



Doctors helping patients for more than 25 years

Helping Prevent Falls by Your Senior Patients

Falls represent a startlingly prevalent hazard for elderly individuals. In fact, more than one-third of patients 65 years of age or older experience a fall each year. Leap forward a decade and a half, and the numbers get even worse: Nearly half of all patients 80 years of age or older experience a fall in any given year. Thankfully, there are simple interventions and communication strategies that primary care doctors can use with their senior patients to reduce this risk.

In the case of falls, commonplace doesn't mean inconsequential. According to the CDC, one in five falls result in serious injuries, such as broken bones, subdural hematomas and head injuries. Falls cause 95 percent of hip fractures and are the most common reason for traumatic brain injuries. For senior patients, 10 percent of visits to the emergency room and 6 percent of urgent hospitalizations can be traced back to falls. All said and done, the financial cost of falls is more than \$30 billion dollars annually.

While being old in and of itself doesn't cause people to fall, several risk factors increase with aging. For example, muscle weakness, balance problems and reduced reflexes — all more common in older individuals — can lead to falls, as can sensory problems such as poor vision. Confusion, even momentarily, can result in a fall, as can sudden drops in blood pressure when someone stands up. Medications that cause dizziness or unsteadiness may also be partly responsible for falls. When a geriatric patient falls once, even if they do not get injured, they can become afraid of falling. The fear may cause a person to decrease their everyday activities, which can lead them to become less active. If this happens, they can become weaker and can increase their chances of falling.

Given the potentially serious consequences of a fall, it's reassuring to know that there are several intervention options that can help prevent them from occurring. According to WellMed Medical Director, Dr. Harpreet Patheja, "When it comes to my patients, especially my geriatric patients, I cannot communicate enough, communicate, and over-communicate. Education of both the patient and their family members is key to help preventing unnecessary injuries and complications."

A review of fall-related clinical data suggests that the most effective option is participation in a multifactorial falls risk assessment and management program. Considering that many falls occur as a result of a combination of factors (both internal and environmental), it's no surprise that a multi-pronged approach would also be the most successful way to prevent falls. While these kinds of programs may vary, they inevitably involve an individual assessment of fall risks and systematic follow-up on these risks, including a review of drugs and how they may affect the likelihood of a fall.

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Helping Prevent Falls by Your Senior Patients cont.

The same review also found that exercise can help reduce falls. Notably, both general aerobic exercise programs (such as cycling, aerobics and walking) and targeted exercise programs that focused on improving gait and balance proved helpful.

While not nearly as effective as a comprehensive fall management program or consistent exercise, efforts to eliminate hazards in the home may also be beneficial. Loose rugs, uneven flooring, stray electrical wires and steps can all increase the likelihood of a fall and should be addressed.

Unfortunately, passive fall education in the form of posters, pamphlets or even group seminars rarely leads to actual improvement in fall rates. And some elderly patients may be hesitant to initiate conversations with their doctor because they are anxious about remaining independent and fear added restrictions. By taking time to address these fears and offering practical solutions, such as recommending a specific exercise program or providing contact info for a professional who could help evaluate their home for fall hazards, primary care doctors are in a position to help patients remain safe without leaving them feeling overwhelmed. Committing to follow-up with a patient and involving family members in the conversation where appropriate can also help ensure that plans for fall intervention fully materialize.

Even a minor fall can have far-reaching consequences for older adults. By discussing these risks and working together to adopt fall-prevention interventions, primary care doctors can mitigate these risks and help keep their senior patients safer.