Physician report

PERSONAL DATA

Patient Code	TRI14784AA
Doctor's name	Doctor Demo Fagron NL
Report date	03-02-2022

THE TRICHOTEST FORMULA ™

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Demographic data on the patient

Gender	Female
Age	50 years
Height	178 cm
Weight	80 Kg
BMI	25,24
Family history of alopecia	None
Irregular menstruation	No

Hair loss data

Type of alopecia	Androgenic alopecia
Degree of alopecia on the scale	Grade 1B
Time since beginning of hair loss	-1
Prescription testosterone derivatives	No

Clinical examination results

Pull-Test	A lot
Complaints associated with alopecia	No
Patchy alopecia	No
Current anti-alopecia treatment	No
Previous anti-alopecia treatment	No

Information about complaints and medication

Illnesses	No
Eating disorders	No
Known allergies to substances	No
Takes prescription drugs	No
Consume	Tobacco
Anabolizing agents	No

Patient condition

Stress	No
Suffers depression	No
Sufficient rest	Yes
Recent child	No
Low-calorie diet	No
Post-surgical stress	No
Are you in contact with toxic/contaminating materials at work?	No

Summary of the results

Positive : The genetic variation detected has a POSITIVE influence.
Moderate : The genetic variation detected has a MODERATE influence.
Negative : The genetic variation detected has a NEGATIVE influence.

Gene name	Description	Effect
TREATMENT EFFICACY WITH PROSTAGLANDIN INHIBITORS		
GPR44-1	Genetic result: Predisposition to slightly higher GPR44 mRNA stability. Interpretation: Prostaglandin D2 receptor 2 (GPR44 or CRTH2) variants are associated with an increased GPR44 mRNA stability leading to an increased responsiveness to prostaglandin D2 and hair follicle regression. Treatment/dosage: Treatment with prostaglandin D2 inhibitors (Cetirizine and/or Prostaquinon) at normal doses would be highly recommended.	
GPR44-2	Genetic result: Predisposition to slightly higher GPR44 mRNA stability. Interpretation: Prostaglandin D2 receptor 2 (GPR44 or CRTH2) variants are associated with an increased GPR44 mRNA stability leading to higher responsiveness to prostaglandin D2 and hair follicle regression. Treatment/dosage: Treatment with prostaglandin D2 inhibitors (Cetirizine and/or Prostaquinon) at normal doses would be highly recommended.	

Patient Code: **TRI14784AA** Date of birth: **01-01-1972** Request date: **13-08-2020**
Name: **Demo Patient 1 Fagron NL** Gender: **Female** Date of the results: **13-08-2020**

Positive **Moderate** **Negative**

Gene name	Description	Effect
TREATMENT EFFICACY WITH PROSTAGLANDIN INHIBITORS		
PTGFR-1	Genetic result: Increased likelihood of having a positive response to Latanoprost. Interpretation: Prostaglandin F receptor (PTGFR) variants are related with Latanoprost treatment efficacy (prostaglandin analog) . Treatment/dosage: Treatment with Latanoprost at normal doses is recommended.	
PTGFR-2	Genetic result: Increased likelihood of having a positive response to Latanoprost. Interpretation: Prostaglandin F receptor (PTGFR) variants are related with Latanoprost treatment efficacy (prostaglandin analog) . Treatment/dosage: Treatment with Latanoprost at normal doses is recommended.	
PTGFR-3	Genetic result: Increased likelihood of not having a positive response to Latanoprost. Interpretation: Prostaglandin F receptor (PTGFR) variants are related with Latanoprost treatment efficacy (prostaglandin analog) . Treatment/dosage: Treatment with Latanoprost at normal doses is not recommended.	
TREATMENT EFFICACY WITH MINOXIDIL		
PTGES2	Genetic result: Predisposition to slightly reduced PGE2 levels. Interpretation: Prostaglandin E synthase 2 (PTGES2) variants are associated with lower prostaglandin E2 production (hair growth promoter). Treatment/dosage: Treatment with normal doses of Minoxidil to stimulate prostaglandin E2 would be recommended.	
SULT1A1	Genetic result: Predisposition to reduced SULT1A activity. Interpretation: Minoxidil Sulfotransferase Enzyme (SULT1A1) variants predict response to minoxidil treatment. Treatment/dosage: Minoxidil may be recommended but in high doses, with the aim of trying to ensure therapeutic activity.	
TREATMENT EFFICACY WITH GLUCOCORTICOID ANTI-INFLAMMATORIES		
GR-alpha	Genetic result: Predisposition to normal sensibility to glucocorticoid anti-inflammatory treatments. Interpretation: Glucocorticoid Receptor (GR or NR3C1) variants are associated with resistance or sensitivity to corticosteroids. Treatment/dosage: SNP analysis indicates that normal doses of glucocorticoids should be effective.	
TREATMENT EFFICACY WITH ANTIANDROGENICS		
CYP19A1	Genetic result: Predisposition to reduced CYP19A1 activity. Interpretation: Aromatase (CYP19A1) variants are associated to low conversion of testosterone in estrogens and to high conversion into DHT (hair growth inhibitor). Treatment/dosage: Treatment with topical 17-α Estradiol (aromatase inducer) at normal doses is recommended.	

Positive **Moderate** **Negative**

Gene name	Description	Effect
TREATMENT EFFICACY WITH ANTIANDROGENICS		
SRD5A1	Genetic result: Predisposition to increased SRD5A1 activity leading to increased DHT levels. Interpretation: Steroid 5α-Reductase 1 (SRD5A1) variants are associated with increased SRD5A1 activity leading to increased DHT levels and hair growth inhibition. Treatment/dosage: Treatment with Dutasteride at high doses is recommended.	
SRD5A2	Genetic result: Predisposition to increased SRD5A2 activity leading to increased levels of DHT Interpretation: Steroid 5α-Reductase 2 (SRD5A2) variants are associated with increased SRD5A2 activity leading to increased DHT levels and hair growth inhibition. Treatment/dosage: Treatment with Finasteride at normal doses is recommended.	
VASODILATATION AND BLOOD CIRCULATION		
ACE	Genetic result: Predisposition to an increased Angiotensin conversion activity. Interpretation: Angiotensin-converting enzyme (ACE) variants are associated with increased plasma levels of angiotensin 2, an extremely potent vasoconstrictor. Treatment/dosage: Normal doses of circulation stimulators are recommended, such as Minoxidil, caffeine, Ginkgo biloba, Ginseng or Arginine.	
COLLAGEN SYNTHESIS		
COL1A1	Genetic result: Predisposition to normal collagen stability. Interpretation: Collagen, type I, alpha 1 (COL1A1) variants are associated with collagen instability. Treatment/dosage: SNP analysis does not indicate the necessity to supplement with hair strengthening composites.	
VITAMIN A METABOLISM		
CRABP2	Genetic result: Predisposition to normal retinoic acid intracellular transport. Interpretation: Cellular retinoic acid-binding protein 2 (CRABP2) variants are associated with lower retinoic acid (vitamin A) intracellular transport. Treatment/dosage: SNP analysis does not indicate the necessity to supplement with vitamin A.	
BIOTIN METABOLISM		
BTD	Genetic result: Predisposition to normal biotinidase activity. Interpretation: Biotinidase (BTD) variants are associated with low biotin (vitamin B7) uptake from the diet. Treatment/dosage: SNP analysis does not indicate the necessity to supplement with vitamin B.	
REDUCTION OF IGF-1 LEVELS		
IGF1R	Genetic result: Predisposition to normal IGF-1 levels. Interpretation: Insulin-like growth factor-I (IGF-I) variants are associated with lower plasma IGF-1 levels leading to hair loss. Treatment/dosage: SNP analysis does not indicate the necessity to treat with IGF-1 inducers.	

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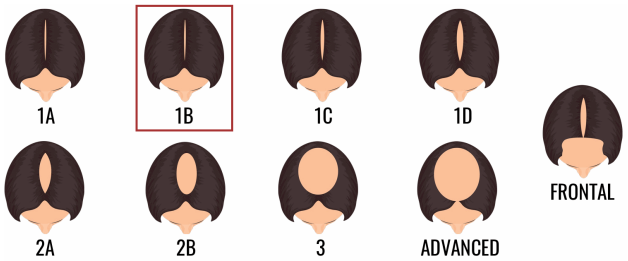
Patient alopecia classification

The Ludwig scale shown below is used to classify the degree of alopecia. The current degree of the patient's alopecia is marked by a red square.



The best products for your scalp

After analysing your DNA and life style, we create your profile. The compilation considers all your strengths and weaknesses and how you are affected by your alopecia and to what degree. As a result of the information available, we have selected exclusive compounds that will help you combat alopecia. The following colour scale shows what we most recommend (the intensity of the green indicating from more to less recommended) and those compounds we do not recommend (from white to red, indicating less recommended).

Anti-inflammatory	
Betamethasone dipropionate	
Clobetasol propionate	
Hydrocortisone	
Triamcinolone acetonide	
Fluocinolone acetonide	

Antiandrogenic	
Dutasteride	
Saw Palmetto	
17-α Estradiol	
Finasteride	
Topical Saw Palmetto	
Melatonin	

Antioxidant	
Astaxanthin	
Selenium yeast	

Circulation	
Ginkgo biloba	
Arginine	
L-Carnitine L-tartrate	

Collagen synthesis	
Oral SiliciuMax TM	
Cystine	
MSM	

Insulin-like growth factor increase	
IGrantine-F1 TM	
Keratolytic	
Tretinoin	

Minerals	
Oral Zinc sulfate	

Prostaglandins	
Prostaquinon TM	
Minoxidil	
Cetirizine Hcl	
Latanoprost Fagron	

Softener	
D-Panthenol	

Vitamin deficiency	
Oral Biotin	
Topical Biotin	
Nicotinamide (Vit B3)	
Pyridoxine HCl (Vit. B6)	
Tocopherol (vit. E)	

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A personalised formula with suitable active ingredients and doses

The list below shows a series of topical, oral, hair care and hygienic formulations for the patient's hair problem. These products have been selected according to the patient's genetic profile and life-style as well as the particular condition of his/her hair:

Topical treatment

Formula	
Prostaquinon TM	2 %
Dutasteride	0.25 %
Arginine	1 %
TrichoSol	100 ml

Dosage:

Apply at night before bedtime. Leave the solution on your scalp for as long as possible. Wash your scalp the next day.

Oral treatment

Formula	
Oral Zinc sulfate	10 mg/day
Astaxanthin	8 mg/day
Saw Palmetto	150 mg/day
Caffeine	15 mg/day
Oral	

Dosage:

1 capsule per day, 90 capsules for 3 months

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Complementary topical treatment for hair care and hygiene

Formula 2	
Ginseng	2 %
Ginkgo biloba	2 %
D-Panthenol	0.25 %
TrichoWash	100 ml
Dosage: Massage for 2 minutes and rinse	

Formula 3	
Topical Saw Palmetto	1 %
Arginine	1 %
D-Panthenol	0.25 %
TrichoCond	100 ml
Dosage: After washing your hair, apply the conditioner and leave it on for 2-3 minutes before rinse.	

Patient follow-up	Day 0	Day 30	Day 60	Day 90
Amount of hair loss	A lot			
Appearance of the hair				
Improved hair density				
Pull-Test	Unknown	Unknown	Unknown	Unknown
Satisfaction questionnaire				
Photos of the hair				

Demo Patient 1 Fagron NL

Topical treatment

Formula	
Prostaquinon TM	2 %
Dutasteride	0.25 %
Arginine	1 %
TrichoSol	100 ml

Dosage:

Apply at night before bedtime. Leave the solution on your scalp for as long as possible. Wash your scalp the next day.

Signature of the prescribing physician

Dr: _____

Physician Registration No. _____

Demo Patient 1 Fagron NL

Oral treatment

Formula	
Oral Zinc sulfate	10 mg/day
Astaxanthin	8 mg/day
Saw Palmetto	150 mg/day
Caffeine	15 mg/day

Oral

Dosage:

1 capsule per day, 90 capsules for 3 months

Signature of the prescribing physician

Dr: _____

Physician Registration No. _____

Demo Patient 1 Fagron NL

Topical treatment

Formula	
Ginseng	2 %
Ginkgo biloba	2 %
D-Panthenol	0.25 %
TrichoWash	100 ml
Dosage: Massage for 2 minutes and rinse	

Signature of the prescribing physician

Dr: _____

Physician Registration No. _____

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Topical treatment

Formula	
Topical Saw Palmetto	1 %
Arginine	1 %
D-Panthenol	0.25 %
TrichoCond	100 ml

Dosage:

After washing your hair, apply the conditioner and leave it on for 2-3 minutes before rinse.

Signature of the prescribing physician

Dr: _____

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