SelfDecode™

Finasteride Response (Hair Loss)

Biohacker Report

REPORT CATEGORY

SKIN & BEAUTY

Sample Client

Report date: 15 January 2026

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Table of Contents

DISCLAIMER

This report does not diagnose this or any other health conditions. Please talk to a healthcare professional if this condition runs in your family, you think you might have this condition, or you have any concerns about your results.

Personal information

NAME

Sample Client

SEX AT BIRTH

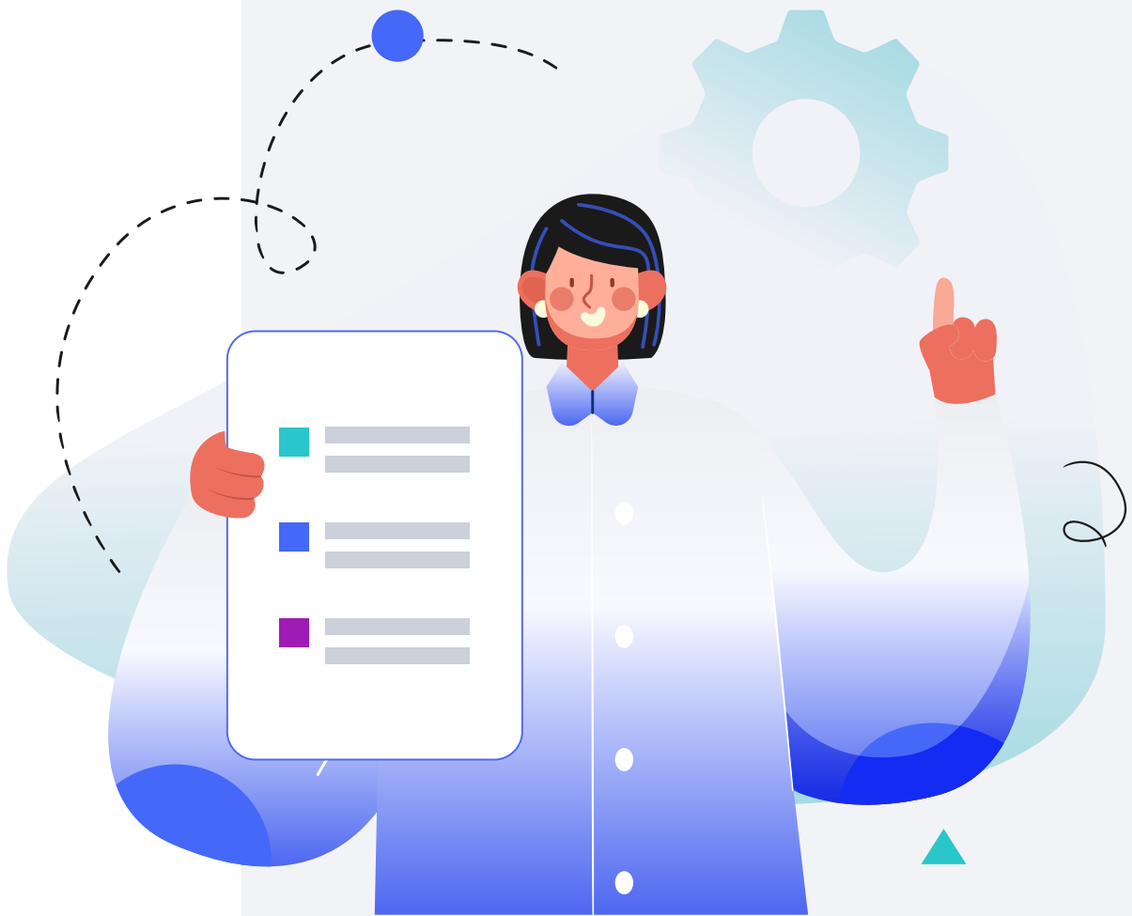
Male

HEIGHT

5ft 5" 165cm

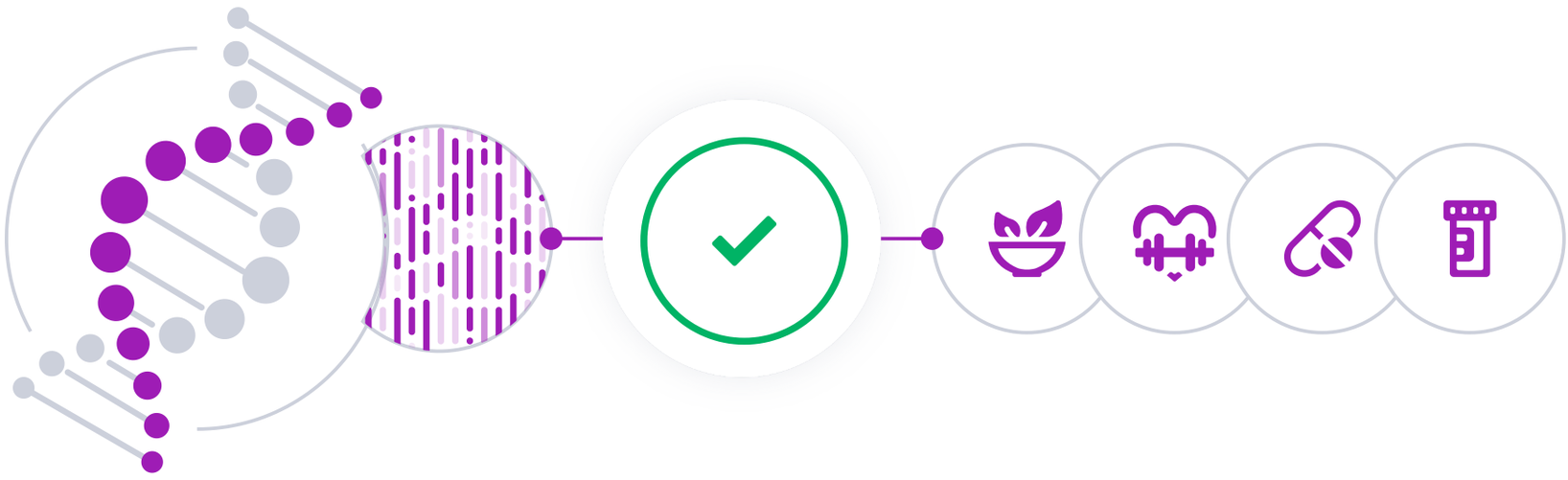
WEIGHT

137lb 62kg



How this works

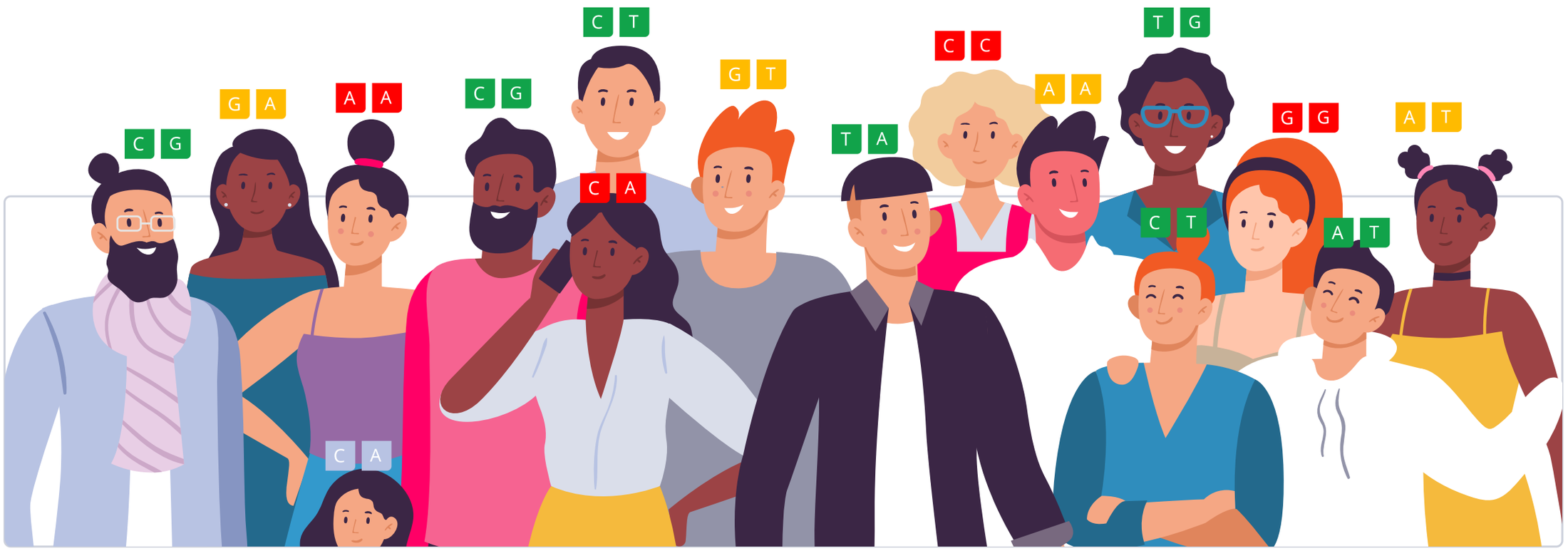
Our Wellness Reports analyze how your DNA influences your health.
We then use this analysis to give you personalized risk estimates and recommendations.



Similarly, our Trait Reports look at how your DNA influences your traits.

Your DNA is like an instruction manual — it contains a lot of information.
You can think of it as a blueprint for your body.

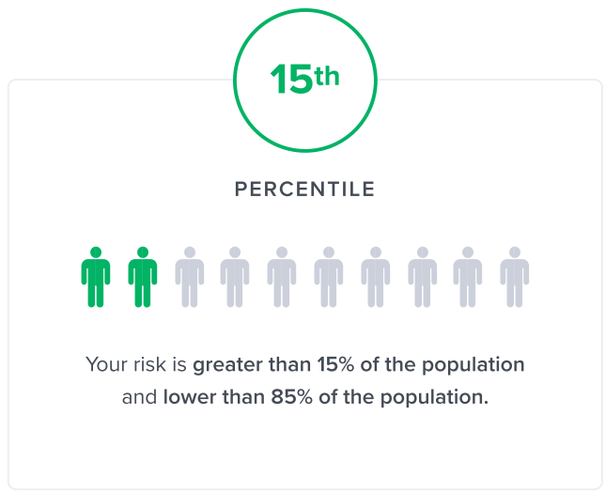
Genetic variants are parts of DNA that differ from person to person. Some can make you more vulnerable to certain health issues, while others may influence traits such as eye color.



We use artificial intelligence and machine learning to analyze all this information. We then summarize your results as a risk score or display it on a gauge.

When we give a risk score, the risk icon tells you if you are at a higher or lower risk compared to other people:

In total, we analyze up to 83 million genetic variants.



Genotype color info: AA You don't have any risk alleles | AA You have 1 risk allele | AA You have 2 risk alleles

Your risk is also displayed as a percentile. This will tell you how your risks compare to our sample population. The lower your percentile number, the lower your risk. The "50th percentile" would be an average risk.

Similarly, the gauge tells you your relative risk score compared to our sample population, or it indicates a specific trait or haplotype you are more likely to have based on your genetic variants.

When applicable, we also list top evidence-based recommendations that may help lower your risk. The focus is on recommendations that may be of benefit to you, based on your genetics.

Our recommendations come in four categories: lifestyle, diet, supplements and drugs.
The following icons tell you which category a recommendation falls into:

Our team of scientists also ranks each recommendation.
We rank based on impact and the strength of evidence in the medical literature.

Impact shows how strongly a recommendation will affect your health in a certain area.
Evidence is how much scientific support there is for the recommendation. Rankings are from 1 to 5 (low to high):

Impact

Impact scores range from 1-5. These scores reflect how much of an effect each recommendation can have. An impact score of 5 predicts the biggest effect.

When a recommendation affects something we can measure, we use those measurements to assign the impact score. For example, a recommendation that decreases cholesterol by 20% will have a higher impact score than one that decreases it by 5%.

Some recommendations affect things that we cannot directly measure, like stress or mood. For these, the impact score is based on how well they work relative to other recommendations and standard treatments. The best ones get the highest scores.

If there is a lot of research that shows a recommendation works especially well for your genotype, the impact score gets increased.

Recommendation Evidence

5 / 5

Recommendations that are considered effective and generally recommended by experts and medical bodies.

4 / 5

Recommendations that are considered likely effective and that have multiple independent meta-analyses and a great many studies supporting them.

3 / 5

Recommendations that are considered possibly effective and have many studies supporting them

2 / 5

Recommendations that have insufficient evidence, with two or several clinical trials supporting them, or many studies but with ambiguous results.

1 / 5

Recommendations that have insufficient evidence, with a single clinical trial, or with many studies most of which didn't find support for the recommendation.

0 / 5

No evidence in humans.

Genotype-specific Evidence

High-quality

Direct evidence that a recommendation helps more in people with your gene variant (many clinical trials, afew large clinical trials, or a meta-analysis).

Medium-quality

Direct evidence that a recommendation helps more in people with your gene variant (a few clinical trials or one large clinical trial).

Low-quality

Direct evidence that a recommendation helps more in people with your gene variant (a single clinical trial or more trials with inconsistent results).

Indirect

A recommendation may help more in people with your gene variant because it targets a specific gene or protein affected by your variant (e.g., MTHFR, dopamine).

In theory

A recommendation may help more in people with your gene variant because it targets a specific mechanism affected by your variant (e.g., inflammation, oxidative stress).

Some things to keep in mind:

- Genetics doesn’t play a considerable role in a condition or a trait.
- There is not enough research available to estimate a genetic predisposition.
- There are technical limitations to estimating or presenting a genetic predisposition.
- The topic is sensitive, and a genetic predisposition should only be estimated and presented by a healthcare professional.

Introduction

Hair loss, particularly androgenetic alopecia (AGA), is a common concern affecting millions worldwide. Among the available treatments, finasteride has gained significant attention for its effectiveness in combating hair loss.

Finasteride is an oral medication that works by inhibiting the enzyme 5-alpha reductase (type 2), which converts testosterone into dihydrotestosterone (DHT). Elevated levels of DHT are a primary factor in shrinking hair follicles, leading to hair thinning and eventual hair loss. By reducing DHT levels, finasteride helps to slow hair loss and, in many cases, promotes hair regrowth in men experiencing AGA [R].

However, like any medication, it comes with potential side effects, including reduced libido and mood changes, which are typically rare and reversible upon discontinuation [R].

While finasteride is FDA-approved for men, its use in women is less common and should be discussed with a healthcare provider. For those considering this treatment, consulting a doctor is essential to evaluate its suitability and create a comprehensive hair loss management plan [R].

Genetics of Finsteride Response

Genetics plays a crucial role in both the development of androgenetic alopecia (AGA) and the variability in response to treatments like finasteride. Two key genes of interest are *SRD5A2* and *AR*, both of which influence how the body processes and responds to androgens.

The *SRD5A2* gene encodes the type II 5-alpha reductase enzyme, which converts testosterone into dihydrotestosterone (DHT). Finasteride helps with AGA by blocking this enzyme. One *SRD5A2* variant, rs9282858, is linked to male-pattern baldness and may in theory affect finasteride response [R, R, R].

Some sources mention another *SRD5A2* variant, rs523349, as a potential factor in finasteride response. However, most studies haven't observed a link between this variant and AGA, DHT levels, or prostate health issues. This variant may have mild and complex effects that depend on ethnicity [R, R, R].

The *AR* (androgen receptor) gene also plays a significant role in AGA. Variations in AR androgen receptor sensitivity. Increased sensitivity to DHT is strongly associated with AGA severity. These genetic differences may thus affect finasteride response. Key variants include rs12558842 and rs2497938 [R].

A 2019 study revealed some genetic variants linked to dutasteride response. Dutasteride is a drug from the same class also sometimes used for AGA. These variants include [R]:

- *DHRS9* (rs72623193): Involved in both androgen metabolism and retinoid signaling
- *CYP26B1* (rs2241057): Involved in retinoic acid metabolism
- *ESR1* (rs3020314): The estrogen receptor gene
- *CYP19A1* (rs700519): Involved in estrogen synthesis
- *RXRG* (rs1128977): A retinoid receptor gene

BETTER RESPONSE

Predisposed to a better finasteride response based on 11 genetic variants we looked at

Your top variants that most likely impact your genetic predisposition:

GENE	SNP	GENOTYPE
AR	rs12558842	A
IGFBP3	rs10255707	CC
CYP19A1	rs700519	GG
ESR1	rs3020314	CC
CYP26B1	rs2241057	AG
RXRG	rs1128977	AG
CYP4V2	rs3736456	TC
SRD5A2	rs9282858	CC
AR	rs2497938	T
DHRS9	rs72623193	TT
HSD17B12	rs10838177	AA

The number of "risk" variants in this table doesn't necessarily reflect your overall result.

In theory, these variants may affect finasteride response as well, but the specific research is lacking.

Saw palmetto is a popular supplement for hair loss that also works by blocking 5-alpha reductase. In theory, people who respond well to finasteride may also respond well to saw palmetto, but there is no direct evidence to support this [R].

Your Recommendations

Your recommendations are prioritized according to the likelihood of it having an impact for you based on your genetics, along with the amount of scientific evidence supporting the recommendation.

You'll likely find common healthy recommendations at the top of the list because they are often the most impactful and most researched.

1 Topical Finasteride

2 Topical Saw Palmetto

1 Topical Finasteride

IMPACT 4 / 5

EVIDENCE 3 / 5

How to implement

Apply to a clean, dry scalp using the provided applicator. Create several partings to expose treatment areas and apply the solution (typically 0.1%) thoroughly. Massage gently into your scalp, focusing on thinning areas. Avoid washing your hair for at least 4 hours after application. Take monthly progress photos, as improvements can be gradual.

Description

Topical finasteride is an innovative approach to treating pattern hair loss that targets DHT production directly in the scalp. This treatment inhibits the enzyme that converts testosterone to DHT, the primary hormone responsible for male pattern hair loss. The topical formulation aims to provide similar benefits to oral finasteride while potentially reducing systemic side effects.

How it helps

Topical finasteride is gaining interest because it may provide similar benefits to oral finasteride while potentially reducing systemic exposure and side effects. Studies have shown it can effectively lower scalp DHT levels. Common concentrations range from 0.005% to 0.25%, often compounded with minoxidil [R, R].

Research suggests it may provide comparable results to oral finasteride, though more long-term studies are needed. Systemic absorption still occurs, but typically at lower levels than oral dosing [R, R].

Please note: Finasteride is a prescription drug. You shouldn't use it before consulting your doctor.

2 Topical Saw Palmetto

IMPACT 3 / 5

EVIDENCE 2 / 5

How to implement

To use topical saw palmetto, apply a small amount to the affected area twice daily. Be sure to wash your hands before and after applying the product. You may also want to wear gloves to protect your hands from the product.

Description

Topical saw palmetto is a natural supplement that is often used to treat hair loss and prostate enlargement. It is also being studied as a possible treatment for other conditions, such as acne and eczema.

How it helps

In people with hair loss, **applying products containing saw palmetto to the scalp may increase hair growth** [R, R].

Saw palmetto may help by decreasing DHT (androgen) in hair follicles [R, R, R].