

Falls in older people

The problem of falls in older people

Falls are the most common accidents in older people and most serious in people over 65 years as our reflexes deteriorate with age. It is a particular problem in people with brittle bones—osteoporosis. About 5% of falls result in a fracture.

How common is the problem?

About 30% of people over the age of 65 experience at least one fall per year, with 1 in 4 of these having a significant injury. More falls occur in the evening and at night due to decreased light and tiredness.

Common causes of falls

General physical factors

- Increasing age
- Poor physical function
- Eyesight—impaired vision
- Impaired lower limb strength
- Impaired balance and walking
- Low morale/depression
- Drug usage especially sedatives
- Poorly supporting footwear

Medical conditions

- Medication
- Cardiovascular disease
- Low blood pressure
- Stroke
- Eyesight disorders (e.g. cataracts)
- Poorly controlled diabetes and epilepsy
- Arthritis/foot disorders
- Parkinson's disease
- Balance disorders (e.g. Meniere's Syndrome)
- Psychological conditions
- Dementia or delirium

Hazards in the home

- Slippery surfaces (e.g. wet floors, shower, bath)
- Loose mats
- Uneven paving or pathways
- No handrails on stairs
- Poor lighting
- Loose objects on floor (e.g. children's toys)

What are the risks?

Risks include fractures especially of the femur or spine, head injuries particularly falling against something sharp and dangerous, and burns against a heating appliance or boiling water.

What should be done to prevent falls?

Medication

Be aware that taking medicines can put you at risk because many can make you giddy and reduce your alertness. This effect is aggravated by taking alcohol. Discuss the affect of medication with your doctor and pharmacist.

Physical strategies

Falls can be prevented by the following rules, irrespective of age:

- *Walking aids.* If you are unsteady on your feet (even slightly) use a single point stick or a walking frame.
- *Footwear.* Wear good-fitting shoes or slippers with non-slip soles; avoid long or loose shoelaces.
- *Eyesight.* If you require glasses, make sure you wear them. Don't walk around with reading glasses, especially on stairs (take them off when moving around).
- *Good lighting indoors.* Avoid wandering around in the dark. Make sure you have a bedside lamp or night light in the bedroom for getting out of bed at night. Also have a good torch by the bedside.
- *Good lighting outdoors.* Make sure that steps and stairs are brightly lit. White paint or flush metal edges on the corners of the steps are useful.
- *Supportive railings.* Install strong railings along all indoor and outdoor steps.
- *The bathroom.* Fit secure handrails in easy reach near the bath, shower and toilet. Use non-slip mats alongside and inside the bath or showers. Use liquid soap in preference to soap bars.
- *Climbing.* Avoid standing on chairs, stools or ladders to reach things. Store clothes and frequently used items within comfortable reach.
- *Loose mats.* Ensure that carpets and other floor coverings are secure around the edges. Avoid loose mats or rugs, especially on shiny, polished floors.
- *Loose wires and cords.* Do not allow wires or cords from electrical appliances to be exposed or run loosely along the floor.
- *Clutter.* Make sure rooms are kept as clutter free as possible especially where older people move around. Children's toys are a particular hazard. Be particularly careful of pets especially dogs in the house (and also outside).

Physiotherapists and occupational therapists

These therapists can provide valuable advice about aids and safety in the home. Physiotherapists can assess and improve balance skills, flexibility and activity of people including those with disorders such as Parkinson's disease.