



Falls Prevention

Anyone can have a fall, but older people are more vulnerable and likely to fall, especially if they have a long-term health condition.

Falls are a common, but often overlooked, cause of injury. Around 1 in 3 adults over 65 who live at home will have at least one fall a year, and about half of these will have more frequent falls.

Most falls do not result in serious injury. But there's always a risk that a fall could lead to broken bones, and it can cause the person to lose confidence, become withdrawn, and feel as if they have lost their independence.

What Causes a Fall?

The natural ageing process means that older people have an increased risk of having a fall. In the UK, falls are the most common cause of injury related deaths in people over the age of 75.

Older people are more likely to have a fall because they may have:

- balance problems and muscle weakness
- poor vision
- a long-term health condition, such as heart disease, dementia or low blood pressure (hypotension), which can lead to dizziness and a brief loss of consciousness

A fall is also more likely to happen if:

- floors are wet, such as in the bathroom, or recently polished
- the lighting in the room is dim
- rugs or carpets are not properly secured
- the person reaches for storage areas, such as a cupboard, or is going down stairs
- the person is rushing to get to the toilet during the day or at night

Another common cause of falls, particularly among older men, is falling from a ladder while carrying out home maintenance work.

In older people, falls can be particularly problematic because osteoporosis is a fairly common problem.

It can develop in both men and women, particularly in people who smoke, drink excessive amounts of alcohol, take steroid medication, or have a family history of hip fractures.

Older women are most at risk because osteoporosis is often associated with the hormonal changes that occur during the menopause.

Preventing a fall

Avoiding falls at home

Tips for preventing falls in the home include:

- immediately mopping up spillages
- removing clutter, trailing wires and frayed carpet
- using non-slip mats and rugs
- using high-wattage light bulbs in lamps and torches so you can see clearly
- organising your home so that climbing, stretching and bending are kept to a minimum, and to avoid bumping into things
- getting help to do things you're unable to do safely on your own
- not walking on slippery floors in socks or tights
- not wearing loose-fitting, trailing clothes that might trip you up
- wearing well-fitting shoes that are in good condition and support the ankle
- taking care of your feet by trimming your toenails regularly and seeing a GP or chiropodist about any foot problems
- If you're taking long-term medication, your GP should review your medicines at least once a year to make sure they're still right for you.
- It's particularly important that your medicines are reviewed if you're taking 4 or more medicines a day.
- Make an appointment to have a sight test if you're concerned that poor vision (even when wearing glasses) is increasing your risk of having a fall
- If the service user uses a walking aid, ensure it is in good working order and fit for purpose.
- If there are any concerns with a person's mobility and risk of falling contact the OT Team for your area and your Care Co-ordinator

Falls and fractures are a common and serious health issue faced by older people in England. The human cost can include distress, pain, injury, loss of confidence, loss of independence and mortality. For health services they are both high volume and costly. In terms of annual activity and cost:

- There are around 255,000 falls-related emergency hospital admissions in England among patients aged 65 and older
- Unaddressed falls hazards in the home are estimated to cost the NHS in England £435m
- The total cost of fragility fractures to the UK has been estimated at £4.4bn which includes £1.1bn for social care. Hip fractures account for around £2bn of this sum
- Falls in hospitals are the most commonly reported patient safety incident with more than 240,000 reported in acute hospitals and mental health trusts in England and Wales.
- Hip fracture rates have not decreased in England since 1998, although inpatient mortality rates have declined. There is a socioeconomic gradient for in-hospital hip fracture deaths.