
Subject: Minox+Ket doch gute Kombi!

Posted by [Figaro03](#) on Fri, 28 Apr 2006 12:29:25 GMT

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Im Gegensatz zu der Meinung, die manche hier im Forum noch im November hatten, siehe hier

http://www.alopezie.de/fud/index.php/m/1204/0915173bd1375f361dffa8111e21259b/?srch=Nizoral#msg_1204

wirkt Ket + Minox zusammen doch synergetisch.

die Ammis haben mich beschimpft, wie ich nur so dumm sein könnte, und das noch nicht wüsste...

Also um es kurz zu sagen:

Ket-Shampoo ist eine gute Ergänzung zu Minox 2%. Head and Shoulders übrigens auch. Bei beiden wachsen mehr Haare als nur bei Minox 2% Anwendung. Allerdings wirken sie verschiedenartig.

Eine andere Studie sagt aber, dass head & Shoulders nichts bringt bei einer Minox 5% Anwendung. Obwohl Head&Shoulders in alleiniger Anwendung immerhin noch 50% so gut wirken soll wie die Minoxanwendung.

Man lese besonders die Studie ganz unten.

Zitat:

ketoconazole cream"

A recent review paper, the abstract of which was posted here recently by Realism, argues that Ketocazole's affect on aga is not due to anti-inflammatory effects but through both AR blocking and 5 alpha-R inhibition. I have also just noticed that Ketocazole cream is also available, marketed under the Nizoral name. Given the two studies (both from the same group mind you) that favourably compare the anti-aga effects of Ketocazole with topical minoxidil, does anyone here have any thoughts about using Ketocazole cream as an additional treatment? Concerns about systemic absorbtion? Has anyone tried it?

Below are the above-mentioned ketoconazole abstracts.

Review abstract posted by Realism:

Med Hypotheses. 2004 Jan;62(1):112-5.

Ketocazole as an adjunct to finasteride in the treatment of androgenetic alopecia in men.

Hugo Perez

Dihydrotestosterone (DHT) binding to androgen receptors (AR) in hair follicles is commonly accepted as the first step leading to the miniaturizing of follicles associated with androgenetic alopecia (AGA). Testosterone is converted to DHT by the enzyme 5alpha-reductase. Finasteride a 5alpha-reducase inhibitor blocks the production of DHT and is currently used to treat AGA. The

inhibition is not complete but a reduction of DHT systemically and in the scalp is accomplished. Ketoconazole has been clinically shown to be effective in the treatment of AGA. In this paper, evidence is presented to support the hypothesis that ketoconazole 2% shampoo has a local disruption of the DHT pathway. It is proposed that using ketoconazole 2% shampoo as an adjunct to finasteride treatment could lead to a more complete inhibition of DHT and thus better treat AGA.

Hair Loss Study Abstract: Ketoconazole shampoo: effect of long-term use in androgenic alopecia.

Authors

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Title

Ketoconazole shampoo: effect of long-term use in androgenic alopecia.

Source

Dermatology. 196(4):474-7, 1998.

Abstract

BACKGROUND: The pathogenesis of androgenic alopecia is not fully understood. A microbial-driven inflammatory reaction abutting on the hair follicles might participate in the hair status anomaly. OBJECTIVE: The aim of our study was to determine if ketoconazole (KCZ) which is active against the scalp microflora and shows some intrinsic anti-inflammatory activity might improve alopecia. METHOD: The effect of 2% KCZ shampoo was compared to that of an unmedicated shampoo used in combination with or without 2% minoxidil therapy. RESULTS: Hair density and size and proportion of anagen follicles were improved almost similarly by both KCZ and minoxidil regimens. The sebum casual level appeared to be decreased by KCZ.

CONCLUSION: Comparative data suggest that there may be a significant action of KCZ upon the course of androgenic alopecia and that Malassezia spp. may play a role in the inflammatory reaction. The clinical significance of the results awaits further controlled study in a larger group of subjects.

Title

The effects of chronic use of 1% ketoconazole or a 1% zinc pyrithione shampoo on the general health of hair and scalp.

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BACKGROUND: March 04, 2001 - American Academy of Dermatology Meeting - Washington DC - Scientists working for McNeil, makers of Nizoral anti-dandruff shampoo, presented the findings of a study done on 1% Nizoral shampoo which has good news for hair loss sufferers. It has long been known that 2% prescription Nizoral has beneficial effects on Androgenic Alopecia (MPB). It however has been unclear whether the same benefits can be obtained by using the non-prescription 1% version.

In the study presented (see below), one hundred male volunteers with mild to moderate dandruff

and somewhat oily scalp, were using, in a double-blind fashion, either a 1% Nizoral shampoo or a 1% zinc pyrithione shampoo, 2-3 times a week for 6 months. Analysis of the different parameters set up in the study shows that the hair diameter gradually increased with Nizoral use (+8.46%) over a 6 month period, whereas the diameter showed a trend to decrease with zinc pyrithione use over the same period (-2.28%). The sebum excretion rate was reduced with Nizoral (-6.54%) while it increased with zinc pyrithione (+8.2%) over the same period of time. The number of hair shed over a 24-hour period was reduced by 16.46% with Nizoral and 6.02% with zinc pyrithione after 6 months. Finally, the percentage hairs in anagen phase increased by 6.4% and 8.4% respectively during the study time.

The results are similar to a previous study done on 2% prescription strength Nizoral where it was shown that use of 2% Nizoral yielded a 7% average increase in hair shaft diameter similar to what was achieved by the control group using 2% Minoxidil and a non-medicated shampoo.

So for any hair loss sufferer, this research clearly indicates that using 1% or 2% Nizoral 2-3 times per week, will have positive effects on hair growth as well as controlling dandruff. It is still unclear at this time whether it's the anti-fungal properties or the anti-androgenic properties of Ketoconazole (active ingredient in Nizoral) that's responsible for the hair thickening effects, however because of the decrease in sebum rates as well, it is the authors opinion that the results are due to the anti-androgenic properties of Ketoconazole.

ABSTRACT: Hundred male volunteers with mild to moderate dandruff and somewhat oily scalp, have used, in a double-blind fashion, a 1% ketoconazole shampoo or a 1% zinc pyrithione shampoo. The test shampoos were applied 2 to 3 times weekly for a total period of 6 months. Several parameters that affect the general health of hair and scalp were assessed at start, and after 1, 3 and 6 months. These parameters included the percent of hairs in anagen phase, the diameter of the hairs, sebum excretion rate at the hairline, and the number of hairs shed in the 24-hour period prior to each assessment. At the end of the study, the participants were asked to complete a questionnaire regarding the cosmetic acceptability of the test shampoos.

Forty-four ketoconazole users and forty-three zinc pyrithione users completed the 6 month study period. Analysis of the different parameters shows that the hair diameter gradually increases with chronic ketoconazole use (+8.46%) over a 6 month period, whereas the diameter shows a trend to decrease with zinc pyrithione use over the same period (-2.28%). The sebum excretion rate is reduced with ketoconazole (-6.54%) while it increases with zinc pyrithione (+8.2%) over the same period of time. The number of hair shed over a 24-hour period is reduced by 16.46% with ketoconazole and 6.02% with zinc pyrithione after 6 months. Finally, the percentage hairs in anagen phase increased by 6.4% and 8.4% respectively during the study time. Except for the percentage of hairs in anagen, which showed no difference between the two groups, all other parameters were significantly different in favor of the ketoconazole shampoo.

Both shampoos have been shown to be good anti-dandruff ingredients. Assessment of parameters that can affect the health of hair and scalp, suggests that both ingredients show distinct differences in the way they affect the scalp; indicating that ketoconazole increases hair diameter and reduces scalp oil, whereas zinc pyrithione seems to yield opposite effects. This suggests that, besides their effect on the lipophilic yeast *Malassezia* spp, ketoconazole and zinc pyrithione act through quite different mechanisms. An overall analysis of hair diameter changes as a function of changes in sebum excretion rate suggests that a reduction in scalp oiliness seems to result in an increased hair diameter. This suggests that, in people with oily hair, regular use of ketoconazole shampoo may result in overall hair fullness.
