

Falls and Older Adults

Falls are the leading cause of deaths related to injury among people 65 years and older. More than one-third will fall each year; two-thirds of those who fall will fall again within 6 months. Although falling is not normal, older people are more likely to fall because of sensory changes, bones that are less dense, slower reflexes, and reduced strength. These changes affect walking and balance. The January 20, 2010, issue of *JAMA* includes an article about care of older adults who fall.

FACTORS INCREASING RISK OF FALLS

Falls have many causes. Common causes include gait and balance problems, neurological and musculoskeletal problems, use of medications affecting balance, impaired thinking and memory, impaired vision, and environmental hazards (slippery floors, uneven surfaces, stairs, poor lighting, loose rugs). Additionally, many older adults fail to exercise regularly, resulting in poor muscle tone, decreased strength, and loss of bone mass and flexibility, which make it easier to fall.

MEDICAL CARE

If you do fall, you should be seen by a doctor. The American Geriatrics Society recommends that any fall needs evaluation. Head injuries may not cause symptoms right away and are especially important to evaluate promptly.

PREVENTION

Recommendations for fall prevention focus on 4 areas. First, all older adults should participate in regular exercise to improve balance and strength. One useful activity is **tai chi**, which increases flexibility, posture, and strength. Second, all older adults should review their medications with their physician. Third, poor vision is linked to falling; all older adults should have regular vision checkups. Finally, the CDC has published a checklist to "fall-proof" your home. A short version of this list includes

- Remove rugs or firmly fasten them to the floor.
- Move furniture so the path is clear.
- Clear the floor of electrical wires by coiling them, or add another outlet.
- Keep areas well lit, adding lights in dark places and keeping bulbs changed; put a night-light in the hallway so that a path from your bed to the bathroom is lit.
- Place working handrails on both sides of stairs and grab bars next to the toilet or inside the bathtub.
- Move items on high shelves to cabinets. Those used most often should be stored at about waist level.
- Get up slowly after sitting or lying down.
- Wear shoes with firm nonskid soles; avoid wearing loose-fitting slippers.
- Use appropriate equipment (canes, walkers) for added stability.

Sources: Centers for Disease Control and Prevention, American Geriatrics Society

Huan J. Chang, MD, MPH, Writer

Cassio Lynn, MA, Illustrator

Richard M. Glass, MD, Editor

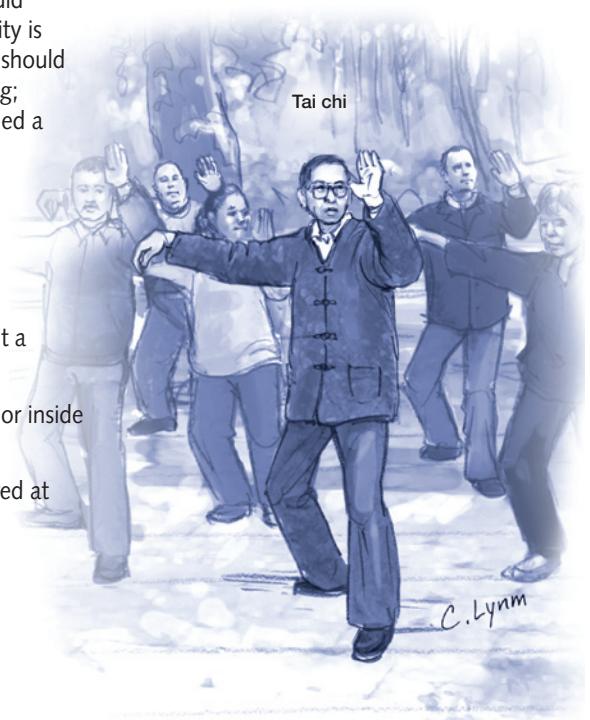
The JAMA Patient Page is a public service of JAMA. The information and recommendations appearing on this page are appropriate in most instances, but they are not a substitute for medical diagnosis. For specific information concerning your personal medical condition, JAMA suggests that you consult your physician. This page may be photocopied noncommercially by physicians and other health care professionals to share with patients. To purchase bulk reprints, call 312/464-0776.

FOR MORE INFORMATION

- Centers for Disease Control and Prevention
www.cdc.gov/injury
- American Geriatrics Society
www.healthinaging.org

INFORM YOURSELF

To find this and previous JAMA Patient Pages, go to the Patient Page link on JAMA's Web site at www.jama.com. Many are available in English and Spanish.



JAMA
COPY FOR
YOUR PATIENTS