

# Older Adult Falls Prevention and Management

## What Primary Care Clinicians Can do to Reduce Injury and Death

### THE CHALLENGE

Falls are the leading cause of fatal and non-fatal injuries in older adults. <sup>1</sup>

**3 Million**

Older adults are treated in emergency departments for fall injuries each year. <sup>1</sup>

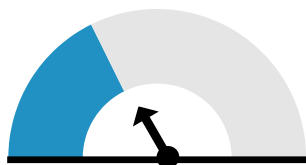


One in four older adults fall every year. <sup>1</sup>

In 2018, more than

**32,000**

older adults died as a result of a fall. <sup>1</sup>



Exercise reduces falls by **23%**. <sup>2</sup>



In one year, medical costs for falls are about **\$50 billion**. <sup>1</sup>

Death rates from falls have increased about

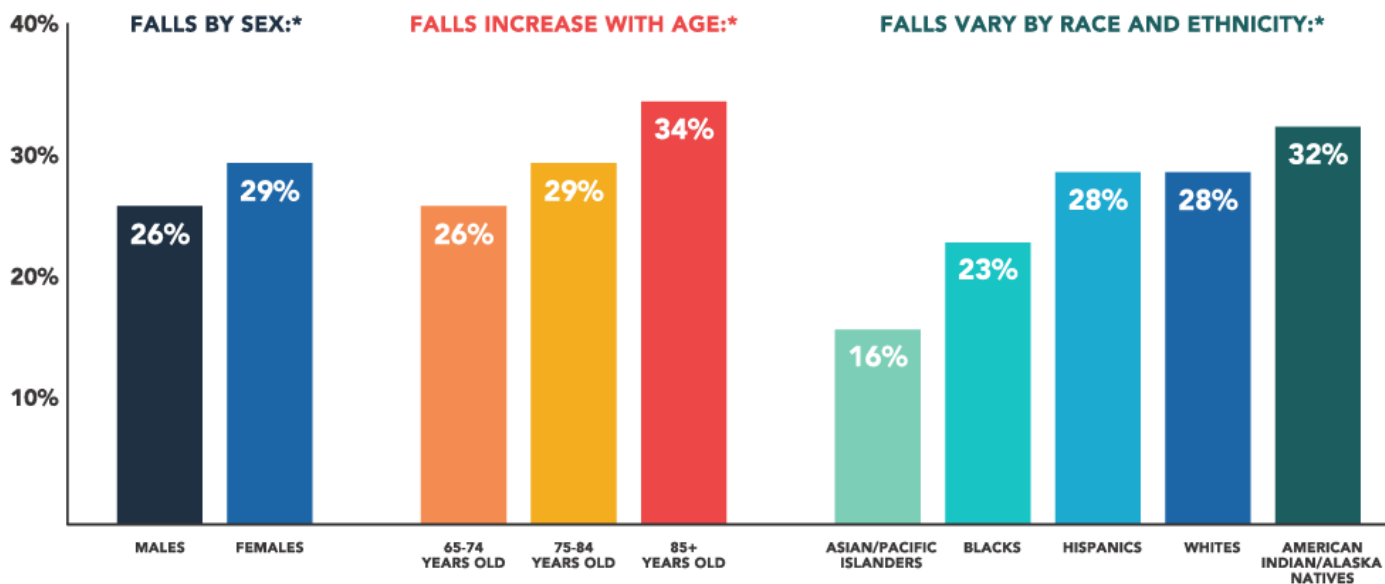
**↑ 30%**

in the last decade. <sup>1</sup>

### WHO IS AT RISK

All adults, aged 65 and over, are at risk for a fall.

Older adults more likely to fall include females, those 85 and older, and American Indian and Alaska Natives.



\*Percent of older adults who reported a fall

Adapted from the Centers for Disease Control and Prevention (CDC). (2020) <sup>3</sup>

## KEY MESSAGES



### KEY MESSAGE 1

Use the TUG Test to determine which patients are at high risk of falling due to impaired gait, mobility, or balance.



### KEY MESSAGE 2

Conduct a multi-factorial assessment to determine which additional risk factors may contribute to a potential fall.



### KEY MESSAGE 3

Create a tailored intervention based on the identified risk factor(s).



### KEY MESSAGE 4

Individualize an exercise program to improve strength, gait, and balance.

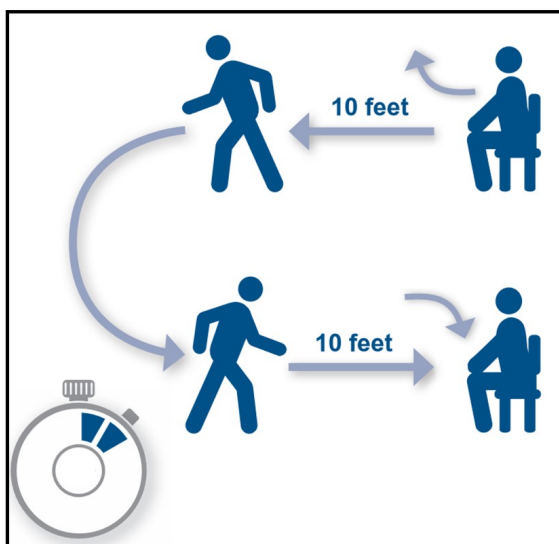
## KEY MESSAGE 1



Use the TUG Test to determine which patients are at high risk of falling due to impaired gait, mobility, or balance.

### Timed Up and Go (TUG) Test

A systematic approach to assessing fall risk.<sup>4</sup>



### Time patient while they:<sup>4</sup>

- Stand up from a chair
- Walk forward 10 feet
- Turn
- Walk back to the chair at their normal pace
- Sit down

**If the average time is above 12 seconds, the patient is at high risk for falling.**

## KEY MESSAGE 2



**Conduct a multi-factorial assessment to determine which additional risk factors may contribute to a potential fall.**

### Have a Conversation With Your Patients About Risk

*Less than half of older adults who fall talk to their provider about it. Providers can proactively ask about falls.*

**Each year, ask your older adult patients:**<sup>3</sup>

- Have you fallen in the past year?
- Do you feel unsteady when standing or walking?
- Do you worry about falling?

### RISK FACTOR CHECKLIST:

<sup>5</sup>

- HISTORY OF FALLS:** Location & frequency, injuries, symptoms
- ENVIRONMENTAL HAZARDS:** Tripping hazards at home, flooring issues, stairs, etc.
- MEDICAL CONDITIONS:** Heart rate & rhythm issues, foot problems, cognitive impairment, substance use disorder, etc.
- MEDICATIONS:** Four or more medications, prescriptions, supplements, opioids, etc.
- GAIT, STRENGTH, & BALANCE:** Poor TUG Test result or difficulty balancing
- VISION:** Cataracts, no eye exam in over one year, etc.
- POSTURAL HYPOTENSION:** A decrease in systolic BP  $\geq 20$  mm Hg, or a diastolic BP of  $\geq 10$  mm Hg, lightheadedness, or dizziness from lying to standing
- OTHER RISK FACTORS**

### Fall Risk Factors are Additive

Number of risk factors*	Chance of falling in one year
0	 1 person in 10 will fall
1	 2 people in 10 will fall
2	 3 people in 10 will fall
3	 6 people in 10 will fall
4 or more	 8 people in 10 will fall

Adapted from Mary E. Tinetti, MD (2020)<sup>6</sup>

## KEY MESSAGE 3



Create a tailored intervention based on the identified risk factor(s).

### Tailoring an Intervention

Reduce identified risk factors using effective strategies:<sup>7</sup>

**HISTORY OF FALLS** Refer to physical therapy or evidence-based exercises

**MEDICATIONS** Refer to a pharmacist to review and optimize a patient's medications

**VISION IMPAIRMENTS** Refer to an optometrist

**POSTURAL HYPOTENSION** Review blood pressure (BP) target and adjust BP medications as needed

**FEET/FOOTWEAR ISSUES** Educate on shoe fit, traction insoles, and heel height

**HOME HAZARDS** Refer to an occupational therapist to conduct a home evaluation

## KEY MESSAGE 4



Individualize an exercise program to improve strength, gait, and balance.<sup>8</sup>



Tai Chi<sup>9</sup>



Strength and balance exercises<sup>9</sup>



Aerobic exercises<sup>9</sup>



Chair-based activities<sup>9</sup>

**28%**

reduction in rate of falls from interventions that include multiple types of exercise.<sup>2</sup>

**↓ 42%**

reduction in rate of falls with exercise interventions with a total weekly dose of 3+ hours.<sup>2</sup>

# ADDITIONAL RESOURCES

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- **CDC STEADI:**

- **Patient & Caregiver Resources:** <https://www.cdc.gov/steady/patient-resources/index.html>
- **Clinical Resources:** <https://www.cdc.gov/steady/hcp/clinical-resources/index.html>
- **Centre for Effective Practice (CEP) Fall Prevention and Management:** <https://tools.cep.health/tool/falls-prevention-and-management/>

## References:

- (1) CDC. Older Adult Fall Prevention: Facts About Falls: [https://www.cdc.gov/falls/data-research/facts-stats/?CDC\\_AAref\\_Val=https://www.cdc.gov/falls/facts.html](https://www.cdc.gov/falls/data-research/facts-stats/?CDC_AAref_Val=https://www.cdc.gov/falls/facts.html)
- (2) Evidence on physical activity and falls prevention for people aged 65+ years: systematic review to inform the WHO guidelines on physical activity and sedentary behaviour: <https://ijbnpa.biomedcentral.com/articles/10.1186/s12966-020-01041-3>
- (3) CDC. STEADI: Older Adult Falls Fact Sheet: <https://www.cdc.gov/steady/pdf/steady-factsheet-talkingwpatients-2023-508.pdf>
- (4) CDC STEADI Timed Up & Go (TUG) Assessment: <https://www.cdc.gov/steady/media/pdfs/STEADI-Assessment-TUG-508.pdf>
- (5) CDC STEADI Fall Risk Factors Checklist: <https://www.cdc.gov/steady/media/pdfs/STEADI-Algorithm-508.pdf>
- (6) Figure reproduced with permission, Mary E. Tinetti, M.D. ©Copyright 2005. Collaboration for Fall Prevention.
- (7) CDC STEADI Preventing Falls in Older Patients Pocket Guide: <https://www.cdc.gov/steady/media/pdfs/steady-pocketguide-508.pdf>
- (8) Interventions to Prevent Falls in Community-Dwelling Older AdultsUS Preventive Services Task Force Recommendation Statement: <https://jamanetwork.com/journals/jama/fullarticle/2819573>
- (9) A CDC Compendium of Effective Fall Interventions: What Works for Community-Dwelling Older Adults: [https://www.cdc.gov/falls/pdf/cdc\\_falls\\_compendium-2015-a.pdf](https://www.cdc.gov/falls/pdf/cdc_falls_compendium-2015-a.pdf)



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