

Need to talk?

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0808 808 00 00

Monday to Friday, 9am-8pm

SCALP COOLING

Scalp cooling can sometimes reduce or prevent hair loss caused by chemotherapy. It works by reducing the blood flow to your scalp. This can stop the chemotherapy drug from affecting your hair. Scalp cooling does not work with all chemotherapy drugs, and it is not always possible to know how effective the treatment will be.

Scalp cooling only protects the hair on your scalp. You may still lose hair from other parts of your body.

You will need to keep your head cold before, during and for a while after treatment.

There are two types of scalp cooling:

- Cold gel cap a special cap filled with cold gel.
- Refrigerated cooling system this pumps liquid coolant through a cap.

You might feel cold during your treatment. The chemotherapy staff will try to make you feel as comfortable as possible.

Your hospital may not have the facilities for scalp cooling or it may not be suitable for you. Your doctor or nurse can talk to you about this.

Scalp cooling during chemotherapy

Cooling your head in certain ways during <u>chemotherapy</u> may reduce or prevent hair loss. Scalp cooling can reduce the blood flow to your scalp. This can stop the chemotherapy drug from affecting your hair.

Types of scalp cooling

There are two types of scalp cooling: the cold gel cap and the refrigerated cooling system.

Cold gel cap

This method uses a special cap that is filled with cold gel. It can be fitted easily and kept in place with Velcro[®]. Some people find the cold cap uncomfortable or heavy to wear. It can also give some people a headache. The cap needs to be changed

every 20 to 40 minutes to keep your scalp cool.

Refrigerated cooling system

The other type of scalp cooling uses a refrigerated cooling system. It pumps liquid coolant through a cap. This cap generally feels lighter than a gel-filled cap. You need to sit next to the machine while the cap is in place. This means that, unlike with a cold gel cap, you cannot walk about freely.

Things to consider

Both types of scalp cooling cap need to be worn for up to 30 to 40 minutes before your chemotherapy drugs are given, and for some time afterwards. You may have the cap on for a few hours in total. The chemotherapy staff can help you feel as comfortable as possible.

Scalp cooling is only effective when used with certain chemotherapy drugs. It is not always possible to know how well it will work until you try it. Scalp cooling is not suitable during treatment for some types of cancer. Some hospitals do not have facilities for scalp cooling. Your doctor or chemotherapy nurse can tell you if it is available and suitable for you.

Who can have scalp cooling?

Scalp cooling is not suitable if:

- You have a <u>blood (haematological) cancer</u>, such as myeloma, leukaemia or lymphoma. This is because there is a risk of cancer cells surviving in the blood vessels of the scalp. This means that the cancer may come back.
- You have already had your first course of chemotherapy without scalp cooling.
- You need very high doses of chemotherapy. Scalp cooling is less likely to work with high-dose chemotherapy.
- You are having continuous chemotherapy through a pump for several days.
- Your liver is not working as well as it should be. The chemotherapy drugs may stay in the body for longer than usual. It may not be possible to keep the scalp cold for long enough.
- You have severe migraines.

Having scalp cooling

For scalp cooling to work, your scalp temperature needs to be kept low while the chemotherapy drugs are in your blood.

This means that your scalp needs to be cold:

- for about 30 to 40 minutes before your chemotherapy drugs are given
- while you have the chemotherapy
- for some time afterwards.

If you are having your chemotherapy as an outpatient, scalp cooling may make your appointment longer. You may be at the hospital for up to three hours longer for each treatment.

Some people find that the gel-filled caps feel heavy to wear. You can usually walk about wearing the cap once your chemotherapy has been given. However, your cap will need to be changed every 20 to 40 minutes to keep your scalp cool, so you cannot go too far from the chemotherapy department.

Caps attached to the cooling machines generally feel lighter than the gel-filled caps. You will need to sit by the machine while the cap is in place, so you will not be able to walk around. However, the cap can be disconnected for short periods, for example if you need to use the toilet. These caps do not need to be changed as the machine continuously cools the liquid around your scalp.

You will probably feel cold when having scalp cooling. Wearing warm clothes and drinking hot drinks will help you feel warmer.

You may get a headache during scalp cooling, especially in hot weather.

Some people find scalp cooling uncomfortable, but it was an easy process for me. The cold cap looks a bit like a space helmet - it's also really cold!

Amanda

How effective is scalp cooling?

Scalp cooling can be effective in preventing or reducing hair loss. But you will not know how well it will work for you until you try it.

Even if you have scalp cooling, you may find that your hair still gets thinner. Unfortunately, some people who have scalp cooling still lose their hair. If you lose your hair, your nurse will usually talk to you about stopping the scalp cooling. This is to protect your scalp from the effects of the cold temperatures.

Some people find that gradually losing their hair while using scalp cooling is harder to cope with than a quicker hair loss without scalp cooling.

Scalp cooling only protects the hair on your scalp. Body hair may still fall out, including eyelashes, eyebrows, beards and moustaches, chest hair and pubic hair.

If you are interested in scalp cooling, talk to your doctor or nurse. They can tell you if it is available and suitable for you.

I tried the cold cap twice – it was very cold, but I wanted to try anything to keep my hair. Unfortunately, it didn't work for me.

Lurline

Thanks

We rely on a number of sources to gather evidence for our information. If you'd like further information on the sources we use, please feel free to <u>contact us</u> on: bookletfeedback@macmillan.org.uk

All our information is reviewed by cancer or other relevant professionals to ensure that it's accurate and reflects the best evidence available. We thank all those people who have provided expert review for the information on this page.

Our information is also reviewed by people affected by cancer to ensure it is as relevant and accessible as possible. Thank you to all those people who reviewed what you're reading and have helped our information to develop.

You could help us too when you join our Cancer Voices Network – <u>find out more</u> at: http://www.macmillan.org.uk/cancervoices

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