
Subject: AGA ist KEINE Krankheit?! Kardiovaskuläres Risiko...

Posted by [pietrasch](#) on Tue, 03 Aug 2010 07:50:23 GMT

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Wurde ja schon häufiger hier angeschnitten und kontrovers debattiert...

Br J Dermatol. 2010 Aug;163(2):371-7. Epub 2010 Apr 23.

Association of androgenetic alopecia with metabolic syndrome in men: a community-based survey.

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Abstract

Summary Background Several previous studies have investigated the association between factors related to metabolic syndrome, which is known to increase the risk of type 2 diabetes mellitus and cardiovascular disease, and androgenetic alopecia (AGA). However, the results of these studies have been inconsistent. **Objectives** To determine if there is an association between metabolic syndrome and AGA after adjustment for potential confounders. **Methods** A population-based cross-sectional survey was conducted in Tainan, Taiwan. A total of 740 subjects aged 40-91 years participated in the survey between April and June 2005. The Norwood classification was used to assess the degree of hair loss. Information on components of metabolic syndrome together with other possible risk factors was collected. **Results** A statistically significant association was found between AGA and the presence of metabolic syndrome [odds ratio (OR) 1.67, 95% confidence interval (CI) 1.01-2.74] as well as between AGA and the number of fulfilled metabolic syndrome components (OR 1.21, 95% CI 1.03-1.42) after controlling for age, family history of AGA and smoking status. Among metabolic syndrome components, high-density lipoprotein cholesterol (HDL-C) (OR 2.36, 95% CI 1.41-3.95; P = 0.001) was revealed as the most important factor associated with AGA. **Conclusions** Our population-based study found a significant association between AGA and metabolic syndrome; among the components of metabolic syndrome, HDL-C was found to be of particular importance. This finding may have significant implications for the identification of metabolic syndrome in patients with moderate or severe AGA. Early intervention for metabolic syndrome is critical to reduce the risk and complications of cardiovascular disease and type 2 diabetes mellitus later in life.

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[Male androgenetic alopecia and cardiovascular risk factors: A case-control study]

[Article in Spanish]

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Abstract

BACKGROUND AND OBJECTIVES: The relationship between androgenetic alopecia and cardiovascular disease has been studied by some authors in the past, although the results of epidemiological studies have been variable. The objective of this study was to determine the prevalence of metabolic syndrome and carotid arteriosclerosis in patients with early-onset androgenetic alopecia. **PATIENTS AND METHODS:** Seventy men were studied, 35 with diagnosis of early-onset (before 35 years of age) androgenetic alopecia and 35 control subjects who consulted for other skin conditions. In both groups, the criteria for metabolic syndrome according to the Adult Treatment Panel-III were studied (obesity, triglycerides, high-density lipoprotein cholesterol, systolic and diastolic blood pressure, and blood glucose), presence of atheromatous plaques, and carotid intima-media thickness using Doppler ultrasonography. Other cardiovascular risk factors, hormones, and acute-phase reactants were also analyzed. **RESULTS:** Criteria for metabolic syndrome were met by 57.1% of the patients with androgenetic alopecia compared to 14.3% of the controls ($P<0001$). Thirty-four percent of the patients with androgenetic alopecia had atheromatous plaques compared to 8.6% of the controls ($P=.018$). In an independent correlation analysis, abdominal obesity, systolic blood pressure, triglycerides, and blood glucose levels were significantly greater among patients with androgenetic alopecia. Testosterone and sex hormone binding globulin levels were similar in the 2 groups whereas insulin and aldosterone levels were higher in patients with androgenetic alopecia ($P<05$). **CONCLUSIONS:** The high frequency of metabolic syndrome and carotid atheromatous plaques in patients with androgenetic alopecia suggests cardiovascular screening should be done to enable early detection of individuals at risk and initiation of preventive treatment before cardiovascular disease becomes established.
