Navigating the Alopecia Areata Treatment Landscape

Key Takeaways:

- 1. Early Intervention: It is important to start treatment for alopecia areata as early as possible, especially in the presence of significant anxiety and depression in patients, to prevent substantial hair loss.
- 2. Efficacy of JAK Inhibitors:
 - Baricitinib: An oral JAK1/2 inhibitor that showed consistent hair regrowth in 90% of patients over three years. Safety remains high.
 - Ritlecitinib: A JAK3/TEC inhibitor approved for patients aged 12 and older. It provides significant hair regrowth in a quarter of patients after 24 weeks with varying hair growth trajectories.
 - Deuruxolitinib: An oral JAK1/2 inhibitor showing rapid and significant efficacy but requires further research due to the risk of thrombosis at higher doses.
- 3. Genetic and Immunological Aspects:
 - Alopecia areata can be driven by different immunological pathways, including Th1 and Th2 responses. JAK inhibitors are effective for Th1 diseases, while biologics for atopic dermatitis, like dupilumab, may be useful for Th2 patients.
- 4. Prospects for Oral Minoxidil:
 - Oral minoxidil is gaining attention as an additional treatment option for alopecia areata and other types of hair loss, showing safety and efficacy in combination with JAK inhibitors.