

Falls, depression and antidepressants in later life

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Older people are at high risk for falls and subsequent injuries. Those who have depression have an increased risk of falls and the medications they take for depression increase their risk even more, New Zealand and Australian researchers reported in the open-access journal *PLoS ONE*.

"People with depression and those taking antidepressants, especially SSRIs, are 50% more likely to fall than other older people," said Ngaire Kerse, lead author of the study and associate professor in the Department of General Practice and Primary Healthcare at the School of Population Health in the University of Auckland, New Zealand. "Falls are very common and risk factors for falls are easy to identify. We need to emphasise fall prevention during treatment of depression in older people."

In a study of 21,900 older Australians, over age 60, who responded to a survey sent out by their GP, 24 percent reported at least one fall during the last 12 months, 11% had injured themselves with falling and 8% had needed to see a doctor because of a fall.

About one quarter of the group reported symptoms of depression and 12% were taking some form of antidepressant. While using antidepressants was a significant risk for falls, the highest risk (66% increase in falls) was seen when older people used SSRIs, the most frequently prescribed antidepressant (6% of people took this medication).

"This risk associated with SSRIs has been reported before but not in such a large group of older people living in the community," Kerse said. "More than 60% of women aged over 80 with depression and taking an SSRI fell in the last year. This means that falls prevention strategies must really be thought of when prescribing antidepressants for older people."

Researchers also found:

- As well as depression, taking any antidepressant, ever having thought about suicide, having had a stroke, arthritis or more than 3 medical problems were associated with having more than one fall.
- Women were more likely to sustain injury than men.
- Those with any degree of depression were up to 70% more likely to have multiple falls and injury than those who weren't.

Researchers in the GP-DEPS study, a large study to test the effect of education on patterns of management of depression, surveyed all GPs in Australia and those interested entered a randomized controlled trial for doctors to improve treatment of depression. GPs asked all their older patients to complete the survey.

"Falls are important for all older people," Kerse said. "But in people with depression, falls add to the consequences of depression. There is an opportunity to offer fall prevention strategies as part of the initial treatment for depression in patients and as part of ongoing treatment."

Researchers suggest effective prevention programs might include lower leg strengthening and balance retraining as well as home assessment and modification programs which could reduce hazards. Home hazard assessment and modification include appropriate lighting, removing obstacles and installing transfer rails. These are proven fall prevention strategies. Family members also need to be involved in making modifications and taking action that will help prevent falls.

"We need to increase the awareness among family members on fall prevention," Kerse said. "More than one-third of patients with depression will fall and the consequences can be disastrous. Our findings emphasize the need to incorporate fall prevention strategies in stroke services."

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