

# Seniors, take steps to reduce your risk of falling

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(HealthDay)—One in four Americans 65 and older falls each year, with

some ending up in hospitals or even dying. But new research suggests that it's possible to avoid some of these serious injuries.

When seniors who are at risk of falling have a prevention plan, they're less likely to suffer a tumble-related hospitalization, the study found.

"We saw statistically significant change that reduced [fall risk](#) in people at risk of [falls](#) to almost the same as those who weren't at risk of a fall [at the start of the study]," said the study's lead author, Yvonne Johnston, an associate professor at the Binghamton University School of Nursing in New York.

"Considering the cost of one hospitalization for fall, avoiding just one hospitalization compared to the cost of the program makes it a worthwhile program," she noted.

In 2014, 29 million [older adults](#) reported a fall, and 7 million of those resulted in an injury, according to the study. Johnston said that many falls go unreported, so these numbers may underestimate the extent of the problem.

In 2016, falls were responsible for 29,000 deaths in the United States, the study authors said. Medical costs related to falls may be as much as \$50 billion.

The current study looked at a U.S. Centers for Disease Control and Prevention fall prevention initiative. It included screening to identify older people who are at risk of falling. This assessment looked at vision problems, [low blood pressure](#), medications, home hazards and functional ability such as leg strength.

The initiative also included interventions such as a strength and balance program, medication changes, corrective eyewear and [occupational](#)

[therapy](#).

For the study, researchers divided more than 12,000 older adults into three fall-risk groups. One group was at-risk and received the "Fall Plan of Care" intervention; another group was determined to be at-risk but received no formal plan; and the final group wasn't at risk of falling.

The study found that at-risk adults who received the intervention had similar odds for falling as adults who weren't at risk of a fall, and 40 percent lower odds than those at risk without a fall prevention plan.

Johnston said this type of program needs to be individualized because some people need a more structured program, while others benefit from things like tai chi.

Becky Turpin, director of home and community safety for the National Safety Council, said individualizing fall prevention for seniors is crucial.

"As we age, there are natural changes that occur in the body, but that doesn't mean that falls are a natural part of aging. There are things we can do—if we're aware of the issue—to account for changes, like occupational therapy for lower [leg strength](#) or cataract surgery to improve vision," she said.

Turpin said it's important to talk to your doctor about your risk of falling. Your medications should be reviewed to make sure you're not taking something that might increase your fall risk. Some medications can make you dizzy or sleepy.

It's also important to get your vision checked annually. "Cataracts can have huge implications for fall [risk](#)," Turpin said.

Seniors and their loved ones should take a good look at the home and

how people live their lives.

For example, if a senior is afraid of falling on the stairs, try to figure out why. Is there trouble with depth perception? Is it hard for them to see the stairs well? These problems suggest an eye exam might be in order. If they have trouble lifting their leg up each stair, physical therapy might help.

Some seniors still get on a step stool to reach serving dishes in a high cabinet. "Could you rearrange the kitchen to make the things you need more accessible?" Turpin suggested.

It's also important to ask your senior if he or she has already fallen. "There's a fear of telling anyone. They don't want to scare family members, and they're worried about losing their independence. But falls are an indication that something is going on, and that's when to intervene," Turpin said.

The study was published recently in the journal *Gerontologist*.

**More information:** Yvonne Johnston, Dr.Ph., M.P.H., M.S., associate professor, Binghamton University Decker School of Nursing, State University of New York; Becky Turpin, M.S., director, home and community safety, National Safety Council; Sept. 20, 2018, *Gerontologist*, online

Learn where to find community-based fall prevention programs from the [National Safety Council](#).

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