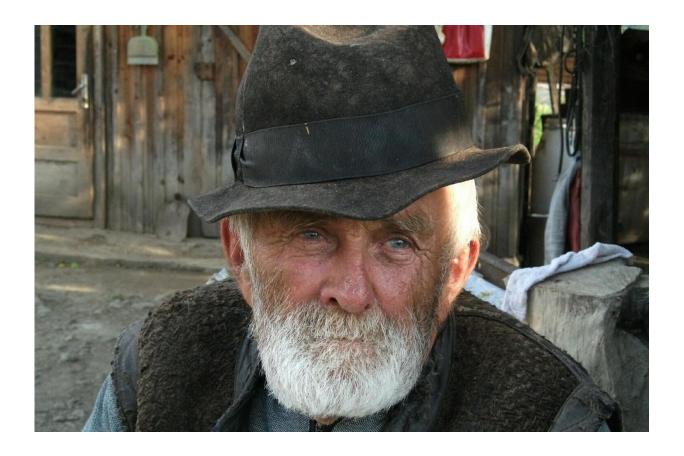


Study suggests being proud may protect against falls in older people

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Contrary to the old saying "pride comes before a fall", the opposite appears to be true, according to a study published in the Christmas issue of *The BMJ*.



Falls affect a large proportion of older adults, sometimes leading to injury and death, and the cost of falls to the government has been estimated at £1.1bn (€1.24bn; \$1.46bn) annually in terms of healthcare costs and lost work productivity.

Some falls can be prevented by targeted interventions in people who have displayed characteristics such as impaired mobility and gait, taking several medications at the same time, a history of previous falls, sedentary behaviour, advancing age, and <u>visual impairments</u>.

In addition, certain psychological factors have been shown to influence falling, such as fear of falling, pain, depression, and overconfidence.

The well-known saying "pride comes before a fall" (a paraphrase from the Bible) suggests that pride is another possible psychological predictor of falling.

However, there is no tangible evidence to show this is true, so a team of researchers from the universities of Stirling and Aberdeen and the Royal Alexandra Hospital in Paisley, Scotland, set out to investigate if the saying had any validity using the theory that higher levels of pride could be associated with increased risk of future falls.

The researchers used data from the English Longitudinal Study of Ageing (ELSA) - an ongoing, open, prospective study of a representative sample of men and women who, when recruited in 2002-03, were aged 50 or more and living in England.

They analysed data gathered in 2010-11 on more than 6,400 adults aged 60 and older, and follow-up data gathered in 2014-15 on more than 4,900 adults.

Participants were asked to what degree they felt proud in the past 30



days with a scale for responses and also whether or not they had fallen in the previous two years.

To the question of how proud they felt, 25.9% of respondents said "very much", 32.6% said "quite a bit", 24.3% said "moderately", 12% said "a little" and 5.1% said "not at all".

Analysis of the results showed that the odds of reported falls were significantly lower for people with high pride levels compared with those who had low pride.

High levels of pride recorded at the first point of questioning in 2010-11 reduced the odds of having had a reported fall in the two years before follow-up by 19%.

The association was the same even after the researchers took into account age, sex, household wealth, and history of falls.

The finding was, however, not significant after further adjustments were made for mobility and eyesight problems, the presence of a limiting long-term illness, a diagnosis of arthritis or osteoporosis, medication use, cognitive function, and pain and depression.

Nevertheless, the researchers conclude: "Contrary to the well-known saying 'pride comes before a fall', these findings suggest that <u>pride</u> may actually be a protective factor against falling in <u>older adults</u>. Future studies may seek to investigate the mechanisms underpinning this relation."

More information: Does pride really come before a fall? Longitudinal analysis of older English adults, *BMJ* (2017). www.bmj.com/cgi/doi/10.1136/bmj.j5451



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