



ALOPECIA AREATA IN VIETNAM: A NEGLECTED CONCERN EMERGING IN DERMATOLOGY

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Dear readers

Alopecia areata (AA), an autoimmune condition characterized by non-scarring hair loss, has long been underrecognized in Vietnam's dermatologic landscape. Despite its psychological burden and rising prevalence, AA remains overshadowed by more commonly addressed skin disorders. This issue of the journal brings timely attention to AA through two original studies that explore innovative and comparative treatment strategies, signaling a shift toward more focused research and clinical interest in this area.

The first paper, *Comparative study of two concentrations (2.5 mg/mL and 5 mg/mL) of intralesional triamcinolone acetonide in the treatment of alopecia areata*, provides valuable insights into optimizing corticosteroid dosing for intralesional therapy. The study evaluates efficacy, safety, and recurrence rates between two commonly used concentrations, offering practical guidance for clinicians seeking to balance therapeutic outcomes with adverse effects. Its findings contribute to refining treatment protocols and enhancing patient care in resource-limited settings.

Complementing this, the second paper, *Treatment of alopecia areata with oral methylprednisolone combined with fractional microneedle radiofrequency*, explores a novel multimodal approach. By integrating systemic corticosteroids with fractional microneedle radiofrequency—a technology gaining traction for its regenerative potential—the authors present a promising alternative for patients with extensive or treatment-resistant AA. This combination therapy may represent a paradigm shift in how AA is managed, particularly in cases where conventional methods fall short.

Together, these studies underscore the need for greater awareness, research investment, and clinical innovation in addressing alopecia areata in Vietnam. As dermatologists confront the evolving spectrum of skin diseases, AA deserves a more prominent place in both academic inquiry and therapeutic advancement.

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