



Intervention	039. Hair Replacement Technologies (including but not exclusive to dermatography (tattooing), hair weaves e.g. Interlace system, and surgical treatments (e.g. hair transplant, scalp reduction, artificial hair implants, cloning).
For the treatment of	Hair Loss/Alopecia (due to e.g. male and female pattern baldness, hair thinning, alopecia areata and trichotillomania)
Commissioning Position	<p>These interventions are not commissioned and therefore should not be routinely offered to patients. Application for funding approval can be made, using the IFR process, by the clinician recommending the intervention, if their assessment is that there are exceptional reasons why their patient could benefit from it.</p> <p>This policy does NOT restrict:</p> <ul style="list-style-type: none"> • Standard NHS provision of wigs • Surgical treatment or dermatography for the correction of disfiguring permanent hair loss from face/scalp that is the result of previous surgery or trauma, including burns. <p>For Gender Dysphoria patients, please see NHS England Specialised Commissioning Policy.</p>
Summary of Rationale	This is consistent with the prevailing national approach to not use NHS funds to treat conditions with predominantly aesthetic effects.
References	<p>Alopecia areata Health topics A to Z CKS NICE</p> <p>Female pattern hair loss (female androgenetic alopecia) Health topics A to Z CKS NICE</p> <p>Male pattern hair loss (male androgenetic alopecia) Health topics A to Z CKS NICE</p> <p>https://www.nhs.uk/mental-health/conditions/trichotillomania/</p> <p>https://www.nhs.uk/nhs-services/help-with-health-costs/wigs-and-fabric-supports-on-the-nhs/information-for-commissioners-of-plastic-surgery-services.pdf</p> <p>bapras.org.uk</p>
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