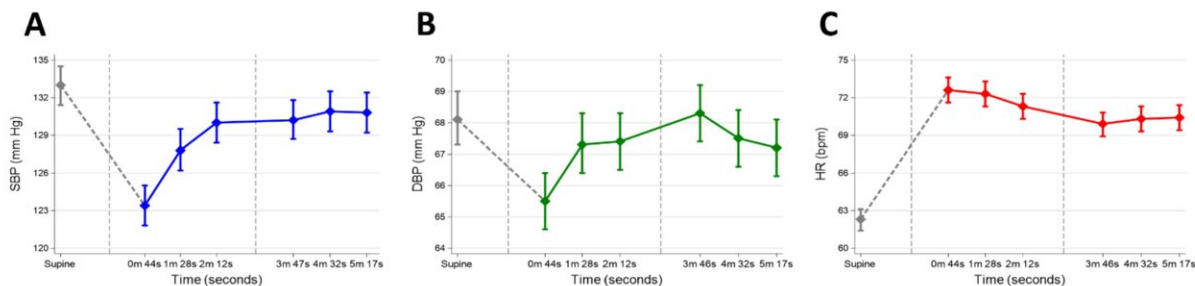


Study highlights optimal timing for assessing orthostatic hypotension in older adults and its impact on fall risk

November 6 2023



Change in SBP (A), DBP (B), and HR (C), over 6 measurements after standing from supine position. Horizontal axis represents average time after standing for respective measurements (e.g., M1 = 0m 44s). Leftmost dashed line indicates transition from supine to standing. Rightmost dashed line indicates cutoff between early and late BP and HR measurements (i.e., 3 minutes after standing). NA = NB = 491 participants. NC = 488 participants. Credit: *Journal of the American Geriatrics Society* (2023). DOI: 10.1111/jgs.18573

A new study, "[Timing of Orthostatic Hypotension and its Relationship with Falls in Older Adults](#)," has brought critical insights into the assessment of orthostatic hypotension, a drop in blood pressure commonly found among older adults when transitioning from a sitting or lying position to a standing position that can lead to dizziness and falls.

Published in the *Journal of the American Geriatrics Society* and based on a secondary analysis of the "Study to Understand Fall Reduction and Vitamin D in You (STURDY)," this study examined the prevalence of orthostatic hypotension at different time points after standing in a population of older adults, and it also explored the association between orthostatic hypotension and fall risk.

Key findings from the study, which involved community-dwelling adults aged 70 and older, revealed that orthostatic hypotension was most prevalent and symptomatic within 1-2 minutes after standing. However, the study also demonstrated that orthostatic hypotension assessments conducted after 4 to 6 minutes of standing were more informative for predicting fall risk.

According to Lewis A. Lipsitz, MD, Director, Hebrew SeniorLife Marcus Institute for Aging Research and Hebrew SeniorLife's Chief Academic Officer, "The findings have important implications because falls represent a major cause of serious, life-threatening injury in [older adults](#), and understanding the timing of orthostatic hypotension assessments can help clinicians identify those at highest risk and institute appropriate interventions to reduce falls and related injuries."

More information: Aldis H. Petriceks et al, Timing of orthostatic hypotension and its relationship with falls in older adults, *Journal of the American Geriatrics Society* (2023). [DOI: 10.1111/jgs.18573](https://doi.org/10.1111/jgs.18573)

Provided by Hebrew SeniorLife Hinda and Arthur Marcus Institute for Aging Research

Citation: Study highlights optimal timing for assessing orthostatic hypotension in older adults and its impact on fall risk (2023, November 6) retrieved 21 May 2024 from

<https://medicalxpress.com/news/2023-11-highlights-optimal-orthostatic-hypotension-older.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.