Dreadlocks

What’s the diagnosis?

A 17-year-old adolescent girl presented to our dermatology office with dreadlocks that were unrelated to the reason for her visit. She had mild scalp pruritus. Close inspection of the hair and scalp was performed.
The Diagnosis: “Pseudonits”

Dreadlocks are matted hairs formed into thick ropelike strands (Figure 1). As a chosen hairstyle, dreadlocks are worn by individuals of many different ethnic groups but are most commonly associated with members of the Rastafarian movement, or Rastas. Various techniques are used to form dreadlocks including backcombing (also known as teasing) in which the hair is combed toward the scalp to facilitate tangles and knotting or the neglect method in which the hair is not combed, brushed, or cut, becoming tangled and twisted as it grows long. Manicuring and perming techniques may be used to create the starting point for dreadlocks.

Telogen hairs are the hairs shed as part of normal hair cycling. The average person is estimated to lose 50 telogen hairs per day.1 With dreadlocks, the hairs are entangled distally, so when telogen hairs are released from scalp follicles, the shed hairs remain part of the locks. These “club” hairs have a bulbous white tip situated at the proximal end of the hair shaft (Figure 2) and should not be mistaken for the eggs of *Pediculus humanus var capitis*, hence the designation pseudonits.2 Hair casts, keratinous material surrounding the hair shafts when there is infundibular or perifollicular hyperkeratosis, also may resemble nits.3 Hair cast pseudonits can be distinguished from true nits by one’s ability to slide the hair casts freely along the hair shaft, whereas lice ova are cemented to the hair shaft and fixed in place.

REFERENCES

![Figure 1](image1.jpg)  
**Figure 1.** Dreadlocks are matted hairs formed into thick ropelike strands.

![Figure 2](image2.jpg)  
**Figure 2.** “Club” hairs with a bulbous white tip situated at the proximal end of the hair shaft (“pseudonits”).