

Selective restraints and reduced medication could reduce nursing home falls says 4-year study

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Selectively restraining elderly residents and giving them fewer sleeping pills could significantly reduce falls, according to a survey of 21 nursing home units published in the January issue of *Journal of Clinical Nursing*.

The four-year study, led by the Karolinska Institutet, Sweden, analysed 2,343 reported falls and fractures in five municipal homes to find out how they related to fall risk assessments and the use of safety belts, wheelchairs and sleeping pills.

Researchers analysed incidents affecting 743 males and 1,908 females ranging from 40 to 105 years of age, with an average age of 72. All had been diagnosed with a physical illness or dementia and some suffered from both.

The researchers found that people using certain drugs were much more likely to experience a fall. Sleeping pills and anti-depressants made people 1.4 times more likely to fall, neuroleptics (antipsychotic drugs) made them 1.9 times more likely and sleeping pills with benzodiazepines (sedatives) made them 2.9 times more likely.

“In Sweden the use of medication has increased during the past ten years” explains lead author Edit Fonad RN MNSc from the Department of Neurobiology at the Institutet.

“Nine per cent of the population are aged 75 years or more, yet this group accounts for a quarter of the medication prescribed in the country. On average, this age group consumes six to 10 different types of medication.”

People who were in wheelchairs, or who had been assessed as a fall risk, were much less likely to fall. The fall risk was assessed as 0.7, with 1.0 being the normal average. Bed rails reduced this risk even further to 0.5 and the risk when belts were used was negligible at 0.09.

“Patients are often restrained for reasons that remain unclear and more often as a matter of routine rather than a reaction to a specific situation” says Edit Fonad. “These actions are often justified by concerns for patient safety or behaviour control.”

However, the authors point out that in using restraints healthcare professionals should take into account the need to maintain the patients’ independence if possible and the fact that restraints can themselves cause injuries.

“It is impossible to prevent every single fall and we cannot rule out the fact that freedom-restricting measures will continue to be used in the care of older people” concludes Edit Fonad.

“Our results suggests that freedom-restricting actions cannot eliminate falls totally, but they might be protective when used selectively with fewer sedatives, especially benzodiazepines.”

Source: Blackwell Publishing Ltd.

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