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# A method for more precise sampling of the scalp and eyebrows in frontal fibrosing alopecia



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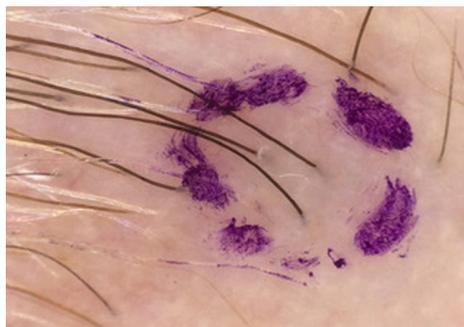
**Key words:** alopecia; biopsy; cicatricial; FFA; frontal fibrosing alopecia; lichen planopilaris; LPP; scarring.

## TECHNICAL CHALLENGE

Early diagnosis of frontal fibrosing alopecia (FFA) often requires performing a biopsy on a cosmetically sensitive area, such as the widow's peak or eyebrows.<sup>1</sup>

## SOLUTION

We present a modified, horizontal sectioning technique<sup>2</sup> that allows identification of diagnostic features from a 2-mm dermoscopy-guided punch biopsy specimen (Fig 1).<sup>3</sup> The biopsy specimen is first sent through histologic processing without sectioning or inking. After processing, the specimen is embedded epidermis down. The initial sections contain the epidermis, and the subsequent horizontal step-level sections are taken through the entire tissue segment for a total of 3 slides (3 sections per slide). A few unstained slides are obtained between each of the 3 slides) for possible special stains or research because no tissue remains in the paraffin block (Fig 2).



**Fig 1.** Dermoscopic image of a terminal hair with a peripilar cast, outlined before the 2-mm biopsy specimen is obtained.

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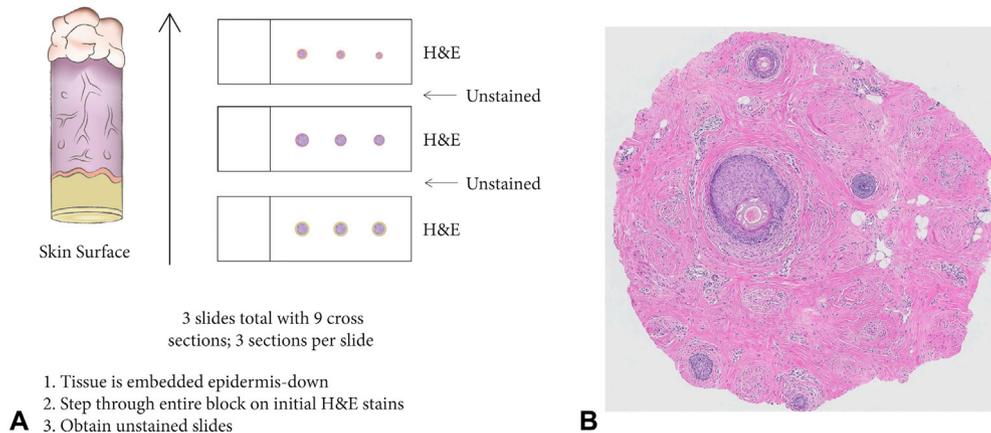
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1. Tissue is embedded epidermis-down  
2. Step through entire block on initial H&E stains  
3. Obtain unstained slides

**Fig 2. A**, Transverse sectioning of an unsectioned, 2-mm punch biopsy specimen with hematoxylin and eosin (H&E)-stained and unstained slides being obtained through the entirety of the tissue segment. **B**, A 2-mm transverse section from an eyebrow biopsy showing marked follicular loss and slight fibrosis, with a few lymphocytes around 1 altered follicle.

The diagnostic histologic features of FFA are often quite subtle, involving a single vellus follicle. The inflammatory focus is usually superficial, being seen only in early sections; however, 1 case showed a single inflammatory focus on the last of the 9 sections. There is usually a low follicular density from follicular dropout. There is often little to no perifollicular fibrosis because FFA involves small follicles that have a short follicular cycle and drop out easily. Eyebrow biopsy specimens sometimes show no remaining follicular epithelium and only interstitial lymphocytes.

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