

The Inspiration for a Bold Initiative



Eric J. Waldman

A leadership gift made by Eric Waldman, a Mount Sinai Health System Trustee, is the impetus for a futuristic new direction of our newly named Kimberly and Eric J. Waldman Department of Dermatology. Mr. Waldman made the gift in part to help ensure the Department's place as a global leader in the study of skin diseases. He and his wife Kimberly are particularly interested in supporting research and discovery that will be translated into patient care of the utmost quality. Their gift is expected to produce significant advances in melanoma and skin cancer research by funding an important collaboration between the Kimberly and Eric J. Waldman Department of Dermatology and the Icahn Institute for Genomics and Multiscale Biology at Mount Sinai. Through this multidisciplinary effort, Mount Sinai scientists are poised to focus on the use of DNA sequencing and computational analysis to predict an individual's risk of metastatic melanoma and to develop personalized therapy for the disease. This innovative approach has the potential to revolutionize the way we understand, diagnose, and treat the devastating and increasingly prevalent problem of malignant melanoma.

Cosmetic Procedures for Diverse Skin Types

By Andrew F. Alexis, MD, MPH

The desire for an even-toned complexion and healthy skin is universal. Thanks to modern advances in aesthetic dermatology, we have a broad range of options to improve the appearance of the skin by addressing issues related to skin aging, uneven pigmentation, acne scars, and other cosmetic concerns.

There is no "one-size-fits-all" remedy when it comes to cosmetic procedures. A good dermatologist will select the most appropriate chemical peel, laser, or energy device for a given patient's problem, based on the specific condition being treated and the patient's skin type or complexion.

It turns out that skin of color, meaning skin tone that is medium tan to dark



Andrew F. Alexis, MD, MPH

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www.MountSinaiDermatology.com



Male and Female Pattern Hair Loss



By David S. Orentreich, MD

Androgenetic alopecia (AGA) is the most common cause of hair loss in both men and women. It occurs in all ethnic groups and increases in incidence and severity with age. Although it can first appear in the late teens and early 20s, for many individuals it manifests considerably later. Left untreated, AGA usually progresses intermittently, in starts and stops, over an individual's lifetime.

The name, androgenetic alopecia, relates to the two most important contributing causes: male hormones (androgens) and genetics. The hair follicles affected undergo progressive miniaturization, transforming normal (terminal) hairs in a specific pattern on the scalp (see figures). The two most common patterns of loss are the localized "male pattern," typically seen in men, and the "diffuse pattern," typically seen in women, but a small percentage of men exhibit the diffuse pattern and a very small percentage of women exhibit the male pattern.

Diagnosis can almost always be accomplished by physical examination

“Hair transplantation for the treatment of AGA was invented by my father, Dr. Norman Orentreich, and first published in 1959.”

of the hair, scalp, and other hair-bearing areas. Additional corroborating evidence may be obtained from a patient's medical history. A scalp biopsy may be helpful in rare instances when the pattern of loss mimics other diseases affecting the scalp. In women, blood testing may be helpful to discover or rule out contributing hormonal disorders of the thyroid, adrenal glands, or ovaries.

Hair loss often affects self-esteem and psychological well-being. For many patients, there is a significant impairment in quality of life and a strong desire to reverse their condition, although the commitment to undertake and adhere to a long-term therapeutic regimen is often lacking. This may be due to the limited efficacy of available treatments,

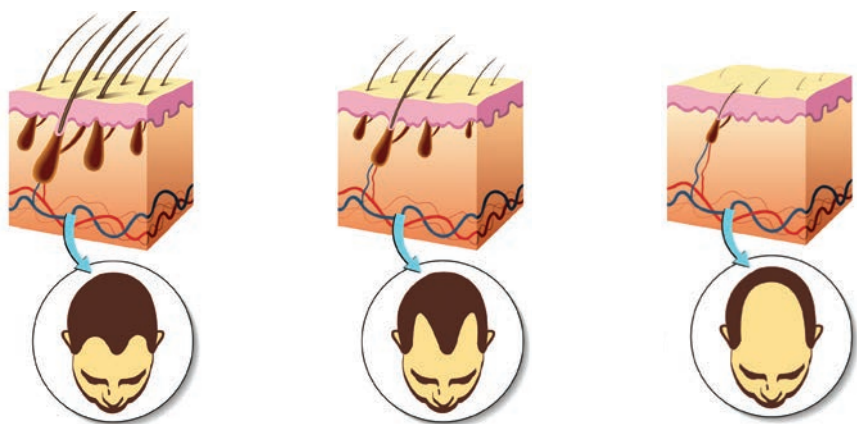
poor tolerance of the medications, or inaccurate information about benefits and side effects.

For men, the best medical results are usually achieved with the use of oral finasteride. Topical minoxidil may be used in conjunction with finasteride therapy. Side effects are uncommon and reversible with discontinuation of therapy. Men who are trying to conceive may do so without stopping treatment. Hair loss in women may also be successfully treated with both oral and topical medications (see table on page 3).

Patients are encouraged to continue therapy for at least a year before judging the effects. Treatment is deemed efficacious if hair loss has not progressed, and, of course, if hair regrowth is observed. It is important to know that continuous treatment is needed in order to maintain the improvement and that stopping treatment will usually bring about hair loss within a few months.

When medical therapy fails to produce good results, hair transplant surgery might be a good solution. Hair

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Figures show how progressive miniaturization of hair follicles results in male pattern hair loss.

TREATMENTS FOR MALE AND FEMALE PATTERN HAIR LOSS

CATEGORY	MEDICINE OR PROCEDURE*	HOW IT'S USED FOR MEN	HOW IT'S USED FOR WOMEN DURING CHILDBEARING YEARS	HOW IT'S USED FOR POSTMENOPAUSAL WOMEN
Topical Drugs	Minoxidil solution, Regular Strength (2%)	Apply twice daily	Apply twice daily (use with contraception)	Apply twice daily
	Minoxidil solution, Extra Strength (5%)	Apply twice daily	Not FDA approved for women	Not FDA approved for women
	Prostaglandin analog solutions (Latanoprost, Bimatoprost)	Under investigation – not FDA approved for AGA; bimatoprost solution (0.03%) is FDA approved for eyelash growth.		
Oral Drugs	Finasteride, 1 mg pill	By mouth, once daily	Not FDA approved for women	Not FDA approved for women
	Finasteride, 5 mg pill	Not FDA approved for AGA; approved for Benign Prostatic Hypertrophy	Not FDA approved	Not FDA approved
	Spirololactone	Not used	25 to 200 mg by mouth daily (use with contraception).	25 to 200 mg by mouth daily
	Oral contraceptives	Not used	Take as directed	Not used
	Hormone Replacement Therapy	Not used	Not used	Take as directed
Surgical Procedures	Hair transplants	Skin plugs with viable hairs are taken from a donor site, usually the back of the scalp, and inserted into the hairline and crown areas		
	Scalp reduction	Skin surgery is performed to remove areas of baldness and bring together hair-bearing areas with stitches.		
	Low-level laser treatments	Not recommended due to a lack of evidence of efficacy.		

***DISCLAIMER:** This list includes certain products that are not FDA approved to treat androgenetic alopecia (male and female pattern hair loss). Individual results vary. Typically, continued use of topical and oral medicines is needed in order to maintain improvement.

Cosmetic Procedures in Diverse Skin Types

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brown, requires special care when it comes to cosmetic procedures, because of the risk of discoloration. Fortunately, many effective cosmetic procedures can be performed safely in all skin types with the use of appropriate precautions, optimal techniques, good aftercare, and sun protection. The Skin of Color Center at Mount Sinai Roosevelt Hospital is an internationally recognized leader in the treatment of diverse skin types. The aesthetic treatments we offer include chemical peels for uneven skin tone (see photos), fractional (Fraxe®) laser resurfacing for acne scars, laser hair removal, and removal of unwanted growths and moles.



A patient treated for hyperpigmentation before (left) and after a chemical peel (right).

Dr. Alexis is an Associate Professor of Dermatology at the Icahn School of Medicine at Mount Sinai; and Director, Skin of Color Center, Mount Sinai Roosevelt Hospital (<http://icahn.mssm.edu/aalexis>).

Androgenetic Alopecia Male and Female Pattern Hair Loss

(CONTINUED FROM PAGE 2)

transplantation for the treatment of AGA was invented by my father, Dr. Norman Orentreich, and first published in 1959. Although expense and inconvenience must be considered, the results of hair transplantation are usually permanent, and modern techniques help to produce a very natural appearance.

Dr. Orentreich is an Assistant Clinical Professor of Dermatology at the Icahn School of Medicine at Mount Sinai and a member of the Voluntary Attending staff (<http://icahn.mssm.edu/dorentreich>).

Skin Health

FROM THE KIMBERLY AND ERIC J. WALDMAN
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Dr. Vincent A. DeLeo Becomes Chairman Emeritus

by Sheryl Miller, MD

“A true Southern gentleman and a New York mensch” is a perfect description for Dr. Vincent A. DeLeo, Chairman of the Department of Dermatology at St. Luke’s-Roosevelt Hospital Center and Beth Israel Medical Center of the Mount Sinai Health System. An internationally respected authority on environmental dermatology, Dr. DeLeo conducted groundbreaking research in the areas of photobiology and dermatotoxicology with funding from the National Institutes of Health.

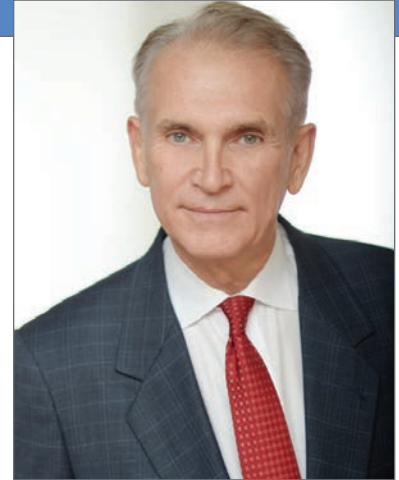
Dr. DeLeo’s expertise in photomedicine, contact dermatitis, and occupational dermatitis resulted in more than 250 publications and two books. He lectures throughout the world, currently serves as Editor-in-Chief of *Cutis* and Associate Editor of *Dermatitis*, and has been the recipient of many academic awards. He has held professional leadership positions that include membership in the Board of Directors of the American Academy of Dermatology (AAD), Chair of the AAD Nominating Committee, and President of the American Contact Dermatitis Society.

In 1998, Dr. DeLeo spearheaded the new Department of Dermatology and residency-training program at St Luke’s-Roosevelt Hospital Center, and in 2001, he became the Chair of the Department of Dermatology at Beth Israel Medical Center. He built one of country’s most impressive programs with ten residents and a large faculty. He co-founded

“His scholarly pursuits, teaching skills, kindness, and keen sense of humor have left an indelible impression on the entire dermatology community.”

the Skin of Color Center at St. Luke’s-Roosevelt and was instrumental in the creation of the Skin of Color Society.

Most importantly, in his own words, Dr. DeLeo’s greatest professional accomplishment has been his mentorship of scores of dermatology resident physicians and medical students. Over the years, he



Vincent A. DeLeo, MD

supervised the training of more than 125 board-certified dermatologists and served as an extraordinary role model to countless more. In sum, his scholarly pursuits, teaching skills, kindness, and keen sense of humor have left an indelible impression on the entire dermatology community.

According to Dr. Mark Lebwohl, “In a short period of time, Dr. DeLeo built an incredibly impressive program, one that has an outstanding national and international reputation.” Beginning in 2015, Dr. DeLeo will start his new role as Chairman Emeritus, in which he will help prepare the future leadership of the department for the challenges ahead.

Dr. Sheryl Miller is a Senior Faculty member of the Icahn School of Medicine at Mount Sinai and an attending at the Mount Sinai Beth Israel Hospital (<http://icahn.mssm.edu/smiller>).

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Skin Health

FALL 2014

New Warning from the Surgeon General: **PREVENT SKIN CANCER**

Recently the U.S. Acting Surgeon General Boris D. Lushniak, MD, MPH issued an urgent message entitled "Call to Action to Prevent Skin Cancer."

According to the Surgeon General's report, skin cancer affects more Americans than all other cancers combined. Five million Americans are treated for skin cancer every year, adding a burden of over 8 billion dollars to our nation's annual healthcare costs. Most alarming is a 200 percent increase over the past four decades in malignant melanoma, the most dangerous form of skin cancer and one of the most common types of cancer in teens and young adults.

The report points out that the vast majority of skin cancer cases are related to ultraviolet (UV) exposure from sunlight and indoor tanning, yet many Americans ignore the health risks by going outdoors without sun protection and using tanning salons.

The Surgeon General calls on everyone – business leaders, scientists, healthcare workers, government, communities, families, and individuals – to discourage UV exposure and to strengthen research and public policy to prevent skin cancer.

For more information, please visit: <http://www.surgeongeneral.gov/>

F.Y.I.
(FOR YOU INSIDE)

- **BOLD INITIATIVE INSPIRED BY THE WALDMANS**
- **COSMETIC PROCEDURES FOR ALL SKIN TYPES**
- **MALE AND FEMALE PATTERN HAIR LOSS**
- **TRIBUTE TO A LEADER: DR. VINCENT A. DeLEO**

To book a dermatology appointment at Mount Sinai Doctors Faculty Practice, please call (212) 241-9728 or book online at www.MountSinaiDermatology.com