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Assessment of Nutritional Deficiencies and their Role in Hair and Scalp Disorders

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Introduction

Hair and scalp disorders represent a significant concern for individuals worldwide, not merely for aesthetic reasons but due to the impact on selfesteem, psychological well-being, and overall quality of life. Among the numerous factors contributing to these conditions, nutritional deficiencies play a pivotal role. Nutrition is fundamental for the maintenance of hair follicle structure and function, as the follicle is one of the most metabolically active organs in the human body. The complexity of hair growth, shedding, and renewal cycles makes the hair follicle particularly sensitive to nutrient imbalances. This sensitivity underscores the importance of assessing and addressing nutritional deficiencies to understand their role in hair and scalp disorders.

Proteins serve as the primary building blocks of hair, which is composed primarily of keratin, a fibrous protein. Adequate protein intake is essential for the synthesis of keratin, and insufficient protein levels can lead to hair fragility, breakage, and diffuse hair shedding, a condition known as telogen effluvium. Essential amino acids, which the body cannot synthesize, must be obtained through dietary sources. Deficiencies in these amino acids disrupt keratin synthesis, compromising hair strength and elasticity. Furthermore, restrictive diets or eating disorders such as anorexia nervosa, which often involve inadequate protein consumption, exacerbate hair and scalp conditions, emphasizing the importance of balanced protein intake.

Iron deficiency is another well-documented nutritional cause of hair and scalp disorders. Iron is critical for oxygen transport and cellular energy production, both vital processes for hair follicle activity. Hair follicle matrix cells are among the most rapidly dividing cells in the body, necessitating a consistent oxygen supply. Iron deficiency anemia can result in diffuse hair shedding, often presenting as chronic telogen effluvium. Even in the absence of anemia, low ferritin levels-an indicator of iron storage-are frequently associated with hair loss [1-3]. Women, particularly those of childbearing age, are more prone to iron deficiency due to menstrual blood loss and the increased nutritional demands of pregnancy and lactation. Addressing iron deficiency through dietary changes or supplementation can significantly improve hair density and reduce shedding in affected individuals.

Zinc plays a multifaceted role in hair follicle health due to its involvement in enzymatic activities, DNA synthesis, and cell proliferation. Zinc deficiency manifests as hair loss, scalp scaling, and, in severe cases, alopecia areata. The deficiency may also impair the structural integrity of hair shafts, leading to brittleness and increased breakage. Zinc's role in sebum production is also noteworthy, as an imbalance can lead to scalp conditions such as dandruff and seborrheic dermatitis. While zinc supplementation is effective in correcting deficiencies, excessive zinc intake can paradoxically impair hair growth by interfering with copper absorption, illustrating the need for careful management of zinc levels.

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Received: 02 December, 2024, Manuscript No. jctt-25-159357; **Editor assigned:** 03 December, 2024, PreQC No. P-159357; **Reviewed:** 18 December, 2024, QC No. Q-159357; **Revised:** 24 December, 2024, Manuscript No. R-159357; **Published:** 31 December, 2024, DOI: 10.37421/2471-9323.2024.10.293

Biotin, or vitamin B7, is a water-soluble vitamin often associated with hair health. Biotin deficiency, though rare, is linked to thinning hair, hair breakage, and scalp dermatitis. The role of biotin in fatty acid synthesis and keratin production underscores its importance for hair follicle function. Conditions such as biotinidase deficiency and long-term use of antibiotics, which disrupt gut microbiota and biotin synthesis, can predispose individuals to deficiency. Although biotin supplementation is popular in the treatment of hair disorders, it is important to note that most individuals do not experience clinically significant hair loss due to biotin deficiency, and its widespread use should be tailored to confirmed deficiencies.

Description

Vitamin D, a fat-soluble vitamin, influences hair follicle cycling and differentiation. The vitamin's role in modulating immune responses is particularly significant in autoimmune hair disorders like alopecia areata. Vitamin D receptors are expressed in hair follicles, and their activation promotes the transition from the telogen phase (resting phase) to the anagen phase (growth phase). Low serum levels of vitamin D are frequently observed in patients with alopecia areata, androgenetic alopecia, and telogen effluvium. Supplementation to correct deficiencies has shown promising results in mitigating hair loss and promoting regrowth, though further research is necessary to elucidate optimal dosing strategies.

Essential fatty acids, including omega-3 and omega-6 fatty acids, are crucial for maintaining hair and scalp health. These lipids contribute to the structural integrity of cell membranes, promote hydration, and possess antiinflammatory properties. EFA deficiencies can lead to dry, brittle hair and a flaky scalp [4,5]. Conditions like seborrheic dermatitis and psoriasis, characterized by inflammation and scaling, may also be exacerbated by insufficient EFA intake. Dietary sources of EFAs, such as fish, nuts, and seeds, are integral to addressing these deficiencies. Supplementation may also be beneficial in improving scalp hydration and reducing inflammation, thus supporting overall hair health.

Vitamin E, another fat-soluble antioxidant, protects hair follicles from oxidative stress, which can damage cellular structures and impede hair growth. Its role in enhancing blood circulation to the scalp further underscores its importance in supporting healthy hair follicles. Vitamin E deficiency, though uncommon, can contribute to hair thinning and scalp disorders. Supplementation with vitamin E has demonstrated efficacy in improving hair density and mitigating oxidative stress, but excessive intake can lead to adverse effects, emphasizing the need for balanced consumption.

B-complex vitamins, including riboflavin (B2), niacin (B3), pyridoxine (B6), and cobalamin (B12), collectively contribute to hair follicle health through their roles in energy metabolism, red blood cell production, and DNA synthesis. Deficiencies in these vitamins can disrupt hair follicle function, leading to thinning hair and scalp abnormalities. For instance, vitamin B12 deficiency, often associated with pernicious anemia or malabsorption disorders, can result in hair shedding due to impaired oxygen delivery to hair follicles. Similarly, niacin deficiency, known as pellagra, manifests as hair loss, dermatitis, and systemic symptoms. Correcting deficiencies through dietary modifications or targeted supplementation can alleviate these symptoms and restore hair health.

Copper, though required in trace amounts, is essential for cross-linking collagen and elastin in the scalp's connective tissues, as well as for the enzymatic production of melanin, which influences hair pigmentation. Copper deficiency can lead to premature graying, hair thinning, and weakened hair shafts. This deficiency is particularly relevant in individuals with malabsorption syndromes or those consuming excessive amounts of zinc, which competes with copper for absorption. Incorporating copper-rich foods such as nuts, seeds, and shellfish into the diet can help address this issue.

Selenium, a trace element with potent antioxidant properties, protects hair follicles from oxidative damage and supports thyroid hormone metabolism, which indirectly influences hair growth. Selenium deficiency is associated with hair loss and scalp abnormalities, such as dandruff. However, excessive selenium intake, often from over-supplementation, can result in selenosis, characterized by brittle hair and nails, as well as other systemic symptoms. Maintaining an appropriate balance of selenium through diet and supplementation is therefore critical for hair and scalp health.

Magnesium, an essential mineral involved in over 300 enzymatic reactions, plays a role in protein synthesis, energy production, and cellular function. Magnesium deficiency can contribute to hair thinning, scalp inflammation, and compromised hair follicle integrity. Chronic stress, a common factor in hair disorders, is known to deplete magnesium levels, further highlighting its importance. Dietary sources such as leafy greens, nuts, and whole grains provide magnesium, and supplementation may be warranted in cases of significant deficiency.

Folic acid, or vitamin B9, is essential for DNA synthesis and red blood cell production, processes that are vital for rapidly dividing hair follicle cells. Deficiencies in folic acid can lead to hair thinning and scalp issues, particularly in individuals with malabsorption syndromes or those taking certain medications that interfere with folate metabolism. Incorporating folate-rich foods like leafy greens, legumes, and fortified cereals into the diet can help mitigate these effects.

Iodine is critical for thyroid hormone synthesis, which regulates numerous metabolic processes, including hair follicle activity. Both hypothyroidism and hyperthyroidism, conditions linked to iodine imbalance, can result in hair thinning, changes in hair texture, and scalp abnormalities. Addressing iodine deficiencies through dietary sources such as iodized salt, seafood, and dairy products is essential for maintaining thyroid function and hair health.

Vitamin A, while essential for sebum production and scalp health, requires careful regulation, as both deficiency and excess can negatively impact hair. Vitamin A deficiency can lead to a dry, flaky scalp and brittle hair, while hypervitaminosis A can result in hair loss. Balancing vitamin A intake through dietary sources such as carrots, sweet potatoes, and leafy greens is crucial to support hair and scalp health without adverse effects.

The interdependence of nutrients highlights the complexity of nutritional influences on hair and scalp disorders. For example, deficiencies in one nutrient can exacerbate or mask the symptoms of another. Zinc deficiency, for instance, can impair iron absorption, while excessive zinc intake can lead to copper deficiency. Similarly, vitamin C, an antioxidant, enhances iron absorption and protects hair follicles from oxidative stress, underscoring its supportive role in addressing iron deficiency-related hair disorders. This intricate interplay necessitates a holistic approach to assessing and managing nutritional deficiencies in individuals with hair and scalp conditions.

Lifestyle factors, including dietary habits, stress, and exposure to environmental toxins, further influence nutrient status and hair health. Modern dietary patterns, characterized by high consumption of processed foods and low intake of nutrient-dense whole foods, contribute to widespread deficiencies in vitamins, minerals, and essential fatty acids. Additionally, chronic stress and exposure to pollutants can exacerbate oxidative stress and inflammation, compounding the effects of nutritional deficiencies on hair and scalp health. Addressing these factors through dietary modifications, stress management, and reducing exposure to environmental toxins is critical for comprehensive management of hair and scalp disorders.

Conclusion

In conclusion, nutritional deficiencies play a critical role in the development and progression of hair and scalp disorders. Proteins, vitamins, minerals, and essential fatty acids are integral to maintaining hair follicle structure, function, and overall scalp health. The complex interplay of nutrients necessitates a comprehensive approach to assessment and management, incorporating dietary modifications, targeted supplementation, and lifestyle interventions. Advances in diagnostic tools and therapeutic strategies continue to enhance our understanding of the relationship between nutrition and hair health, offering hope for improved outcomes in individuals affected by these conditions.

Acknowledgment

None.

Conflict of Interest

None.

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How to cite this article: Kazuki, Löhnert. "Assessment of Nutritional Deficiencies and their Role in Hair and Scalp Disorders." *J Cosmo Tricho* 10 (2024): 293.