Change Notification for the UK Blood and Tissue Services

Notification date 30 June 2026
Effective date 11 August 2026
Implementation To be determined by each Service

CN 15-2026

Alopecia treatments

	Content changed	Type of change	Guidelines affected
1	Alopecia	Updated entry	**Whole blood**

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Note: this document indicates inserted and ~~deleted~~ text. This formatting will not apply in the published text.

1. Alopecia

Guidelines affected	Reason for change
Whole blood	Criteria have been expanded to clarify guidance for a range of treatments. Links added to the 'Autoimmune disease' and 'Skin disease' entries.

Essential information

Includes	~~*Baldness,*~~ Conditions causing hair loss and associated treatments, including systemic, local and topical therapies.
Obligatory	If available, refer to the relevant entry for any condition underlying hair loss/alopecia. For other causes of alopecia, including alopecia areata: **Must not donate if:** 1. Dutasteride (Avodart®) taken systemically in the last 6 months. 2. Finasteride (Propecia®, Proscar®) taken systemically in the last 4 weeks. 3. Taking injected or oral ~~*systemic*~~ anti-fungal treatment, steroids or immunosuppressant medication. ~~*or oral steroids.*~~ 4. Treated with platelet rich plasma (PRP) in the last 4 months. 5. ~~*4.*~~ Related to malignancy or to its treatment. 6. Under investigation or specialist follow-up.
Discretionary	1. If all investigations are complete and the donor is on no treatment, accept. 2. If the donor has only used topical finasteride (e.g. spray, foam or lotion), accept. 3. If the donor is only using topical corticosteroids, they meet the eligibility criteria in the 'Steroid therapy' entry, and they are not under specialist follow-up, accept. 4. ~~*2.*~~ If the donor is ~~*only*~~ using any other topical treatment and is not attending specialist follow-up, accept. 5. ~~*3.*~~ If the donor is ~~*only*~~ taking ~~*oral hydroxychloroquine,*~~ spironolactone and/or minoxidil, and is not under specialist follow-up, accept.

	~~4. If the donor has recovered from hair transplant surgery and no further treatment or follow-up is planned, accept.~~ 6. If the donor has recovered from hair transplant surgery, no further treatment or follow-up is planned and they fulfil all other relevant criteria in the 'Surgery' entry, accept. 7. If the donor is under specialist follow-up, refer to the relevant entry for the underlying condition. 8. ~~5.~~ For all other cases, refer to a Designated Clinical Support Officer.

Supporting information

See if relevant	~~• Malignancy~~ **For systemic anti-fungal treatment:** • Infection, chronic **For alopecia areata and scarring alopecia:** • Autoimmune disease • Skin disease **For hair transplants:** • Surgery **For finasteride or dutasteride therapy:** • Anti-androgens **For ~~injected or oral~~ steroid treatment:** • Steroid therapy **For hair tattoos and scalp micropigmentation:** • Body piercing
Additional information	Alopecia and hair ~~Hair~~ loss can be related to several factors, including family history, hormone changes, scalp infections, medication and underlying medical disorders. Alopecia areata is an autoimmune condition which can vary in severity from patchy to complete hair loss. Individuals may require local treatment, including injected steroids, or systemic treatment with steroids and/or immunosuppressants. Donors with alopecia areata who are being treated in primary care with only topical treatments can be managed using this entry. This includes donors being treated with potent topical corticosteroids,

provided the relevant criteria in the ‘Steroid therapy’ entry are also applied. For injected or oral steroids, refer to the ‘Steroid therapy’ entry.

Scarring alopecias are a group of conditions which destroy the hair follicle, causing permanent hair loss. The cause of most scarring alopecias is not known but may include an autoimmune component.

Dutasteride and finasteride can cause abnormal development of the sexual organs of a male baby within the womb. As it is not possible to know if an individual donation may be transfused to a pregnant woman whose baby may be at risk, donations cannot be taken from people who may have one of these drugs in their blood. They remain in the blood even after treatment has stopped.

Donors who have received scalp treatment with autologous platelet rich plasma (PRP) must wait 4 months before donation.

Given the range of causes and treatments, referral to a Designated Clinical Support Officer may be required to establish the donor’s eligibility to donate blood.