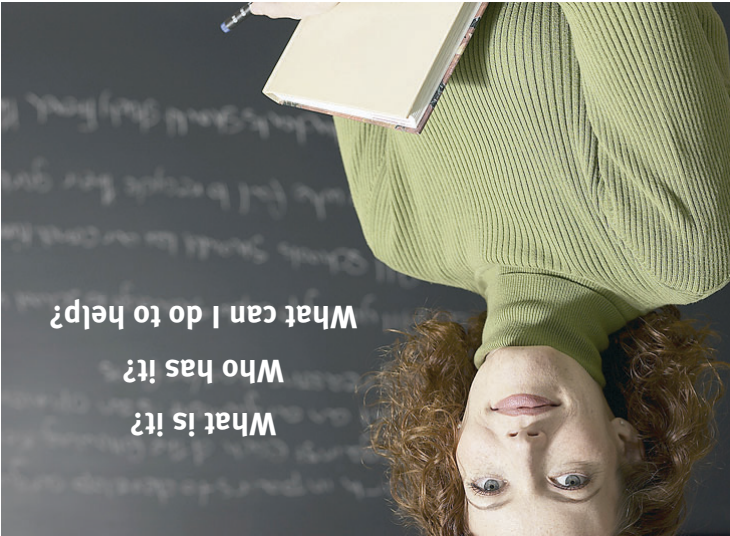


—Sue Vittek,  
clinical social worker  
and former teacher

**“100% of teachers will have  
a child with trich in their  
classroom at some point  
in their career.”**



## A Guide for Educators

**Trichotillomania:  
(Compulsive Hair-Pulling)**  
FACTS ABOUT A COMMON CAUSE  
OF HAIR-LOSS

### Dear Educator,

We know you are very busy, but 30 seconds reading this brochure will enable you to help a suffering child access life-changing resources and support. Thank you.

## Definition

Trichotillomania, along with skin-picking and severe nail-biting, are known as body-focused repetitive behaviors (BFRBs). BFRBs are complex neurological-behavioral disorders characterized by the compulsive urge to pull hair, pick skin, etc.

## Diagnosis

Trich (for short) is currently categorized with the impulse control disorders. However, recent research suggests that it has much in common with obsessive-compulsive disorder and Tourette's syndrome, though the treatments are different for each.

### Trich is characterized by:

- Inability to resist urges to pull out one's hair
- For some, mounting tension before one pulls
- For some, gratification and relaxation when pulling
- For some, a feeling of relief after pulling
- Noticeable hair loss
- Increased distress and/or interference with daily life

## Warning Signs

### Onset and Warning Signs

While the average age of onset is 11, trich can be found in children as young as one year old. The underlying biology is not clearly understood at this time.

Onset of trich can be triggered by simple sensory events, such as itchy eyelashes, or by stressful life events, and it can occur quite suddenly. Most people pull from their head, eyelashes, or eyebrows, but pulling can happen anywhere there is hair on the body. People frequently pull while reading, writing, working on the computer, talking on the phone, watching TV, or falling asleep. Some people are conscious of what they are doing, but others are not. Most people pull in private, but some will pull mindlessly in public while doing one of the above activities.

### Warning signs include:

- Wearing, hats, kerchiefs, or wigs
- Increase in a girl's eye makeup
- Excessive fiddling with hair
- Preoccupation, anxiety, or academic decline
- In physical education, lack of cooperation and avoidance of windy conditions
- Changes in social behavior patterns

## Treatment

Trich often responds well to cognitive-behavioral therapy. CBT focuses on creating a competing response to the urge to pull (e.g., fist clenching, playing with finger toys) and on developing skills like self-awareness, relaxation, and stress management techniques. Support groups can also be of great help to sufferers and their families. Drug therapy using certain serotonin-reuptake inhibitors, like Paxil and Prozac, can sometimes provide relief, but is used less frequently with children than with adults.

For more information on treatment, please request the booklet, *Trichotillomania and Its Treatment in Children and Adolescents: A Guide for Clinicians* from the Trichotillomania Learning Center. TLC maintains a national referral list of clinicians who have experience treating trich and other BFRBs.

## Emotional

### Emotional Aspects

*Having trich is not the child's fault.* Children with trich are neurologically predisposed to have the urge to pull out their hair. It does not hurt, as you might think, and these kids are not trying to damage themselves. In fact, they often experience it as a self-soothing behavior that helps them cope with anxiety and other difficult emotions.

Due to the powerful nature of the urges, children cannot “just stop it” and may not even be aware they are doing it. Some children even pull when they are asleep.

Having trich is confusing, upsetting, and isolating for children. It can create deep feelings of shame as well as social ostracism. It is very important to be supportive of children dealing with this problem. Kids with trich tend to be sensitive, caring, and intelligent; remind them they are special, with or without trich.

## Help?

### How Can I Help?

Be sensitive and compassionate to the suffering of a child who has trich. Do not tell them to stop pulling their hair out (they would if they could), but do gently encourage them to talk about it in a confidential and safe environment.

One or two out of every 50 people have trich, probably even people you know, so let the child know he or she is not alone. Local treatment resources are not widely available; creating a local support group could be an important step on the child's road to recovery.

If you suspect a child has developed trich, please refer his or her parents to TLC. The earlier trich is diagnosed the easier it is to treat. If you would like a script for speaking with parents, please contact TLC.

### The Facts About Trichotillomania

- Trich (for short) is compulsive hair-pulling from the scalp, face or other parts of the body
- Trich affects 2-4% of the general population, or 1 to 2 people out of every 50
- Trich affects children of all backgrounds and personalities, more often girls than boys
- Onset usually occurs from ages 6-13, though it can begin as early as infancy
- Trich is a complex neurological-behavioral disorder, not something children “can just stop doing”
- Trich causes great shame, isolation, and secrecy for many sufferers
- Trich can often be successfully managed with appropriate behavioral treatment from a knowledgeable provider

**Open for poster:  
Please post in children's public area.**

**TLC**  
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- Copyright © 2007 Trichotillomania Learning Center
- www.trich.org
  - The Hair Pulling Habit and You by Ruth Golomb and Sherrie Vavrichek
  - You are Not Alone by Cheryl Salazar
  - What's Happening to My Child? A Guide for Parents of Hair Pullers by Cheryl Salazar
  - The Hair Pulling Problem by Dr. Fred Penzel
  - www.stoppulling.com, www.stoppicking.com
  - Bad Hair Life (video)

## Resources

My name is Larysa. I pull out my hair. Sometimes I have to wear a scarf or a wig; sometimes my hair grows in. But I'm just a regular kid with a neurological problem most people don't understand. Luckily there is help and support for kids like me.



## The Many Faces of Trich

**I'm Samantha.  
I have a problem.  
It's called trichotillomania.  
(trick o til o may nee ah)**

**What's that? Well, it means I pull out my hair. I know it's a big word, but it is a real medical condition that many kids (and grown-ups) have—like about 2 out of every 50!**

**The good news is, there is help for kids like me.**

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