Hair washing – Too much or too little?

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Many dermatologists continue to battle an overwashing epidemic. From bar soaps to antibacterial washes, dermatologists continue to educate patients that the extensive lather, the alkaline pH, and the antibacterial components of our washing rituals can strip the natural oils from the skin and leave it dry, cracked, and damaged.

This phenomenon is well reported in the literature, and industry has taken notice by developing more "no-soap" soaps than ever before.

But does the same philosophy apply to hair care practices? Hair washing is more complicated, particularly in skin of color patients.

Overwashing the hair often leads to dry hair, split ends, and the need for compensatory conditioners to replace lost moisture. In African American hair, especially that of patients who use chemical or heat treatments, the lost oil and sebum from overwashing can cause even more damage.

Many skin of color patients wash their hair infrequently to protect it from breakage, and they may use topical oils to smooth and protect the fragile hair shaft.

However, can underwashing the scalp and hair cause problems? Yes, in some cases.

You might see African American patients in your practice who are suffering from scalp folliculitis, itchy scalp, seborrheic dermatitis, or alopecia that can be traced to infrequent hair washing. The infrequency of washing and the application of oils to the hair does help the hair shaft, but the buildup of oils and sebum on the scalp itself can lead to scalp inflammation, follicular plugging, extensive seborrhea, acneiform eruptions, and folliculitis.

Depending on its level and degree, the inflammation can cause pruritus and burning of the scalp and can even lead to temporary or permanent hair loss. Although topical and oral antibiotics, topical steroids, and medicated shampoos do help, proper washing also plays an important preventative role.
For skin of color patients with some of the chronic scalp problems mentioned above, decreasing heat and chemical treatments, along with increasing hair washing to two or three times a week can help prevent scalp dermatitides without compromising the hair integrity. In addition, the use of sulfate-free shampoos, use of shampoo on the scalp only (without lathering the ends of the hair), or use of a dry shampoo between washes can help control the oil and product buildup on the scalp itself.

Ultimately, it may take some trial and error to find the right hair washing regimen for skin of color patients. Determining how often to wash the scalp depends on many patient-specific factors including ethnicity, hair type, frequency of chemical and heat treatments, cost, and level of scalp inflammation. Experimenting with new hair care products and possibly a new hairstyle also may be part of a successful treatment plan.

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