

Preventing Accidents and Falls

Accidents and falls frequently are overlooked as major health problems associated with aging. However, both the number and severity of falls increase with age, and falls are the leading cause of fatal and nonfatal injuries for older adults. Each year almost 3 million older adults are treated in emergency departments for fall injuries, and more than 800,000 are hospitalized for these injuries.

Many factors increase the risk of falls among older adults. Some of these are associated with the aging process, while others are associated with medical disorders (e.g., diabetes or stroke) that occur more frequently in old age. Such disorders can cause muscle weakness, sensory deficits, or balance problems that can lead to postural and gait instability. In addition, adverse reactions to many commonly prescribed medications can result in inattention, drowsiness, dizziness, or weakness and can directly cause a fall. Finally, many falls are the result of environmental factors that could be prevented if proper home inspections and modifications are made.

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The Risks of Ignoring Information on Accidents and Falls

Besides the risk of severe head trauma and spinal cord injury that can be fatal, fall injuries can lead to fractures and brain injuries that often seriously limit a person's ability to carry out normal, everyday activities. Many people who have fallen and suffered injuries experience permanent problems with mobility, and one-year mortality rates among older persons following a hip fracture are likely 20-30 percent. In addition, the fear of falling that often follows a major injury may result in a reduction in activities, leading to muscle weakening and, paradoxically, possibly further increasing the risk of future falls.

What Can Be Done to Reduce the Risk of Accidents and Falls?

Fortunately, there are a number of changes that can be made in the living environments of older adults to reduce the risk of accidents and falls. These include:

- Removing throw rugs
- Tacking down large rugs and carpeting completely
- Using nonslip polish on floors
- Keeping objects off the floor
- Installing handrails along both sides of the stairs
- Providing good lighting on steps, landings, and any other particularly dark areas
- Placing light switches in easily accessible locations or using motion-sensor lighting
- Using nightlights in bedrooms, bathrooms, and hallways
- Using nonslip rubber mats in showers or baths

- Installing handrails for baths and toilets
- Keeping water off the floors
- Using adaptive equipment for bath or showers (e.g., seats or benches)
- Installing a raised toilet with side rails or using a bedside commode
- Keeping food and frequently used items where they can be reached without using a stool
- Using assistive devices (e.g., canes or walkers)
- Being aware of small pets that can be tripping hazards

Other steps you can take to lower your risk of falling include:

- *Exercise to improve your balance and strength.* Lack of exercise leads to weakness and can increase your chance of falling. Practice exercises that improve balance and make your legs stronger to lower your risk.
- *Review your medications.* As you get older, the way medications work in your body can change. Medicines or combinations of medicines can make you sleepy or dizzy and cause you to fall. It is important to report these symptoms to your health care provider. Ask your health provider or pharmacist to review the medicines you take –even the over-the-counter medicines. It might be helpful to bring all of your pill bottles with you to your next appointment. You also may want to ask if you would benefit from vitamin D.
- *Have your vision checked.* Poor vision can increase your chances of falling. See an eye doctor at least once a year to have your vision checked and to update your eyeglass prescription. If you do get a new prescription, especially if you are switching from single-vision eyeglasses to bifocals or progressive lenses, take extra caution when walking or using steps the first few days, since it can take time to adjust to the changes in your vision. Looking through the bottom lenses of bifocals may distort your perception. It is best to discuss with your optometrist if you should have separate glasses for distance and reading.