

Chapter 6. Telogen Effluvium vs. Androgenic Loss: Panchakarma Decision Tree

(Panchakarma Decision Tree & Focused Treatment Algorithms)

Moderate-Clinical Lesson · Reading Time ≈ 55 min

6.1 Why a Decision-Tree?

Hair-loss clients arrive with mixtures of **diffuse shedding (Telogen Effluvium, TE)** and **patterned miniaturisation (Androgenic Alopecia, AGA)**. The two need almost opposite doṣic corrections:

Pattern	Classical View	Hallmarks	Primary Doṣa
Telogen Effluvium	<i>Rasa-Rakta kṣaya</i> after stress, illness, crash dieting	Sudden diffuse > 150 hairs/day, normal calibre shafts, good anagen ratio returns in 3-6 mo	Vata depletion + Pitta exhaustion
Androgenic Alopecia	<i>Pitta-Kapha</i> overheat & follicle dūṣya ("kṣaya of keśa")	Gradual temple/crown thinning, miniaturised hairs, family history, DHT sensitivity	Pitta-Kapha with Rakta heat

An Ayur-clinician must **triage** which Panchakarma tools are safe (mild) vs. unnecessary or too aggressive.

6.2 Five-Step Diagnostic Grid

1. **History Length**
 - < 6 months = TE suspect; > 1 yr = AGA.
2. **Pull Test** (4 sites, 60 hairs each)
 - Positive (> 6 hairs) = active TE.
3. **Dermoscope**
 - Hair calibre variance > 20 %, vellus ↑ = AGA.
4. **Ferritin / Thyroid**
 - Ferritin < 40 ng/ml, TSH > 4 mIU = TE trigger.
5. **Family Pattern**
 - Parent-sibling pattern = strong AGA predictor.

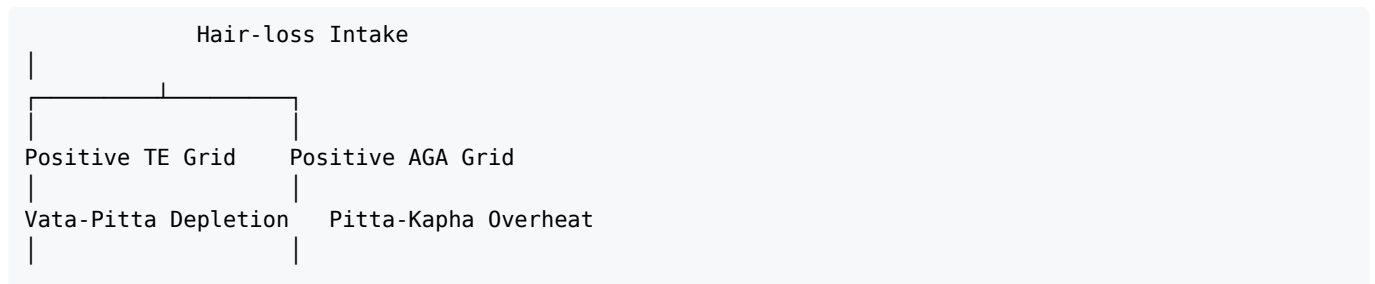
Decision Rule:

If ≥ 3 TE flags → TE protocol.

If ≥ 3 AGA flags → AGA protocol.

Mixed → hybrid path below.

6.3 Panchakarma Decision Tree





Mild Rasāyana + Basti (No blood letting) | Lekhana Abhyanga + Mr̥ḍu Virechana
|
If shedding persists → add Nasya & Marma stim. | If miniaturisation → add Raktamokṣa micro

6.4 TE Protocol (30 Days)

Phase	Day	Intervention	Formula / Dose
Āma Pācana	1-3	Warm mung-rice khichadi + trikatu ghee 5 ml BID	-
Sneha-pāna	4-6	Bala-Ashwagandha Ghṛita 20 → 40 ml	Lubricates Vata
Mild Matra Basti	7-12	60 ml Ksheera-Bala taila nightly	Nourish marrow, follicles
Nasya	15-25	Brahmi ghṛita 2 drops/nostril alt-days	Neuro-calm, stress TE
Internal Rasāyana	15-30	Amalaki Rasāyana 10 g HS + Ashwagandha 300 mg HS	Rasa-Rakta rebuild
Topical	full 30 d	Neelibhringādi Oil 5 ml scalp, 2 h pre-wash; mild hibiscus bar -	

Expected: Shedding ↓ 60 % by Day 30; regrowth vellus visible Month 3.

6.5 AGA Protocol (8 Weeks)

Phase	Week	Intervention	Formula / Dose
Lekhana Abhyanga	1-2	Sesame-mustard oil + Kolakulathādi chūrṇa friction 25 min alt-days	Mobilise Kapha
Mr̥ḍu Virechana	2	Avipatti choorna 8 g; aim 10 stools	Purge Pitta-Kapha
Localized Raktamokṣaṇa	3	1 leech each temple if inflamed	Clear Rakta heat
Nasya	3-8	Anu taila 4 drops daily	Enhance scalp prāṇa
Internal	3-8	Ārogya-Vardhini vati 250 mg TID + Triphala guggulu 500 mg HS	Liver detox, DHT mod.
Topical	full course	Rosemary-Neeli Follicle Serum alt-days + Kesharāja Tonic daily	Stimulate follicles

Expected: Density ↑ 10-15 % (trichoscope) Week 8; continued therapy 6 mo for higher gains.

6.6 Hybrid Path (Mixed TE + AGA)

- Weeks 1-2 follow TE diet, Bala ghṛita snehana (low dose).
- Week 3 do **Mr̥ḍu Virechana**.
- Week 4-8 introduce Rosemary-Neeli Serum + Triphala guggulu.
- Skip Raktamokṣaṇa unless pustules or intense erythema.

6.7 Key Clinic Formulas (New)

A. Bala-Ashwagandha Ghṛita (Sneha-pāna)

- Ghee 500 g + Bala 40 g + Ashwagandha 40 g + Water 3.2 L; boil to ghṛita paka.*

**B. Kolakulathādi Chūrṇa (Lekhana)**

- Horse-gram, Musta, Vacha, Chitraka – equal parts ultra-fine; keep ≤ 100 mesh.*

6.8 Outcome Tracking

Metric	Tool	Baseline	Week 4	Week 8
Hair-count 1 cm ²	TrichoScan	110	120	135
Pull-test (hairs)	Manual	16	6	4
Vellus/terminal ratio	Dermoscope	0.35	0.3	0.25
Sebum scalp ($\mu\text{g}/\text{cm}^2$)	Sebumeter	180	140	130

6.9 Contra-Signals

Condition	Avoid
Ferritin < 20 ng/ml	Virechana (delay, correct iron)
Active seborrheic dermatitis flare	Powder friction; treat dandruff first
Pregnancy	Triphala guggulu, leech, internal guggulu
Auto-immune alopecia areata	Phototherapy; refer adjunct allopathy

6.10 Patient Education: Quick Tips

- **Protein 1 g/kg** body-wt, but avoid whey concentrate.
- Night sleep by **10 pm** → melatonin hair cycle.
- 5-min daily **scalp kapalabhāti** improves micro-circulation.

Summary

A structured **diagnostic grid + Panchakarma decision tree** lets the clinician rapidly choose between Vata-nourishing, Kapha-lekhana, or hybrid paths—preventing over- or under-treatment and delivering clear regrowth milestones within 2 months.