For example, you can wear a:

- hat
- turban
- baseball cap
- bandana
- headscarf.

You may want to wear a head covering while your hair is falling out. We have more information about different head coverings on pages 56 to 67.

## Consider cutting your hair short

Many people decide to prepare themselves for losing their hair by cutting it short. Losing smaller clumps of hair can be easier to cope with than losing larger clumps. Hair often comes out in uneven patches, and this is usually less distressing with shorter hair.

It can also give your family and friends the chance to get used to seeing you with less hair. Cutting your hair in stages will give you time to get used to a new length.

If you do not want to cut your hair, you may find other headwear helpful, such as hats, scarves or bandanas.

If you want a hairdresser or barber to cut your hair, you can ask your own. There are also places that specialise in styling hair for people affected by cancer. You can find these through the charity My New Hair which supports people with medical hair loss (page 101).

**“ I would get up in the morning and find my hair on my pillow. Eventually, I cut it all off. It was my way of taking charge. ”**

Matt, who had hair loss from chemotherapy

Some people choose to shave their heads completely before they start losing their hair. This can give a sense of control over what is going to happen.

If your hair is long enough, you may wish to donate it to the Little Princess Trust (page 101). This is a charity that makes wigs for children who have lost their hair.

If you do want to remove all your hair, use clippers. Avoid using a blade or razor, as this can lead to cuts and infections.

### **Tips for using clippers**

- If you have never used clippers before, talk to a hairdresser or barber first. They should be understanding and can give you advice.
- Remove most of your hair with scissors first. Then use a set of clippers with a cutting guard or attachment to prevent cuts. You might find it easier to get someone to help you.
- Some clippers have a power cord, and some are cordless. The head of the clippers may swivel or be fixed in place. If you can, ask someone who uses clippers what they would recommend.
- It is easier to use clippers on clean, dry hair with no products in it. Make sure you feel comfortable using the clippers before you start. The charity Cancer Hair Care has a guide on using clippers (page 100).
- Leave a very short layer of hair. Do not use a '0' setting, as you cannot use a guard with this setting.

## Think about your eyebrows and eyelashes

You might be worried about losing your eyebrows and eyelashes. Before you lose your hair, you could buy any products you might need, and learn how to use them (pages 50 to 52).

You could check whether your local Boots store has a Boots Macmillan Beauty Advisor. They offer free, face-to-face advice about caring for your skin, hair and nails during and after cancer treatment.

Visit [boots.com/macmillan/feelmorelikeyou](https://www.boots.com/macmillan/feelmorelikeyou)



## When hair begins to fall out

No matter how much you have prepared yourself, it can be very distressing when your hair starts coming out. Allow yourself time to feel sad and upset, or angry. It is understandable to feel these emotions.

If you can, talk to someone about your feelings (pages 22 to 25). They can reassure you that you are still the same person. You will just look a little different for a while because of the treatment.

You might find it helpful to wear a hair net, soft cap or turban at night. This will stop your hair becoming tangled, and will collect any loose hair.



Wearing a scalp cooling cap

# Scalp cooling

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# Scalp cooling during chemotherapy

Scalp cooling is a way of reducing or preventing hair loss from chemotherapy. Scalp cooling during treatment can also help hair grow back faster after treatment ends. It is often called a cold cap or cool cap.

## How scalp cooling works

Scalp cooling reduces the temperature of the scalp. This makes the blood vessels in your scalp smaller and reduces the blood flow to your scalp. This can stop some chemotherapy drugs from affecting your hair follicles. Your chemotherapy nurse will be able to tell you if the cold cap may help reduce hair loss for you.

## Types of scalp cooling

There are 2 types of scalp cooling:

- refrigerated cooling system
- cold gel cap.

Whichever type you use, your chemotherapy treatment will take longer than it would without scalp cooling. This is because you need to have the cold cap put on before you have the treatment. It also needs to stay on for some time after your treatment has finished.



## **Refrigerated cooling system**

A machine pumps liquid coolant through the cap while you are wearing it. This reduces your scalp temperature. The cap generally feels lighter than a cold gel cap. While the cap is in place, you need to sit next to the machine. If you need a toilet break, your chemotherapy nurse can disconnect you from the machine.

## **Cold gel cap**

This uses a special cap filled with frozen gel and kept in a freezer. The cold cap is fitted easily and kept in place with Velcro®. Your nurse will change the cap every 20 to 40 minutes to keep your scalp cool while you have your treatment.



**“ I tried the cold cap twice. It was very cold, but I wanted to try anything to keep my hair. Unfortunately, it didn’t work for me. ”**

Lurline

# Who can have scalp cooling

Scalp cooling is only effective with certain chemotherapy drugs. Some hospitals are not able to offer it. Your doctor or chemotherapy nurse can tell you if it is available and suitable for you.

Scalp cooling can be used by people with any type of hair. To get the best results, it is important that you follow your chemotherapy nurse's guidance on caring for and preparing your hair.

If you have Afro hair, you will need to remove any weaves or braids before trying scalp cooling. These put extra strain on the hair follicles. You will also need to avoid relaxing your hair chemically. Your chemotherapy nurse will have information and instructions about your particular hair type.

Scalp cooling is not suitable if any of the following apply to you:

- You have a blood (haematological) cancer, such as myeloma, leukaemia or lymphoma. This is because there is a risk of cancer cells surviving in the blood vessels of the scalp. This means the cancer may come back.
- You have a medical condition where you are very sensitive to cold.
- You are having continuous chemotherapy through a pump for several days.
- Your liver is not working as well as it should be. This means the chemotherapy drugs may stay in the body for longer than usual. It may not be possible to keep the scalp cold for long enough.

## How well does the cold cap work?

How well the cold cap works varies from person to person. Scalp cooling works better with some chemotherapy drugs than others.

You will only know how well scalp cooling works for you by trying it. Even if you have scalp cooling, your hair is likely to get thinner. And some people who have scalp cooling will lose a lot of hair.

Even if you do lose your hair, you may want to continue with scalp cooling. Research has shown that for people who have scalp cooling, their hair grows back faster and stronger in the 12 weeks after treatment finishes.

The chemotherapy drug docetaxel can occasionally cause permanent hair loss. But having scalp cooling can help reduce the risk of this.

It is your choice whether to continue with scalp cooling. If you find it hard to cope with, or if it is not working well, you can stop it at any time. This includes during a treatment session.

## Things to consider

Both types of cold cap need to be worn for 30 to 45 minutes before you have the chemotherapy, and for some time afterwards. How long the cap stays on for afterwards will depend on the chemotherapy drug you are having. You may wear the cap for a few hours in total.

Some people find the cold cap uncomfortable or heavy, especially for the first 15 to 30 minutes. You could try distracting yourself from the cold by talking to someone or listening to music.

It can also give some people a headache. Ask your chemotherapy nurse if you can have a mild painkiller to help.

The chemotherapy staff will help you feel as comfortable as possible. Things that might help include:

- hot drinks
- warm clothes
- blankets.

Scalp cooling only protects the hair on your scalp. Body hair may still fall out, including:

- eyelashes and eyebrows
- beards and moustaches
- chest hair
- pubic hair.

People used to think that scalp cooling may put you at risk of developing secondary cancers in the scalp. However, research has shown that scalp cooling does not increase the risk of developing secondary cancers in the scalp. If you are concerned about this, talk to your doctor.

Your chemotherapy nurse can tell you more about scalp cooling and what is involved. The charity Cancer Hair Care has more information and videos about scalp cooling (page 100).



# Practical tips for coping with hair loss

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# Caring for your hair

Even if you do not lose your hair, you may find your hair is dry or brittle. This could happen during or after your cancer treatment.

Here are some tips to help you keep your hair in good condition. The tips are helpful for any type of hair. We have included further information for people with Afro hair, as this hair type naturally gets damaged more easily.

## Washing your hair

- Wash your hair as you normally would. Washing will not make hair loss worse, or make hair fall out faster. The important thing is to keep your hair and scalp clean.
- Start with your usual shampoo and hair products. But if the condition of your hair changes, for example if it becomes dry or brittle, you may need to change what you use.
- You may want to use a gentle, fragrance-free shampoo that does not contain any harsh chemicals. If you are unsure what to use, check with your healthcare team.
- If you are having radiotherapy to your head, check with the radiotherapy team which products you can use on your hair and scalp.
- When washing your hair, use conditioner as recommended. This usually means applying it to the middle lengths and ends of the hair.



## Drying and styling your hair

- Be gentle when using a towel to dry your hair. Do not rub hard, as this can damage the hair.
- When your hair is wet, use a wide-toothed comb, as these cause less damage than brushes. There are also brushes designed for use on wet hair. Start combing or brushing from the ends of your hair to reduce tangles.
- Try to keep your hair free from tangles. Combing your hair every day with a wide-toothed comb will remove any loose hairs. You may prefer to use a brush, depending on your hair type.
- If you use a brush, use one that does not get caught in, or pull on, your hair. This may cause damage.
- Avoid too much heat from hairdryers or heated rollers. These can cause the hair to split and break. Use a hairdryer on a low heat and hold it at least 15cm (6in) away from the hair. Avoid using hair straighteners or curling tongs too often.
- Avoid tying your hair up with a tight band, as this can cause damage and breaks. If you plait your hair, braid it gently.
- If you want to use chemicals such as perms or colours on your hair, make sure your hair and scalp are in good condition first. If you are having chemotherapy, you may have an allergic reaction to strong hair chemicals. It is important to do a sensitivity test before a colour or perm. We have more information on colouring, perming or relaxing your hair after your treatment has finished (pages 87 to 90).

## Afro hair

- If you are going to lose your hair or have scalp cooling, it helps to remove weaves, extensions and braids before you start treatment. These can put extra strain on the hair follicles. We have more information on scalp cooling on pages 38 to 43.
- If you plan to chemically relax your hair, it is important that your hair and scalp are in good condition. This will help avoid damaging your hair. Do a sensitivity test before applying any chemicals to your hair.
- You may be used to using oil on your hair and scalp to help keep your hair moisturised. You may need to change the oil you use, or use less than usual. This is because you may have less hair to absorb the oil. Reducing the amount of oil on the scalp will also help if you wear a wig.

Cancer Hair Care has more information about caring for Afro hair (page 100).

# Caring for your skin

It is important to take care of the skin in areas where you have hair loss. It may be more sensitive or tender than skin on other parts of your body.

- If you are having radiotherapy, talk to the radiographers about which deodorants, soaps, perfumes and lotions you can use. If you have a skin reaction, such as soreness or a change in skin colour, let the radiotherapy team know as soon as possible. They will advise you on the best way to manage it.
- Unless your healthcare team tells you not to, wash your scalp every day, even if you have lost all your hair. This is especially important if you wear a wig, which can make your scalp hot and sweaty. Use a gentle shampoo or a facial wash.
- If your scalp gets dry, flaky or itchy, you may want to use a gentle, fragrance-free moisturiser.
- If your skin develops red spots or a rash, tell your healthcare team. If the hair follicles become inflamed, you may need antibiotic treatment.
- You may find it helps to use pillowcases made of natural fibres, such as cotton, silk, bamboo or linen. Man-made (synthetic) fibres, like nylon and polyester, can irritate the scalp.
- Use a suncream with a sun protection factor (SPF) of at least 30 on your scalp whenever you go out. Even if you have black or brown skin, you need to protect your scalp. You could also wear a hat.
- When it is cold, cover your head to protect your scalp and keep it warm.
- If you wear a wig, take it off sometimes. It is good to let your scalp have some air.

# Eyebrows, eyelashes and other body hair

Losing your eyebrows and eyelashes can change your appearance. This can be upsetting. We have some practical ways to help deal with this and other hair loss.

## Eyebrows

Some people lose their eyebrows or find they become thinner. You can use an eyebrow pencil to redraw them. Staff on beauty counters can show you how to redraw your eyebrows, even if you do not usually wear make-up. You can see if there is a Boots Macmillan Beauty Adviser at your local Boots store who can help. Visit [boots.com/macmillan/feelmorelikeyou](https://www.boots.com/macmillan/feelmorelikeyou)

Use an eyebrow pencil that is slightly lighter than your natural hair colour. Follow the natural eyebrow arch and draw in short, feathery strokes. Make the brow thicker on the inner end of the eyebrow, nearest to the nose, and thinner at the outer edge.

Another natural-looking way to redraw the eyebrows is by using an eye shadow powder and applying it with a make-up brush. We have more information about redrawing eyebrows using an eyebrow pencil in our booklet **Feel more like you** (page 94).

You can also use false eyebrows, which are stuck on with special glue. You can find other eyebrow make-up products and kits to create eyebrows too.

Some people prefer to wear thick-rimmed glasses as these can help to hide missing eyebrows.

Some people get tattoos to create permanent new eyebrows. This can be expensive, but can be done by some cosmetic salons, medical tattoo specialists and tattooing shops. It should only be carried out by registered tattooists with an up-to-date health and safety certificate. Before getting a tattoo, talk to your cancer doctor or specialist nurse.

**“ One thing I didn’t like was getting up in the middle of the night and seeing myself in the mirror. In the morning, I would always apply some eyebrows straight away. ”**

Adele, who had hair loss from chemotherapy

## Eyelashes

If your eyelashes fall out or get thinner, there are different things you can do.

A soft eyeliner and smudger can help define your eyes and create the illusion of eyelashes.

Or you can use false eyelashes. These are available from many beauty departments. False eyelashes are generally safe unless you are having treatment to the eye area. However, the glue may irritate your skin. Check with your healthcare team first.

You may prefer to wear glasses, as this can help hide the effect of thinner lashes.

If losing your eyelashes makes your eyes sore, try using lubricant eyedrops. Ask your healthcare team or a pharmacist for advice.

We have more information about managing thinner eyelashes in our booklet **Feel more like you** (page 94).

## Moustache or beard

Facial hair can be an important part of your identity, culture or religion. Losing a moustache or a beard can be very difficult to deal with. Some online companies, make-up shops or theatrical shops sell moustaches or beards. Some of these can be tailored specially, but this can be very expensive.

## Pubic hair

Some people lose their pubic hair. This can be upsetting, but is usually only temporary. You may worry about how you look. If you have a partner, you may be concerned about what they think and how losing your hair might affect your sex life. Try to talk with your partner about how you feel. Being open with each other can help you find ways to manage your concerns.

## Nasal hair

If you lose the hair from inside your nose, you may be more likely to have a runny nose. Although this can be irritating, it is only temporary and will stop when the hairs grow back. Try to take plenty of tissues with you when you go out.

We have more information about coping with changes in your appearance in our booklet **Body image and cancer** (page 94).

**“ I went to an event that gave me lots of make-up tips, which meant I could draw on features. I actually felt a bit more normal. ”**

Penny, who had hair loss from chemotherapy





# Options if you have hair loss

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# Options for people with hair loss

There are different ways to cope with hair loss. These include wearing wigs, hats, scarves and bandanas. Some people prefer to go bald and rarely wear any kind of head covering. It is important to do what feels right for you.

Different hospitals offer different support when you are losing your hair. Your specialist nurse will know what support is available at the hospital and in your area. You can also ask a hairdresser or barber for advice.

Some hospitals have staff who can show you how to wear different types of headwear. Some hospitals run hair and beauty programmes for people with cancer.

If you choose to wear a wig or other headwear, you may want to wear something underneath to give a bit of lift and volume. You can buy caps online that are designed to do this.

Cancer Hair Care has more information about different options for coping with hair loss (page 100).

**“ Headscarves allowed me to be creative and play with different looks. I had fun doing this. They also helped me to cope, especially because I got compliments. ”**

Lurline



## Wigs

Many people choose to wear a wig. You might choose a wig in a similar style to your usual hairstyle. Or you might try out different styles. If you have only lost some of your hair, a half or three-quarter wig may be suitable for you. These cover a smaller area of your head and blend in with your natural hair. We have more information about wigs on pages 70 to 81.

## Hats

There are lots of hats and other types of headwear to choose from. Hats come in many different shapes, styles and colours, and will help keep your head warm and covered. Wearing a wide-brimmed hat is also a great way of protecting your head and scalp from the sun. You can find hats in department stores, specialist hat shops and online.

## Scarves and bandanas

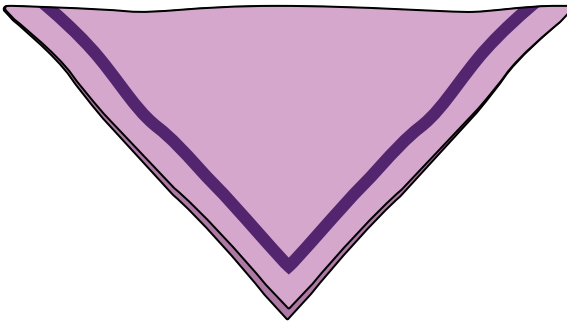
Scarves are another option. They are available in different colours and materials. Scarves are light and easy to wear. The best fabrics are cotton, lightweight wool, or blends. Slippery fabrics such as satin may slide off the head easily, but tying them over a hat such as a beanie can help hold them in place.

## How to tie a headscarf

For a basic style, you will need a scarf at least 75 by 75cm (29.5 by 29.5in) in size. For more elaborate styles, it needs to be 100 by 100cm (39 by 39in).

Follow these steps to tie a basic headwrap.

1. Lay a square scarf flat, with the reverse side facing upwards. Fold the scarf diagonally into a triangle.



2. Put the scarf on your head with the folded edge about 2.5cm (1in) below your natural hairline, with the triangle point at the back.



3. Tie the ends into a double knot behind your head and over the triangle point. The flap should be underneath the knot.  
If you are doing more than the basic headwrap, you may only need a single knot.



4. Gently pull the triangle point downwards, so the scarf fits closely to your head.



For different styles, you can try the following:

- Leave the ends of the scarf hanging loose, particularly if it is sunny or you are going to wear a hat on top.
- Tie the ends of the scarf in a bow instead of a knot. Or pull all 3 ends into an elasticated ponytail band to make a bow. This can also look nice under a hat.
- Twist the 3 ends together to look like a rope and wrap them tightly around the knot like a bun. Secure the loose ends by tucking them through the centre of the bun.
- For a different look, pull all 3 ends together and tuck them securely over and under the knot.
- Twist each of the long ends separately. Bring them forward and tie them at the front of your head. Continue twisting and tucking the ends in around your head. At the back, twist the triangle end and tuck it in. You can vary this by twisting in coloured cord, beads or a contrasting scarf to match what you are wearing. You may find it helps to twist 1 end at a time. Secure each end with a hair grip, paperclip or elastic band while you twist the other one.

We have a video tutorial of different headwear options on our website. Visit [macmillan.org.uk/hair-loss-headwear](https://www.macmillan.org.uk/hair-loss-headwear)

You can also find lots of different ways of tying a headscarf online.



## How to tie a bandana

For a simple bandana, you will need a bandana at least 56 by 56cm (22 by 22in). Some people prefer a larger size.

1. Lay your bandana flat, with the reverse side facing upwards. Fold the scarf diagonally into a triangle.
2. Put the bandana on your head with the folded edge about 2.5cm (1in) above your normal brow line and the sides of the bandana above your ears. The triangle point will be at the back.
3. Tie the ends of the bandana behind your head twice so it does not come undone.
4. Tuck the triangle point under the knot so it does not stick out.



## Other headwear

Some companies design headwear specially for people who lose their hair due to cancer treatment. Any headwear should cover the hairline and be comfortable to wear. You can find specialist headwear stores online. You could ask your chemotherapy nurse about local suppliers.

### Turbans

Turbans can be made of cotton, velvet, silk, bamboo or towelling. They are comfortable to wear, especially in hot weather. Some people find it comfortable to sleep in a turban. They are available from:

- some pharmacies
- department stores
- hair loss suppliers
- specialist wig shops
- the internet.

### Headwraps

African and Caribbean headwraps may be made of a thicker cotton fabric than scarves and bandanas. You can buy these from specialist shops and online. You can also find instructions for tying them in different ways online.

## Make your own head covering

You can also make head coverings yourself. This might be using fabric, or from clothing such as a t-shirt. There are videos online telling you how to do this.

## Hair accessories and replacements

Some wig suppliers sell fringes on a Velcro® band. Some suppliers also make turbans and scarves with optional fringes, or headbands with hair attached. You can also order hats, headbands or bandanas with attached hair from specialist suppliers.

Hairpieces and clip-in hair can be used to thicken thin hair. They can also cover small areas of hair loss, for example from radiotherapy (pages 12 to 14). They are only suitable if you have some hair of a suitable length. You can attach them using glues, clips or double-sided tape. Remember to remove any hairpieces and clips before sleeping to avoid damage to your natural hair.

Extensions, weaves and any plaiting or bonding systems will put extra tension on your remaining hair. If you wish to use these, it is important to make sure your hair is in good enough condition. Avoid putting tension on your hair if it is fragile. A hairdresser or barber can advise you about this.

## Change in hairstyle

If you have only lost some of your hair, you may find that a change in hairstyle helps hide any hair thinning. There are hairdressers and barbers who can give you advice about a change of style that is suitable for you. The charity My New Hair has details of trained hairdressers (page 101).

# Teenagers and young adults

If you are a teenager or young adult, changes in how you look can be very upsetting. There are lots of natural-looking wigs and other ways to cover hair loss. The Little Princess Trust provides free real-hair wigs to young people up to age 24 who have hair loss as a result of cancer treatment (page 101).

You can also get support from Teenage Cancer Trust (page 103) and Cancer Hair Care (page 100).

# Taking attention away from hair loss

There are things you can do to help take people's attention away from your hair loss:

- Wear brightly coloured dresses, shirts, sweaters, tops, ties or neck scarves.
- Try wearing make-up around your eyes, cheekbones or lips to direct attention to your face.
- Wear glasses. This can be helpful if you have lost your eyebrows or eyelashes.
- Wear jewellery. Earrings can look good with any type of head covering. And necklaces can bring attention to your neck.

Some hospitals and support groups run programmes such as Look Good Feel Better (page 100). These give expert advice on skincare, styling and managing some of the physical and emotional side effects of cancer treatment. Your nurse can tell you if there is a programme like this in your hospital or at a nearby support group.

At first, you may not feel confident going out and seeing people. But hopefully, as you spend more time with others, your confidence will grow. We have more information about body image in our booklet **Body image and cancer** (page 94).



# Wigs

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# Wigs for people with hair loss

Many people choose to wear a wig or hairpiece. There are many different styles and colours to choose from. Wigs can be natural-looking and comfortable to wear.

Wearing a wig can help you look and feel more like yourself. This can make you feel more confident and more in control of how you look.

In Wales, Scotland and Northern Ireland, you can get a wig free on the NHS. Some people can get a wig free on the NHS in England, but others may need to pay (pages 77 to 78). Talk to your specialist nurse about what you may be entitled to. There may be a limited choice of wigs available on the NHS.

You may be able to have more than 1 wig on the NHS. However, some hospitals set limits on the number of wigs a person can have.

Human hair wigs cannot be prescribed on the NHS, unless:

- you are allergic to synthetic wigs
- you have a skin condition that may be made worse by a synthetic wig.

## Types of wig

Wigs can be synthetic or made of human hair. All wigs come with instructions on how to care for them. Following these makes sure your wig will look good and last as long as possible.



## Synthetic wigs

The way synthetic wigs are made has improved in recent years. They can now look very natural.

Synthetic wigs are cheaper than human hair wigs. They usually cost between £50 and several hundred pounds.

Synthetic wigs are light and easy to look after. The style is heat-sealed into the hair. This means they can be hand-washed with cold or tepid water and shampoo, and left to dry overnight. They will then be ready to wear the next day. They can be combed or brushed through gently.

They usually last 4 to 8 months.

## Human hair wigs

A human hair wig may be made of hair from a number of people. This means it may be made up of different hair types, which are often bleached and then dyed.

Human hair wigs can cost from a few hundred to a few thousand pounds. They are not usually available on the NHS.

A human hair wig may need regular cleaning and styling by a professional, which can be expensive. It can help to have 2 wigs so that you can wear 1 while the other is being cleaned. Some human hair wigs can be shampooed and styled at home on a specially-designed wig block. Your wig supplier can advise you about this.

If you are having a human hair wig made for you, you may need to go for 2 or 3 fittings. It can take a few months to complete.

## Blended hair wigs

You can get wigs which have been made from a mixture of human hair and synthetic hair. They may need special care as the synthetic hairs may stretch and frizz when using a hairdryer or hair straighteners. Ask your wig supplier for more information.

## Using your own hair

Some people wonder if they can have their own hair cut off and made into a wig. However, this is usually only possible if your natural hair is long and in good condition. Even then, you may not have enough hair to make a wig. Making a human hair wig is a specialised technique, so it is expensive (around £2,500 or more). It will usually take at least 10 weeks to make.

**“ A relative of mine bought some wigs for me and they were fantastic. People could hardly tell it was a wig and thought it could be a weave. ”**

Diane, who had hair loss from chemotherapy

# Choosing a wig

Choosing a wig before your hair falls out means you can match the style and colour to your own hair. It also means you can get used to wearing a wig before you really need it. You will also be prepared in case your hair falls out sooner than expected.

You may want to try a different colour or style.

Staff at the hospital will advise you on how to get a wig. The process is different in different hospitals. Some may have a wig specialist who visits the hospital. Others will have a wig supplier that you can visit. There are wig suppliers that work with the NHS.

There is no pressure on you to choose a wig straight away. You can wait until you feel ready.

## Short hair wigs

There is less choice in short hair wigs. This is because it is difficult to make a short hair wig look natural around the hairline. Slightly longer hairstyles can work better.

## Wigs for people who are Black or from a minority ethnic group

Most NHS wig suppliers should have styles for people from any ethnic group. There are companies that work with the NHS to do this. But you may need to contact a specialist wig supplier or look online. Your specialist nurse can give you more information.

Cancer Hair Care has more information (page 100). You can also contact Cancer Black Care for support and advice (page 101).

## Matching your current style

- Choose a wig which has the same volume of hair as you, or slightly less. This will make it less obvious that you are wearing a wig. Remember a wig can be cut and styled by a hairdresser or wig consultant.
- Choose your own colour or a shade lighter. Changing to a lighter colour is usually less noticeable.
- If your hair has not fallen out yet, the wig may feel quite tight. Try to get a wig that adjusts to any head size. As your hair falls out, you will need a smaller size.
- It can help to have a family member or friend with you to give an honest opinion on the wig.
- You could also ask your hairdresser to help you choose your wig or hairpiece. Some hairdressers are specially trained to supply, cut and style wigs. You can find salons in your area on the My New Hair website (page 101). Some wig providers may also be able to cut and style a wig when you have it fitted.

## Fitting your wig

Having your wig fitted can be emotional. Your wig supplier will understand your feelings and do their best to help you feel comfortable. Most wig fitters will have a private room where you can try on a wig. They will advise you on how to care for it and keep it in place.

We have a video on our website that has more information on choosing and styling a wig. Visit [macmillan.org.uk/wigs](https://www.macmillan.org.uk/wigs)

**“ I decided that if I was going out, I would wear something that really was obvious and bought a fluorescent yellow wig. I remember going out and strangers asking if they could try it on. People didn't think twice about the ridiculous wig I was wearing, and I could relax. ”**

Michelle, who had hair loss from chemotherapy



**“ I got a prescription for an NHS wig. However, there are not many suppliers for Black and Asian patients. But the supplier I went to customised my wig and had a lot of choice. ”**

Lurline

# Paying for a wig

Wigs can be expensive, but there are several ways to reduce the cost.

## NHS wigs

Synthetic wigs are free on prescription for people in Scotland, Wales and Northern Ireland. If you live in England, you may need to pay a surgical appliance prescription charge. There are special arrangements for patients who are registered with GPs in Wales but have treatment in England.

You can get a free NHS wig in England if:

- you are aged under 16
- you are aged under 19 and in full-time education
- you are a hospital inpatient
- your weekly income is below a certain level
- you claim certain benefits
- you have a valid NHS tax credit exemption certificate
- you are named on a valid Help with Health Costs (HC2) certificate.

If you are entitled to a free wig, you will need to tell the person who fits your wig. You will need to show proof that you qualify. This might include the letter showing which benefits you receive.

You can find out more about the rules for free wigs on the NHS website.

Visit [nhs.uk/nhs-services/help-with-health-costs/wigs-and-fabric-supports-on-the-nhs](https://www.nhs.uk/nhs-services/help-with-health-costs/wigs-and-fabric-supports-on-the-nhs)

## Help with wig costs

You can apply to get a free wig or help towards the cost of a wig by completing an HC1 form. Your income will be assessed. If you are entitled to help, you will be sent either:

- an HC2 full-help certificate
- an HC3 partial-help certificate.

For more information, visit [nhs.uk](https://www.nhs.uk) and search 'low income scheme'.

You may be able to apply for grants and benefits from other organisations or charities to help pay for a wig. For further information, contact the Macmillan Support Line.

You may want to consider buying a wig from a wig bank (page 81).

## Children and young people

The Little Princess Trust offers free human hair wigs to children and young people up to the age of 24 (page 101).

## Buying a wig or hairpiece privately

Some people choose to buy a wig privately. There are specialist wig suppliers, or you may be able to buy a wig in a department store or wig shop.

If your hair loss is caused by cancer treatment, you should not have to pay VAT on wigs or hairpieces. Not all wig suppliers offer this service, so check before you buy from them. The tax cannot be claimed back at a later date. You will need to fill in a VAT exemption form when you buy the wig. The wig provider can provide this.



# Wearing your wig

Your wig provider can give you tips and advice about wearing your wig and keeping it in place.

A well-fitting wig should stay in place on its own, but there are things that can give you extra confidence that your wig is secure:

- Use double-sided tape. Wig specialists have hypoallergenic tape that does not irritate the skin. Your skin may be very sensitive due to your cancer treatment. Check with your doctor or nurse which tape you can use and how best to remove it.
- If you have some of your own hair, you may be able to use clips to keep your wig or hairpiece in place.
- If you can, bend over and gently shake your head to check your wig or hairpiece is securely in place.
- You could wear a hat or scarf to help secure your wig if it is very windy. But wearing something over your wig a lot of the time will cause friction. This can lead to the wig not lasting as long as it should.
- If you need to remove any clothing, such as at a doctor's appointment or when clothes shopping, avoid pulling clothes over your head. Wear something that is easy to remove, such as a cardigan or shirt.
- When you first wear your wig, you may want to wear it at home or when you are with people you know well. This can help you feel more confident.

## Keeping cool

The following tips can help you to stay cool while wearing a wig:

- Choose a synthetic (man-made) wig. They are often lighter than human hair wigs.
- Wear a cotton wig liner on your scalp to absorb moisture. Try to wash this every day to protect your scalp from sweat.
- Use a wet cloth or an alcohol-free, fragrance-free spray to freshen your scalp throughout the day.
- Whenever possible, take the wig off to let air get to your scalp.
- Take your wig off at night and when you have a shower.

## Caring for your scalp and wig

Your wig provider can give you tips and advice about caring for the wig and your scalp.

The lining of the wig can irritate the scalp, so it can help to wear a thin, cotton wig liner underneath. These are usually available from wig suppliers. They can sometimes make a wig move around more, so you may need to experiment to find out what works best for you.

Your scalp may sweat more when you wear a wig, so you will need to wash the wig and liner as advised by the wig specialist. Both synthetic and human hair wigs need to be washed carefully, using slightly warm or cold water. You can also use special shampoos.

Remember not to expose your wig to a flame, or heat from an oven or hairdryer. Real hair will frizz and synthetic hair can melt.

The charity Cancer Hair Care has more information (page 100).

# If you no longer need your wig

Wig banks in different parts of the UK collect wigs that people no longer need. They may sell them at a discounted rate.

Some wig banks are charities that recycle wigs or provide other support to people affected by cancer and hair loss. Others are wig companies or support groups that offer a wig recycling service. You can find a wig bank online, or ask your wig provider.



# When your hair grows back

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# When will my hair grow back?

Some people find their hair starts to grow back while they are still having treatment. This does not mean that the treatment is not working.

Most people find their hair will start to grow back after their treatment is over. Your hair may grow back differently (pages 8 to 17). Your hair may need to get to a certain length before you can have it cut or apply any treatments.

**“ My hair grows so slowly now that I've had to keep it short. Luckily, I think it suits me. It certainly saves me money at the hairdressers! ”**

Penny, who had hair loss from chemotherapy

# As your hair grows back

There are differing views about whether gentle scalp massage may help hair growth. If this is something you want to try, talk to a hairdresser or barber. Some people find gentle head massage relaxing. Check with your healthcare team to make sure it is safe for you to have a head massage.

You may feel that you cannot wait for your hair to be as it was before treatment. If your hair was long, it will take many months for it to get to that length again. But you may find that a shorter style suits you, or that you want a change.

For some people it can take years for their hair to grow back to the length it was before. Afro hair tends to grow more slowly and can be fragile.

A hairdresser or barber can help you find a style that suits you. Some have had training in supporting people who have been through cancer treatment. You can find out more and search for salons near you at My New Hair (page 101).

When you stop wearing a wig is up to you. You may want to keep wearing a wig until your hair can be styled. Or you may want to stop wearing one as soon as your hair shows. Wearing a wig will not affect your hair growth. But you might find it more comfortable to wear a wig cap.

**“Now that my hair has grown back, there are so many positives. I love short hair and it's so easy to manage. ”**

Lurline



# Hair styling and hair dyes

As your hair grows back, you should use shampoo and products that suit your hair or scalp condition. Most products can be used every day without any problems. If your scalp becomes irritated or the condition of your hair changes, ask a hairdresser or barber for advice.

## Colouring, perming and relaxing

Your hair will usually need to be about 2.5cm (1in) long before you can use any chemicals on it. For treatments such as a perm or relaxing treatment, it may need to be longer. Your scalp and hair will also need to be in good condition.

Before you have any chemical treatment such as colouring, perming or chemical relaxing, it is a good idea to ask a hairdresser or barber for advice. It is important to carry out strand and skin sensitivity tests to make sure products will not cause any damage or an allergic reaction. Tell your hairdresser or barber that you have had cancer treatment. This may affect how the treatment works.

You should not use any chemicals on your hair without talking to a professional if your:

- scalp is scaly, sore or irritated
- hair is drier than usual
- hair is breaking or not growing normally.

## Colouring your own hair

If you want to colour your hair yourself, ask a hairdresser or barber for advice. They may suggest vegetable or plant-based dyes. These are gentler on your hair and scalp than dyes containing strong chemicals.

It is important to make sure the colour will not damage your hair or cause an allergic reaction before applying it to your hair. You should do this even if you have used the same product before. Apply a small amount of colour to a hidden area of hair and scalp, such as behind the ear.

If you do not have any problems within 48 hours, it is safe to apply it to the rest of your hair.

Natural products may still cause an allergic reaction. This includes henna. Unless the henna is bright red, it will have other forms of tint added to it. If you do use a henna product after chemotherapy, the colour the henna produces may be more intense. It is important to do a skin sensitivity test, even with natural products.

If you are colouring your hair at home, always follow the instructions. If you want a permanent colour with highlights and lowlights, it is best for a trained hairdresser or barber to do this.

Cancer Hair Care has more information about colouring your hair (page 100).

## Hair extensions

Hair extensions can make your hair look thicker and longer. They can be clipped on to your own hair. However, they can cause damage, even to healthy hair, so are not suitable for weak or thin hair. It is important to talk to a hairdresser or barber who specialises in hair extensions before you go ahead. Hair extensions are not available on the NHS.

## Looking after your hair

Your hair may be dry or break easily even after cancer treatment has finished. Read our tips for looking after your hair. Cancer Hair Care has more information about looking after your hair when it is growing back after treatment (page 100).



## If your hair does not grow back

Rarely, hair does not grow back after treatment. For some people, it comes back very thin and wispy. Your hair may not grow back if you have had radiotherapy. Sometimes, the chemotherapy drug docetaxel causes permanent hair loss. This can be very distressing. If you are concerned that your hair is not growing back, talk to your healthcare team.

Alopecia UK provides information and support to people with hair loss (page 100).

### Hair transplants

If you have permanent hair loss in one area of your head, it may be possible to have a hair transplant. However, hair transplants are specialised treatments. They are not available on the NHS. If you are considering a hair transplant, contact the Institute of Trichologists for a list of qualified surgeons. This option is not suitable for everyone. Visit [trichologists.org.uk](https://www.trichologists.org.uk) for more information.





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# About our information

We provide expert, up-to-date information about cancer. And all our information is free for everyone.

## Order what you need

You may want to order more booklets or leaflets like this one.

Visit [orders.macmillan.org.uk](https://orders.macmillan.org.uk) or call us on **0808 808 00 00**.

We have booklets about different cancer types, treatments and side effects. We also have information about work, financial issues, diet, life after cancer treatment and information for carers, family and friends.

## Online information

All our information is also available online at [macmillan.org.uk/information-and-support](https://macmillan.org.uk/information-and-support) You can also find videos featuring stories from people affected by cancer, and information from health and social care professionals.

## Other formats

We also provide information in different languages and formats, including:

- audiobooks
- Braille
- British Sign Language
- easy read booklets
- interactive PDFs
- large print
- translations.

Find out more at [macmillan.org.uk/otherformats](https://macmillan.org.uk/otherformats)

If you would like us to produce information in a different format for you, email us at [informationproductionteam@macmillan.org.uk](mailto:informationproductionteam@macmillan.org.uk) or call us on **0808 808 00 00**.



## The language we use

We want everyone affected by cancer to feel our information is written for them.

We try to make sure our information is as clear as possible. We use plain English, avoid jargon, explain any medical words, use illustrations to explain text, and make sure important points are highlighted clearly.

We use gender-inclusive language and talk to our readers as 'you' so that everyone feels included. Where clinically necessary we use the terms 'men' and 'women' or 'male' and 'female'. For example, we do so when talking about parts of the body or mentioning statistics or research about who is affected. Our aims are for our information to be as clear and relevant as possible for everyone.

You can read more about how we produce our information at **[macmillan.org.uk/ourinfo](https://www.macmillan.org.uk/ourinfo)**

# Other ways we can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we are here to support you.

## Talk to us

If you or someone you know is affected by cancer, talking about how you feel and sharing your concerns can really help.

## Macmillan Support Line

Our support line is made up of specialist teams who can help you with:

- emotional and practical support if you or someone you know has been diagnosed with cancer
- clinical information from our nurses about things like diagnosis and treatments from our nurse specialists
- welfare rights advice, for information about benefits and general money worries.

To contact any of our teams, call the Macmillan Support Line for free on **0808 808 00 00**. Or visit [macmillan.org.uk/support-line](https://www.macmillan.org.uk/support-line) to chat online and see the options and opening times.

Our trained cancer information advisers can listen and signpost you to further support. Call us on **0808 808 00 00**. We are open 7 days a week, 8am to 8pm.

You can also email us, or use the Macmillan Chat Service via our website. You can use the chat service to ask our advisers about anything that is worrying you. Tell them what you would like to talk about so they can direct your chat to the right person. Click on the 'Chat to us' button, which appears on pages across the website. Or go to **macmillan.org.uk/talktous**

If you would like to talk to someone in a language other than English, we also offer an interpreter service for our Macmillan Support Line. Call **0808 808 00 00** and say, in English, the language you want to use. Or send us a web chat message saying you would like an interpreter. Let us know the language you need and we'll arrange for an interpreter to contact you.

## **Macmillan Information and Support Centres**

Our Information and Support Centres are based in hospitals, libraries and mobile centres. Visit one to get the information you need and speak with someone face to face. If you would like a private chat, most centres have a room where you can speak with someone confidentially.

Find your nearest centre at **macmillan.org.uk/informationcentres** or call us on **0808 808 00 00**.

## Help with money worries

Having cancer can bring extra costs such as hospital parking, travel fares and higher heating bills. If you have been affected in this way, we can help. Please note the opening times may vary by service.

### Financial advice

Our expert money advisers on the Macmillan Support Line can help you deal with money worries and recommend other useful organisations that can help.

### Help accessing benefits

You can speak to our money advisers for more information. Call us free on **0808 808 00 00**. Visit **[macmillan.org.uk/financialsupport](https://www.macmillan.org.uk/financialsupport)** for more information about benefits.

### Grants

You may be able to get some financial help from other charities, for example one-off grants. For further information, contact the Macmillan Support Line.

## Help with work and cancer

Whether you are an employee, a carer, an employer or are self-employed, we can provide support and information to help you manage cancer at work. Visit **[macmillan.org.uk/work](https://www.macmillan.org.uk/work)**

## Talk to others

No one knows more about the impact cancer can have on your life than those who have been through it themselves. That is why we help bring people together in their communities and online.

### Support groups

Whether you are someone living with cancer or a carer, family member or friend, we can help you find support in your local area, so you can speak face to face with people who understand. Find out about support groups in your area by calling us or by visiting **[macmillan.org.uk/selfhelpandsupport](https://macmillan.org.uk/selfhelpandsupport)**

### Online Community

Thousands of people use our Online Community to make friends, blog about their experiences and join groups to meet other people going through the same things. You can access it any time of day or night. Share your experiences, ask questions, or just read through people's posts at **[macmillan.org.uk/community](https://macmillan.org.uk/community)**

You can also use our Ask an Expert service on the Online Community. You can ask a money adviser, cancer information nurse or an information and support adviser any questions you have.

## Macmillan healthcare professionals

Our nurses, doctors and other health and social care professionals give expert care and support to individuals and their families. Call us or ask your GP, consultant, district nurse or hospital ward sister if there are any Macmillan professionals near you.

# Other useful organisations

There are lots of other organisations that can give you information or support. Details correct at time of printing.

## Support for people with hair loss

### Alopecia UK

Tel **0800 101 7025**

**[www.alopecia.org.uk](http://www.alopecia.org.uk)**

Provides information, advice and support to people affected by alopecia.

### Cancer Hair Care

Tel **0143 831 1322**

**[www.cancerhaircare.co.uk](http://www.cancerhaircare.co.uk)**

Offers free, expert advice and support on all aspects of hair loss, hair loss prevention (scalp cooling) and hair care, before, during and after cancer treatment.

### Look Good Feel Better

Tel **0137 274 7500**

**[www.lookgoodfeelbetter.co.uk](http://www.lookgoodfeelbetter.co.uk)**

Runs free workshops both virtually and at cancer care centres and hospitals across the UK. These aim to help people with cancer manage the physical and emotional side effects of cancer treatment. Provides practical advice about changes to skin, eyebrows, eyelashes, hair, nails and body confidence.

## Specialist hair and wig services

### Little Princess Trust

Tel **0143 276 0060**

**[www.littleprincesses.org.uk](http://www.littleprincesses.org.uk)**

Provides real hair wigs, free of charge, to children and young people who have lost their own hair through cancer treatment and other conditions.

### My New Hair – Trevor Sorbie

**[www.mynewhair.org](http://www.mynewhair.org)**

The website has a list of hairdressers (salons) and professionals who provide a wig styling service for people with cancer. Contact the salons directly to find out more about services and costs.

## General cancer support organisations

### Cancer Black Care

Tel **0208 961 4151**

**[www.cancerblackcare.org.uk](http://www.cancerblackcare.org.uk)**

Offers UK-wide information and support for people from Black and minority ethnic communities who have cancer. Also supports their friends, carers and families.

### Cancer Focus Northern Ireland

Helpline **0800 783 3339**

**[www.cancerfocusni.org](http://www.cancerfocusni.org)**

Offers a variety of services to people affected by cancer in Northern Ireland.

### **Cancer Research UK**

Helpline **0808 800 4040**

**[www.cancerresearchuk.org](http://www.cancerresearchuk.org)**

A UK-wide organisation that has patient information on all types of cancer. Also has a clinical trials database.

### **Cancer Support Scotland**

Tel **0800 652 4531**

**[www.cancersupportscotland.org](http://www.cancersupportscotland.org)**

Runs cancer support groups throughout Scotland. Also offers free complementary therapies and counselling to anyone affected by cancer.

### **Macmillan Cancer Voices**

**[www.macmillan.org.uk/cancervoices](http://www.macmillan.org.uk/cancervoices)**

A UK-wide network that enables people who have or have had cancer, and those close to them such as family and carers, to speak out about their experience of cancer.

### **Maggie's**

Tel **0300 123 1801**

**[www.maggies.org](http://www.maggies.org)**

Has a network of centres in many locations throughout the UK. Provides free information about cancer and financial benefits. Also offers emotional and social support to people with cancer, their family, and friends.



## Teenage Cancer Trust

Tel **0207 612 0370**

**[www.teenagecancertrust.org](http://www.teenagecancertrust.org)**

A UK-wide charity devoted to improving the lives of teenagers and young adults with cancer. Runs a support network for young people with cancer, their friends and families.

## Counselling

### British Association for Counselling and Psychotherapy (BACP)

Tel **0145 588 3300**

**[www.bacp.co.uk](http://www.bacp.co.uk)**

Promotes awareness of counselling and signposts people to appropriate services across the UK. You can also search for a qualified counsellor on the 'How to find a therapist' page.

## LGBT-specific support

### LGBT Foundation

Tel **0345 330 3030**

**[www.lgbt.foundation](http://www.lgbt.foundation)**

Provides a range of services to the LGBT community, including a helpline, email advice and counselling. The website has information on various topics including sexual health, relationships, mental health, community groups and events.

### OUTpatients (formerly called Live Through This)

**[www.outpatients.org.uk](http://www.outpatients.org.uk)**

A safe space for anybody who identifies as part of the queer spectrum and has had an experience with any kind of cancer at any stage. Also produces resources about LGBT cancer experiences. OUTpatients runs a peer support group with Maggie's Barts.



## Disclaimer

We make every effort to ensure that the information we provide is accurate and up to date but it should not be relied upon as a substitute for specialist professional advice tailored to your situation. So far as is permitted by law, Macmillan does not accept liability in relation to the use of any information contained in this publication, or third-party information or websites included or referred to in it. Some photos are of models.

## Thanks

This booklet has been written, revised and edited by Macmillan Cancer Support's Cancer Information Development team. It has been approved by our Chief Medical Editor, Prof Tim Iveson, Consultant Medical Oncologist.

With thanks to: Lisa Castellaro, Clinical Nurse Specialist; Jasmin Julia Gupta, Cancer Hair Care Founder/Director of Information and NHS Clinical Services; Jenny King, Clinical Nurse Specialist; Glenn Lyons, Consultant Trichologist; and Claire Paxman, Paxman Scalp Cooling Brand Ambassador and Director of Global Training.

Thanks also to the other professionals and people affected by cancer who reviewed this edition, and those who shared their stories.

We welcome feedback on our information. If you have any, please contact **[informationproductionteam@macmillan.org.uk](mailto:informationproductionteam@macmillan.org.uk)**

## Sources

Below is a sample of the sources used in our hair loss information. If you would like more information about the sources we use, please contact us at **informationproductionteam@macmillan.org.uk**

Cancer Hair Care website: [www.cancerhaircare.co.uk](http://www.cancerhaircare.co.uk) [accessed June 2022].

Dilawari A, Gallagher C, Alintah P, et al. Does scalp cooling have the same efficacy in Black patients receiving chemotherapy for breast cancer? *Oncologist*, 2021; Volume 26(4):292-e548. Available from [www.doi:10.1002/onco.13690](https://doi.org/10.1002/onco.13690) [accessed June 2022].

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Sung-chan Gwark, Sei Hyun Ahn, Woo Chul Noh, et al. Similar negative emotional impact on hair loss in neoadjuvant endocrine therapy compared to neoadjuvant chemotherapy in young women with breast cancer from patient reported outcomes. *Journal of Clinical Oncology*, 2020; 38:15 suppl, e19242-e19242. Available from [https://ascopubs.org/doi/abs/10.1200/JCO.2020.38.15\\_suppl.e19242](https://ascopubs.org/doi/abs/10.1200/JCO.2020.38.15_suppl.e19242) [accessed June 2022].

## Can you do something to help?

We hope this booklet has been useful to you. It is just one of our many publications that are available free to anyone affected by cancer. They are produced by our cancer information specialists who, along with our nurses, benefits advisers, campaigners and volunteers, are part of the Macmillan team. When people are facing the toughest fight of their lives, we are here to support them every step of the way.

We want to make sure no one has to go through cancer alone, so we need more people to help us. When the time is right for you, here are some ways in which you can become a part of our team.

### 5 ways you can help someone with cancer

#### 1. Share your cancer experience

Support people living with cancer by telling your story, online, in the media or face to face.

#### 2. Campaign for change

We need your help to make sure everyone gets the right support. Take an action, big or small, for better cancer care.

#### 3. Help someone in your community

A lift to an appointment. Help with the shopping. Or just a cup of tea and a chat. Could you lend a hand?

#### 4. Raise money

Whatever you like doing you can raise money to help. Take part in one of our events or create your own.

#### 5. Give money

Big or small, every penny helps. To make a one-off donation see over.

## Please fill in your personal details

Mr/Mrs/Miss/Other

Name

Surname

Address

Postcode

Phone

Email

Please accept my gift of £  
(Please delete as appropriate)

I enclose a cheque / postal order /  
Charity Voucher made payable to  
Macmillan Cancer Support

OR debit my:

Visa / MasterCard / CAF Charity  
Card / Switch / Maestro

Card number

Valid from

Expiry date

Issue no

Security number

Signature

Date / /

## Do not let the taxman keep your money

Do you pay tax? If so, your gift will be worth 25% more to us – at no extra cost to you. All you have to do is tick the box below, and the tax office will give 25p for every pound you give.

I am a UK tax payer and I would like Macmillan Cancer Support to treat all donations I make or have made to Macmillan Cancer Support in the last 4 years as Gift Aid donations, until I notify you otherwise.

I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. I understand Macmillan Cancer Support will reclaim 25p of tax on every £1 that I give.

Macmillan Cancer Support and our trading companies would like to hold your details in order to contact you about our fundraising, campaigning and services for people affected by cancer. If you would prefer us not to use your details in this way please tick this box.

In order to carry out our work we may need to pass your details to agents or partners who act on our behalf.

If you would rather donate online go to [macmillan.org.uk/donate](https://macmillan.org.uk/donate)



Please cut out this form and return it in an envelope (no stamp required) to: Supporter donations, Freepost RUCY-XGCA-XTHU, Macmillan Cancer Support, PO Box 791, York House, York YO1 0NJ

## This booklet is about hair loss. It is for anyone whose hair may be affected by cancer treatment, or who is coping with changes to their hair.

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The booklet explains how cancer treatment may affect your hair and how to prepare for hair loss. It also talks about ways to manage hair loss and what to expect after treatment is over.

At Macmillan we know cancer can disrupt your whole life. We'll do whatever it takes to help everyone living with cancer in the UK get the support they need right now, and transform cancer care for the future.

For information, support or just someone to talk to, call **0808 808 00 00** or visit **macmillan.org.uk**

Would you prefer to speak to us in another language? Interpreters are available. Please tell us in English the language you would like to use. Are you deaf or hard of hearing? Call us using Relay UK on **18001 0808 808 00 00**, or use the Relay UK app.

Need information in different languages or formats? We produce information in audio, interactive PDFs, easy read, Braille, large print and translations. To order these, visit **macmillan.org.uk/otherformats** or call our support line.

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