

Don't Fall – Leading the Way to Other Health Problems

It's easy when you're healthy to think you'll be this way always. Even as people reach their 60's, 70's, 80's and beyond, good health continues to be the key. It's a part of life that can be taken for granted until there's a fall. It may be tripping on a hose in the yard, missing a step, feeling dizzy with new medication or slipping on a wet floor. It may feel like an isolated incident but this very first fall may be the beginning of falls that lead directly to medical problems that ultimately lead to loss of independence. It's for this very reason that training and studies are being conducted nationally to address this growing issue for older adults. If the cycle of falls can be stopped or delayed, elders can safely continue living at home.

It may be surprising to learn that falls usually happen on the same level not falling down steps or falling off a ladder. When a person takes an initial fall, she/he will from then on be more likely to develop a history of falls. Even if the first fall leaves the person uninjured, it's important to recognize that this can be a recurring problem that needs to be addressed promptly. Often, evaluating the home for safety issues as simple as scatter rugs, extension cords, steps without a railing, and other easily remedied problems may stop the falls before they become a problem.

When individuals take a fall, it can insert doubt as to the ability to walk correctly, be safe, and begin to wonder what the future holds. It's important to be proactive and discuss the fall with your doctor. Understand why the fall happened. Consider the following risks that may cause a fall or a series of falls:

- Cardiovascular problems such as dysrhythmia and hypotension.
- Neurological problems like Parkinson's disease or seizure disorders
- Orthopedic problems
- Sensory or perceptual deficits including vision, hearing loss, dizziness or vertigo.
- Loss of strength, muscle mass, decreased coordination and inability to raise feet fully
- Inability to remember safety and how to walk due to dementia or other memory deficits.
- Medication with side effects affecting stability and coordination.
- Pain, fear of fall, sleep disorders and incontinence
- Surgery rehabilitation (Briggs' Corporation, Special Section on Fall Prevention. www.BriggsCorp.com.)

Once the risk of falls is identified, there are steps that can be taken to stop the cycle from continuing. Have a safety assessment done in your home. This professional from a geriatric care management or home health agency will identify hazards and make recommendations for safety features to help reduce or eliminate future falls. Most recommendations are easily remedied without considerable expense.

- Talk to your doctor about ordering a physical therapy (P/T) evaluation. Therapists can help with strength conditioning and techniques in sitting, standing and balance.
- Limit activities that put you at a higher risk. Recognize the danger of a fall causing a broken hip that can lead to admittance into a nursing home.
- If you live alone, consider purchase of an emergency response system to get emergency help if you should fall inside or outside your home. These systems available locally are affordable and can be a life saver in an emergency.
- Be willing to learn new ways and techniques for safety so the risk of falls is lessened.

As the population ages, the percentage of risk rises as well. By 80 years old, the increase of fall-related deaths is the greatest. Many falls are preventable or can be anticipated. The *Journal of the American Society on Aging* states, "falls among older adults...are associated with significant mortality, complications, reduced functioning, premature nursing-home admissions and direct medical costs." When assessed early on, the cycle can be broken. Take the initiative and address the problem before it's too late.

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