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Inside Hollywood's favourite baldness clinic



Chris Ayres April 30 2011 12:43PM

Chris Ayres on the Wilshire Boulevard practice that's a sanctuary for Tinseltown's follically challenged stars

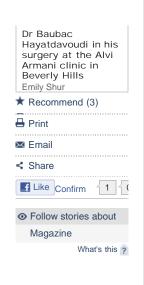
Aside from the words "Alvi Armani" etched into a smoked-glass partition, the entry lounge of the tenth-floor suite at 8500 Wilshire Boulevard – located above a nondescript bank branch on the edge of Beverly Hills – gives no hint as to what goes on beyond the unmanned reception desk. There's just a sofa, a vase of purple orchids, a flat-screen TV and a coffee table with a glossy magazine placed on top at a perfect right angle.

Such meticulous anonymity – there are no product brochures on display, no informative posters, no slogans or branding of any kind – makes you wonder for a moment if you might have found yourself in a field office for some unofficial branch of the CIA.

The real explanation, however, involves a matter of far greater delicacy. Here in this suite, an unspeakable taboo is confronted, often after years – decades, even – of private anguish. In many ways, it is a place of Ultimate Reckoning: where the impossibility of death in the mind of someone living – as Damien Hirst so memorably put it – meets the unyielding reality of human decay. Yes, Alvi Armani is a clinic... for balding men. And not just any men, either – but some of the richest and most prominent individuals on the planet.

If the name "Alvi Armani" sounds familiar, it's most likely because of the alleged patient who was recently caught by paparazzi climbing into a limousine in the facility's underground garage — one Gordon Ramsay, of *Kitchen Nightmares* fame. In the photograph, the Michelin-starred chef was fitted with a surgical cap and looked dazed and puffy-eyed. "Gordon Barnet!" sniggered *The Sun*.

In spite of such jeers, however, the Armani clinic – founded by the esteemed Italian surgeon Antonio Armani (unrelated to the clothing designer of the same name) – is at the follicle-tip of a revolution in so-called "hair



restoration" technology that is already well on the way to eliminating baldness in notable males of a certain age. Its secret? The treatment is pre-emptive. Plus, the new hair grows in over 18 months, which is why, if not for the occasional enterprising photographer, the work goes mostly undetected.

Although it is impossible to know who has had the procedure, the statistical fact that two-thirds of males should by rights have lost their hair by the age of 60 doesn't make it hard to guess. John Cleese, now 71, is one of the few who've come clean, explaining that he got a transplant because, "I've got a very strange-shaped skull, very pointy, and I don't like wearing wigs." In fact, the shock these days is more when men don't take action — hence the recent serious-minded reports on Prince William's scalp by the Associated Press, and the incredulous whispers in Hollywood whenever Hugh Laurie gets his thinning crown touched up with a spray can on the set of *House, M.D.*

"I would say that more than 90 per cent of everyone you see out there has had it done," says Dr Baubac Hayatdavoudi, the 35-year-old surgeon who took over the Armani clinic in Beverly Hills two years ago, when I ask him to guess how many suspiciously hirsute celebrities have undergone some kind of major scalpwork. "They just come here before it gets obvious. It used to be a taboo in this business to treat young people. It was always, y'know, 'Let's wait and see how your hair loss progresses..." Well, not any more.

There are other advances, too, says Dr Hayatdavoudi — who is tall and of Iranian descent, with a disarmingly gentle manner, and a tendency to break into the kind of muffled, professorial giggles that bring to mind the more nerdish qualities of Barack Obama. Soon, he predicts, men will be able to clone their follicles, making the process of hair restoration even cheaper and easier. "As an option, I think it's about five years out," he says. "Patients could take out 100 grafts at the back of their head and simply replicate the DNA. In fact, Dr Armani is researching this now at his lab in Toronto. It's his passion."

It was Hippocrates, the father of modern medicine, who made the first scientific observation on the subject of baldness when he reported that of all the Ancient Greek men in 400BC, only the eunuchs never receded or thinned. He didn't know why, of course.

But we do now: men castrated before puberty don't produce testosterone, and therefore neither its evil mutant offspring, dihydrotestosterone, or DHT. It is DHT that acts like Kryptonite on men's follicles, but only if those follicles have been equipped with so-called "DHT receptors", a factor decided without consultation or appeal by the cruel lottery of genetics.

"Everyone's hair has growth phases, which vary between two and six years," explains Dr Hayatdavoudi. "If you have a longer phase, it means you can grow your hair to the ground. And if you have DHT receptors, the growth phase becomes shorter and shorter... until you end up with 'peach fuzz'. You lose your hair because it's taking the DHT on board."

Before such things were known, "baldness cures" were nothing of the sort, really. Hippocrates treated his own dying rug with everything from sheep's urine to horseradish, cumin, pigeon droppings and nettles. It took a couple of millennia for the first big advance in follicular treatments to arrive – the 1804 experiment by an Italian doctor, Giuseppe Baronio, that involved cutting a strip of skin from a living sheep, then grafting it back on to the unfortunate creature 80 minutes later. To everyone's surprise, the skin survived – thus proving that "autografts" (removing skin from one part of the body and moving it to another) were viable. From here the action moved to Germany, where in 1914 a doctor named Franz Krusius used the same principle for a successful eyelash transplantation, and then to Japan, where Shoji Okuda announced in 1939 that he had performed some 30 hair transplants using various jerry-rigged circular punches of between 1.5mm and 5mm (they were driven into patients' scalps using nothing but "force and rotation"). Because his work was published in Japanese just before the Second World War, it took decades to reach the West. In the meantime, however, a New York dermatologist, Norman Orentreich – now 89 years old – discovered in the Fifties that hairs on the back and sides of the male head were immune to the influence of DHT, and that if sections of scalp were removed from these areas and grafted on to a balding pate, they continued to grow healthily. "Donor dominance" was the term he came up with, and it has been the founding principle of hair-loss surgery ever since.

There was a big problem with all of this, however. When clumps of 30 to 50 hairs were cut out of a patient's scalp and relocated – sometimes with the punch attached to an electric drill, to speed things up and increase profitability – they created scarring at the donor site, not to mention those unnatural-looking "plugs" of hair in the area being repopulated. As a result, various work-arounds were attempted, mostly with disastrous consequences: "scalp reductions" (the scars resembled axe marks); "hair flaps" (there was risk of oddly angled hair and, in some awful cases, "flap death", or tissue necrosis) and "micrografts" (splitting grafts into smaller pieces).

Some of these procedures were still being offered in the Nineties. Then finally came the "strip method", whereby all the donor hairs were "harvested" in one go by cutting out a long, rectangular section of scalp from the back of the head and sewing the gap shut. The donor strip was then split into micrografts and planted into holes on the top of the head made by a scalpel nick. It was a relatively clean technique with half-decent results, but still left a "happy-

faced" scar on the back of the patient's head, ruling out short haircuts.

"I had the strip method done when I was 20 years old," recalls one patient, Ben Jacobs, a businessman from Long Beach, California, who started balding as if he were a middle-aged man at the age of just 17. "The results were OK, but I honestly expected better. Also, any time you get cut open like that, you're gonna have pain." Still, he was willing to take any measures necessary. "Losing your hair is a pretty traumatic experience at that age," he explains. "It affects your whole life. The only things I should have been thinking about at that time were college and girls. Instead I was thinking about my hair and how it made me look a decade older. I lost my confidence; I was depressed."

This is where Dr Armani comes in. Basically, he founded his business in 1999 with the aim of harvesting only individual "follicular units" — made up of one to four hairs plus the surrounding oil glands, muscles, and connecting tissue — using tiny, needle-like pricks in the donor area. Each follicular unit, also known as an ultra-micrograft, is then transplanted to the top of the head using a tool like jeweller's forceps. Scarring is barely detectable, even with very short hair. Also, fewer hairs are lost during harvesting, and therefore "transplant density" is improved. Most importantly, the pluggy look doesn't happen — or at least not in theory. "In this clinic, plugs are a dirty word," says Dr Hayatdavoudi.

Ben Jacobs agrees — and he should know, because Dr Armani agreed to help fix the chop-job he'd had done as a 20-year-old (at a different clinic). "I know it's a cliché," says Jacobs, "but they've given me my life back. Even my girlfriend was shocked when I told her I'd had it done before we met. She told me, 'I would never have guessed.""

For privacy reasons, *The Times* isn't allowed to sit in on one of Dr Hayatdavoudi's consultations, but fortunately a test subject is on hand in the form of... well, your very own correspondent. I keep my hair closely shaved – after it became obvious in my mid-twenties that it was staging a retreat on all fronts. Thankfully, by then, the semi-skinhead look was acceptable (thank you, Jason Statham and Bruce Willis) so I bought some shears and haven't thought about it much since. In fact, baldness came as something as a relief, given that I had been cursed in the first place with fluorescent ginger hair.

"You coped with it really well," says Dr Hayatdavoudi, soothingly. "For others it's like a jab in the back on a daily basis. Your fair hair actually helps, because it blends with your scalp. Contrast exacerbates the appearance of loss. You also have a young-looking face. For me, it was a real sore spot, and it signified ageing... which is why I've had two transplants. In fact, everything you can see on the top of my head is transplanted."

Clearly, for Dr Hayatdavoudi, this business is personal. He tells me that he began losing his hair in his midtwenties, pretty much at the exact moment he'd finished his medical studies and could finally relax. Like many of his patients, he soon entered the realm of "extreme styling" to conceal his loss. "I do a lot of yoga and other outdoor stuff, so it was really..." — he struggles to find a word — "bothersome." You also get the sense that his family's Iranian culture wouldn't have been cool with the Buddist monk look, although with his strong features and athletic bearing, he could surely have pulled it off as well as anyone. So in 2003, at the age of 27, he had his first transplant, performed by Dr Armani himself. And when the hair further back on his scalp began to thin 14 months ago, he had a second operation. The result is impressive enough that you'd never question it, as long as you didn't know what he did for a living. As it is, there's a certain level of perfection to the hairline that made me suspect from the beginning that he might be one of his own patients.

According to Dr Hayatdavoudi, "We get guys who come in and they're afraid to take their hats off. They feel nude. We have to wrestle them off. I had one patient who said he spent two hours every day doing his hair." By the time these tortured souls end up at Alvi Armani, they've usually been researching on the internet for at least two years. "A lot of people fly here for a half-hour consultation from halfway across the country, then fly back home again."

Not everyone is a good candidate, though — and not just those with conditions such as alopecia totalis, which leaves them without any suitable donor sites. "Some patients just aren't emotionally fit," says Dr Hayatdavoudi. "If they think it's a full head of hair or life isn't worth living — they're not suitable. With some other patients, they have underlying behavioural issues that need to be addressed. But no one has ever been turned away for price reasons. If they're flexible with their schedule, we can usually give discounts. The guy we had in yesterday, for example, was virtually a pro bono case. This person just took an amazing leap of faith at his stage of life."

The human head, I learn as my hypothetical consultation begins, has between 100,000 and 150,000 hairs, while each square centimetre of scalp has roughly 70 to 90 follicular units. Balding, meanwhile, is measured on the so-called Hamilton-Norwood scale — an unhappy series of diagrams showing various stages of decay (female hair loss is measured on the separate Ludwig scale) — while at Alvi Armani they have a proprietary system, based on four zones of the scalp and their corresponding square centimetres of coverage. "You'd be looking at 2,100 grafts in Zone 1 and 1,300 grafts in Zone 2," Dr Hayatdavoudi informs me, after studying my "peach fuzz" through a microscope. "Zone 3 is adequate if you keep it short." Those grafts would of course have to come from somewhere: the back of my head. "You lose hair density in your donor area, yes," he confirms. "But you have maybe 22,000

follicular units at the back, so if you remove 3,400 of them, you're still left with 19,000. That's not noticeable."

The procedure itself would go something like this: a good breakfast, get to the clinic early, take a local anaesthetic and an anti-anxiety pill ("like having a couple of glasses of wine"), listen to music, and wait as a surgeon "harvests" follicles from my donor site. Then a half-an-hour lunch break, followed by the "design session", when the placement of every single hair is discussed and mapped out. The Alvi Armani clinic prides itself — a little pretentiously, perhaps — on following the facial structure and hairline guidance of Marcus Vitruvian Pollio's 15BC masterpiece, *The Ten Books on Architecture* (which later inspired Leonardo da Vinci's *Vitruvian Man*). "David Beckham's name also comes up a lot," laughs Dr Hayatdavoudi. "But a Beckham hairline isn't right for everyone: he has the upper-pointing nose, the small distance between the upper lip, the high cheekbones. The aim is to bring out the features of the patient that need to be highlighted, taking into account race, facial dimensions, etc. You can't just add hair."

Once the design is finalised, the incisions for the grafts are made. Then it's time for the hairs taken from the donor area to be implanted. After that: pain medication, precautionary antibiotics, a surgical cap, then home. "The first night is the worst, and it's possible you'll get a mild headache and maybe nausea for 10-15 minutes," warns Dr Hayatdavoudi. "After that, your face might get a bit puffy from the numbing fluid. There's minimum bleeding. And when you come back in the next day, the scabs wash away."

As for the recovery period: the swelling – if any – goes down within a week. There might also be more scabbing, flaking and redness, and for 28 days you must perform so-called "protocol washes". Meanwhile, about 10 per cent of the "new" hairs will grow within the first two months, hitting 50 per cent at six months, and 100 per cent at 18 months. Dr Hayatdavoudi says that, "For people who've been bothered by hair loss, the reversal of the process – the hair getting thicker and thicker – is like Christmas coming every day."

One recent patient, Ryan Day, a 35-year-old IT consultant from New York, doesn't argue. "You can't put a value on that bounce in your step," he says. "They gave me a whole lotta hair, man — all of it pointing in the right direction!"

Finally, of course, there is the small but tricky matter of payment. The cheapest option for my 3,400 grafts would come to about \$5 per graft, or \$17,000 (£10,500), with one of the clinic's junior surgeons holding the knife. The most expensive option, involving Dr Hayatdavoudi performing the transplant in my own home, would be more like \$340,000. "The price varies," he shrugs. "If I'm doing it, a shaving case – where we shave the patient prior to the procedure – costs \$8 per graft. But a news anchor, for example, can't take a week off work, so we can't shave him. We call that an executive case, and it's \$15 per graft, because it takes more time. For VIP cases – which means we shut down the clinic and lock the doors for them – it's \$30 per graft. Then there are the house and hotel visits, where we take the whole crew. That's when you get up to \$100 per graft. We end up recreating the entire operating room."

After hearing all this, I tell Dr Hayatdavoudi that if I ever wanted my ginger locks back, I'd rather wait for less invasive gene therapy. "The problem is, there are literally hundreds of gene loci associated with hair loss," he shrugs. "Even if you found a treatment for one gene, you'd still have all the others. And there are complications when you manipulate genes. That's the reason why there's never likely to be a silver bullet."

For the near future, then, the choice for men with underendowed scalps is a simple one: the buzz cut or the surgeon's knife. And, of course, the earlier any action is taken, the better — because these days, no one need ever know what happened. Which brings Dr Hayatdavoudi to the subject of England's future king, Prince William — and whether or not his horse has already bolted in that regard. "He actually has a great donor area and would be a great candidate," he says.

Alas, however, it's unlikely that even the Alvi Armani clinic, with its unmarked doors and security detail in the car park, could handle such a client. "A VIP session would be best suited for him," agrees Dr Hayatdavoudi, apparently unfazed by the prospect of an in-house transplant at Buckingham Palace.



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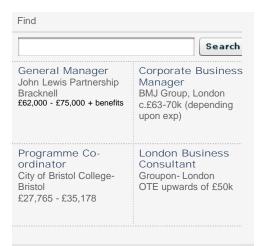
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