

U.S. Treatment Recommendations for Adults with Severe Alopecia Areata (AA): Consensus Statement (2026)

A Comprehensive Measure of Severity

- Includes percentage of scalp hair loss based on Severity of Alopecia Tool (SALT) AND:
 - Eyelash/eyebrow loss
 - Negative psychosocial impact due to AA
 - Inadequate treatment response for 6+ months
 - Diffuse (multifocal) positive hair pull test
- Disease is considered severe if:
 - >50% scalp hair loss ($\geq$ SALT 50) , or
 - 20%-49% scalp hair loss ($\geq$ SALT 20 - 49) AND one or more of the above

Treatment Recommendations

- FDA-approved oral JAK inhibitors are preferred first-line treatment for adults with severe alopecia areata
- Treatment may take at least 6 – 12 months to show improvement. If patient is not responding well on one JAK inhibitor, HCPs should consider trying another
- Dupilumab may be considered for atopic patients

Adjunctive (Add-on) Therapies to Support Regrowth

	Scalp	Eyebrows	Eyelashes	Facial Hair (Beard)
Oral minoxidil (0.625 – 5.0 mg daily)	✓	✓	✓	✓
Topical minoxidil 5%	✓	✓		✓
Oral, high-dose corticosteroids (limit to 3 months)	✓	✓	✓	✓
Intralesional corticosteroids (triamcinolone acetonide 2.5-5.0 mg/mL at 4-8 week intervals)	✓	✓		✓
High-potency topical corticosteroids	✓			
Topical JAK inhibitors		✓	✓	✓
Topical prostaglandins		✓	✓	✓

Manage the Full Impact of the Disease

Discuss supportive measures



Wigs (cranial prostheses) and hairpieces

HCP should write a Letter of Medical Necessity and help appeal insurance denials.



Mental health support

Refer when appropriate.



Seek educational and supportive resources

Refer patients to patient advocacy organizations like the National Alopecia Areata Foundation (naaf.org).

Access the publication and learn more about the treatment recommendations at naaf.org/treatment-recs.

Ref:

- JAMA Dermatology, 2026. In press.
- King BA, et. al., J Am Acad Dermatol. 2022 Feb;86(2):359-364.