

FALL RISKS AND SENIORS

Are you afraid of falling? You are not alone. Older adults are often quite worried about falls, and with good reason. The Center for Disease Control estimates that 1-in-3 seniors fall at least once every year. In 2013, falls led to 2.5 million emergency room visits and over 700,000 hospitalizations. The chances of falling and of being seriously injured in a fall increase with age. It can take a serious toll on your quality of life and independence.

Even when a fall doesn't cause a serious injury, it can be scary. In addition, one of the strongest risk factors for future falls is having had a previous fall. For these reasons, it is recommended that you are screened for high fall risk.

What increases your risk for falling?

- Do you have health or vision problems or take medications?
- Are there objects around your house or yard that you must walk around, step over, or reach for?

ALL of these can make you more likely to fall.

Here are some common causes of falls in older adults:

HEALTH ISSUES You are more likely to lose your balance or trip and fallif:

- You cannot see well.
- You have dizzy spells, get dizzy easily, or have problems with balance.
- You sometimes get confused.
- You have weakness, pain, or loss of feeling in a leg or foot.
- You have recently had surgery.
- Blood pressure issues: Blood pressure that drops when you stand or change position is called postural hypotension. This is quite common with older adults, especially if you are on medication to lower blood pressure.



 If you have a blood pressure monitor at home, take your blood pressure while sitting and standing write them down. The more readings you get, the better sense the doctor will have of your usual blood pressure.

OTHER things that can cause falls include:

- Poor lighting
- Uneven or slippery surfaces
- Clutter, furniture, or small pets in your path.
- Objects that are just out of reach, either too high or too far away.

Certain Type of Medications known to increase falls:

- Sedatives and tranquilizers: Ambien, Ativan, Xanax.
- Antipsychotics: Zyprexa, Risperidal, Seroquel.
- Over-the-counter sleep or night-time drugs: Nyquil or the "PM" version of common painkillers
- Any medication that causes drowsiness: including sedating antihistamines, and certain types of drugs for an over-active bladder, and also for vertigo, nausea, nerve pain and depression.

If you are taking any of the above medications, do not panic and do not stop anymedications without talking to your doctor. Do plan on scheduling a medication review. It often helps to specify that you really want to cut back on any medications that increase fall risk, unless the drug is essential to controlling a symptom or condition.



FALL PREVENTION

How might a fall change your life? If you fall and can get right up, then the fall may not have caused any long-term problems. But as you get older, falls are more likely to cause serious problems. A broken bone or a head injury can lead to big changes in lifestyle and quality of life.

You can take steps and make simple changes to protect yourself from a life-changing fall:

- Keep your home free of clutter.
- Be aware of things you can trip over such as:
 - Animals, small rugs, uneven flooring, and unsecured bedding.

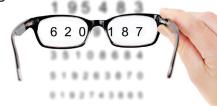


- Repair loose carpet. Use nonskid floor wax, and wipe up spills right away, especially on ceramic tile floors.
 - Place furniture and electrical cords out of walking paths.
 - Keep your house well lit. Use night-lights keep the overhead light on at night in hallways and bathrooms.
- Install sturdy handrails on both sides of stairs.
- Place a slip-proof mat inside and outside the tub.
- Install grab bars inside and outside your shower or tub and near the toilet.
- Use a shower chair or bath bench when you bathe.
- Get a portable phone or medical alert device.
- Store items within easy reach, and place them so that you do not need to reach overhead for them. Reaching too far can make you fall.
- Keep a flashlight with new batteries by your bed.

- Walkers, canes and other assistive devices should be kept in good condition and used at all times rather than using furniture or walls for balance.
- Know the possible side effects of any medicine before
 you take it. If you know that a medicine makes you dizzy or sleepy,
 plan to rest, and don't do a lot of walking. Talk to your doctor to see if
 you can take a lower dose or try a different medicine.
- Exercise regularly to improve your strength and balance. Talk to your doctor to have a gait and balance evaluation by a physical therapist.
- Have your vision and hearing checked each year, or anytime you notice a change.

Learn to move wisely

- Stand up slowly.
- If you have a problem with balance, walk slowly.



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- Wear low heel shoes that fit well and give your feet good support can help. Use foot wear with non-skid soles.
- If you are very weak or dizzy, have someone help you get up, walk and bathe.
- If one of your legs is stronger than the other, get into a tub or shower with your weaker leg first. Get out with your stronger side first.
- If your doctor or physical therapist suggests it, use a cane or walker. Make sure you know how to safely use it and that it is the right size for you. Be aware that a cane or walker can slip out from under you on smooth, wet surfaces.

Speak to your doctor if:

- You have suffered a fall in the last 12 months.
- You have had a problem with balance or walking.
- You use a cane or walker.
- Your blood pressure is either too high or too low.
- You exercise regularly.
- You have trouble with your hearing or vision.





The content of this brochure is for informational purposes only. It is not intended to replace evaluation by a physician.

If you have questions or medical concerns, please contact your primary care provider.