Congenital triangular alopecia

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DESCRIPTION

A 4-year-old Caucasian girl presented with a 1-year history of asymptomatic, localised alopecia. Examination revealed a 3.5×3.0 cm area of alopecia over the right frontotemporal region of the scalp, with its apex towards the vertex (figure 1). There was no scaling or erythema. Her father had a history of extensive androgenetic alopecia. Dermatoscopy of the scalp showed the presence of a 'carpet' of vellus hair over the area of interest (figure 2).

The girl suffered from congenital triangular alopecia, also known as temporal triangular alopecia, a circumscribed, non-cicatricial form of alopecia of unknown aetiology.¹ It is clinically characterised by a triangular area, confined to one or both frontotemporal regions, in which there is an exclusive presence of vellus hair. It is usually observed in children between 2 and 4 years of age, during the time period in which the remaining scalp demonstrates replacement of vellus hair with terminal hair. Dermatoscopy serves as a useful tool to enhance the diagnostic capability, highlighting the clinical presence of vellus hair² and allowing differential diagnosis with alopecia areata (showing the presence of dystrophic hairs) and scarring alopecia (showing the absence of hairs and follicles).³ This condition is viewed as permanent with no specific treatment.

Figure 1 Area of alopecia over the right frontotemporal region of the scalp.

Figure 2 Dermatoscopy of the scalp showing the presence of a 'carpet' of vellus hair over the area of interest.

Learning points

- ▶ Congenital triangular alopecia is a circumscribed, non-cicatricial form of alopecia of unknown aetiology, usually observed in children between 2 and 4 years of age.
- ▶ It is clinically characterised by a triangular area, confined to one or both frontotemporal regions, in which there is an exclusive presence of vellus hair.
- ▶ Dermatoscopy serves as a useful tool to enhance the diagnostic capability, highlighting the clinical presence of vellus hair.

Contributors All authors had access to the data and a role in writing the manuscript, and approved the submitted version.

Competing interests None.

Patient consent Obtained.

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