

# THE ESSENTIALS

## FALLS AND FALL PREVENTION



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INSTITUTE

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## **The Essentials: Falls and Fall Prevention**

Accidental falls cause the majority of injury-related visits to the emergency room in the U.S.—and they're the leading cause of accidental death in people over age 65. As we age we have a greater risk of falling. More than a third of all older adults experience a fall, and between 20% and 30% of all falls for this age group result in moderate to severe injuries. Severe falls can even result in death, and the risk of death from a fall increases as one ages.<sup>1</sup> Falls are the most common cause of injury visits to the emergency room for young children as well as for older adults. More than 2 million emergency room visits annually are related to childhood falls.<sup>2</sup>

Most falls are not age-related and many can be prevented. However, age does often play a role in the type of falls. Fall injuries occur for a variety of reasons, but for older adults, more than half of all falls occur due to slipping, tripping, or stumbling. Understanding the reasons for falls and the risk factors associated with falls at various ages are important to reducing the risk. MetLife is pleased to offer this document as a useful tool for understanding the risks related to falls and identifying preventive steps you can take to reduce this risk for you and your loved ones. This FAQ is meant to be a helpful starting point to research other, more complex questions you might have.

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# Falls and Fall Prevention

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## Q. Why Is There a Greater Risk of Falling As We Age?

**A.** Aging often causes changes in vision, hearing, reflexes, coordination, and strength. There may be the progression of a chronic illness such as diabetes, heart disease, or arthritis, or the occurrence of an acute event such as a stroke or heart attack. While the changes in eyesight and hearing often cannot be stopped, nor a heart attack or stroke always foreseen, there are measures that can be taken to help prevent falls. Falls can have an especially significant impact on individuals who already need assistance. It is important to understand that the more risk factors an individual has the greater the likelihood that he or she will experience a fall. In general risk factors are grouped into two categories: internal factors and external factors.

## Q. What Internal Risk Factors for Falling Should I Be Aware of As I Age?

**A.** As we age, internal risk factors can develop that could increase the likelihood of a fall. We need to consider these internal factors:

- **Bones:** As people age, their bones become more porous, weaker, and more vulnerable to fractures. Bone density testing can diagnose osteoporosis and monitor the progress of its treatment, which can stem the development and progression of the disease. Medication, diet, and regular, weight-bearing exercise can help prevent deterioration of bone in both men and women.

- **Eyes:** Diseases of the eye (e.g., glaucoma, cataracts, macular degeneration) can alter depth perception and peripheral vision, cause blurriness, and increase sensitivity to glare. Regular eye exams are important for diagnosis. It is important to wear properly fitting eyeglasses and use eye drops as prescribed.
- **Muscles, Balance, and Gait:** Older adults with weak leg muscles, poor balance, and difficulty walking are more likely to fall than others. Lack of exercise or medical problems may contribute to the problem. Ask your doctor about appropriate exercises to improve strength and balance. Sometimes a physical therapist can also evaluate the problem and provide an appropriate exercise regimen. He or she can also evaluate whether an assistive device, such as a cane or walker, may be needed and provide training on how to use it.

## **Q. Are There Particular Diseases That Can Increase the Risk for Falls?**

**A.** Certain diseases or medical problems can pose an increased risk for falls. It is important that symptoms such as muscle weakness, dizziness, light-headedness, decreased sensation in the arms and legs, and difficulty with walking and balance be evaluated by a physician to determine the cause of the symptoms and initiate or modify existing treatment where possible to address the problem. The following are some examples of conditions that can increase risk of falls:

- Parkinson's disease impacts gait, balance, and coordination.

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- Alzheimer's disease distorts judgment and perceptions of physical limitations. In later stages limited mobility and impaired judgment put individuals at high risk for falls.
- Diabetes can lead to neuropathy, altering sensory perception such as lack of feeling in the legs and feet. Neuropathy can put individuals at a high risk for falls.
- Multiple Sclerosis (MS), Amyotrophic Lateral Sclerosis (ALS), and similar disorders can affect balance, gait, coordination, and muscle strength, posing a high risk for falls.
- Hypotension (low blood pressure), can cause lightheadedness or dizziness especially when changing position (e.g., going from lying to sitting or sitting to standing).
- Inner ear infections can cause dizziness and balance problems.
- Strokes can lead to weakness or paralysis and an increased risk of falls.

### Q. How Can Medications Affect Fall Risk?

**A.** Medications that are used for treatment of both acute and chronic health problems are an external factor that can sometimes increase an individual's risk for falling. Use of multiple medications can further increase that risk. Awareness of medications and their use and side effects are important to understand in order to mitigate the risk of falls. Some medications can cause changes in mental alertness, balance, ability to walk, and blood pressure. A medication used for high blood pressure might result in lowering blood pressure too suddenly with a change in position, causing lightheadedness, dizziness,

or weakness. Antidepressants, sleep medications, or tranquilizers can cause changes in mental status and alertness, as well as excessive fatigue. It's important to consider side effects of both prescription and over-the-counter medications and dietary supplements as well as the interactions medications may have when taken together. Your pharmacist and doctor are important resources to answer questions about side effects. Ask your pharmacist about the side effects and potential drug interaction issues with all medications and supplements and notify your doctor immediately of any unexpected side effects or changes. It is also important that all of your doctors have your complete list of your medications, both over-the-counter and those prescribed by physicians.

### **Q. What About Alcohol Consumption and Fall Risk?**

**A.** Alcohol is another external factor that can increase the risk of falls at any age. It can be especially so for those who are older as it is metabolized more slowly by older individuals and can cause alterations in cognition and perception of spaces and events, increasing the risk of falls. When alcohol is taken in combination with other medications, it can cause increased fatigue and confusion. Alcohol intake should be limited so as not to impair balance, coordination, and mental alertness.

### **Q. What Types of Environmental Hazards Could Contribute to a Fall?**

**A.** Environmental hazards in and around the home can increase the risk for falls at all ages. The majority of falls for older adults occur inside

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or just outside the home. Addressing some of these risk factors can help prevent accidental falls:

- › Poor lighting
- › Cluttered pathways
- › Uneven surfaces
- › Stairways without railings
- › Bathtubs and showers without grab bars
- › Furniture that is too high or too low for an individual to get up from or on to safely
- › Throw rugs that slide
- › Loose carpeting
- › Wet floors
- › Icy or wet pavement outside the house

### **Q. How Can I Evaluate the Risk for a Fall?**

**A.** A comprehensive fall prevention effort should consist of an annual medical evaluation that assesses blood pressure, vision, hearing, balance, muscle loss, mental status, and a review of all medications and supplements taken. It should also include a thorough evaluation of the physical environment in which the person is living. If you are concerned for someone who is disabled or an older person who may be at risk for falls, check with your local Area Agency on Aging to determine if they can suggest programs or individuals who can assist with an in-home safety evaluation. Sometimes occupational or physical therapists can come to the home to evaluate the bathrooms and living quarters to suggest safety improvements. Changes could be as simple as adding a railing or installing grab bars in the

shower, or could be as complex as building ramps, widening doorways, or remodeling the living area. These modifications can help make the home a safer place and reduce the risk of falls.

## **Q. What Basic Steps Can Be Taken to Prevent Falls?**

**A.** In addition to fall prevention strategies already mentioned, the following steps can help prevent falls and are especially important for older adults and others at risk for falls:

- avoiding sudden changes in position especially if someone has low blood pressure or is taking medications to lower blood pressure or others that may cause dizziness, balance problems, or light headedness. In the morning, he or she should sit at the edge of the bed for a moment before standing up.
- wearing supportive footwear with non-slip soles and low heels.
- not wearing smooth-soled slippers or socks on smooth floors such as wood or linoleum.
- using caution when walking on thick pile carpets.
- walking carefully outside, particularly when it is icy or slick.
- limiting alcohol intake.
- removing reading glasses when performing other activities.
- taking medications as prescribed and reporting any side effects as soon as possible.

You should also ensure you (or your loved one) knows how to properly use any prescribed assistive devices such as walkers, canes, or

wheelchairs and that they are in good working order. If not used properly or not maintained, assistive devices can increase the risk of a fall. Something as simple as a worn down rubber tip on a cane could be a hazard. A physical therapist can help evaluate the appropriate device for a particular individual and provide training in its use.

### **Q. What if I Have a Family Member with Cognitive Problems?**

**A.** You and other caregivers will need to watch for potential side effects of medication and provide supervision to reduce his or her risk of falls. You may also need to advocate with health care professionals on his or her behalf to ensure they are aware of any health-related changes in your loved one. Changes in vision, gait, strength, mental alertness, or signs that he or she may be experiencing medication side effects are important to report as soon as possible so that they can be properly evaluated and addressed.

### **Q. What if I Live Alone and Am at Risk for Falls?**

**A.** If you are at risk for falling and are alone at times, you may want to obtain a personal emergency response system so that you can call for help if needed. Typically, the system provides either a watch-like band or pendant with a button that can be pressed in the event of a fall. For more information on these types of systems, you can visit [www.alertusa.org](http://www.alertusa.org) or [www.lifelinesys.com](http://www.lifelinesys.com).

## **Q. How Can I Change the Lighting in My Home to Reduce the Risk of Falls?**

**A.** Evaluating the current lighting in your home and making certain changes or additions to your lighting if needed can help reduce the risk of falling. Here are some basic tips:

- Assure all rooms are well and evenly lit.
- Use nightlights in hallways and bathrooms in the evening.
- Avoid very bright lights that can increase glare.
- Have a light at the bedside or a flashlight in case one needs to get up in the night.
- Ensure lighting is bright enough in hallways, stairways, and bathrooms.
- Place light switches at both the top and bottom of your staircase.
- If you are out in the evening, ensure exterior walkways, stairways, and home entry areas are well lit to prevent falls when returning home.

## **Q. Are There Tips I Should Follow to Improve In-Home Accessibility?**

**A.** It goes without saying, but common sense strategies inside the home can reduce the risk of accidents:

- Keep walkways clear of cords or electrical or telephone wires.
- Arrange furniture so it does not interfere with walking.
- Check thresholds for tripping risk and if needed, widen doorways.

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- Ensure furniture is not too low to the floor or too high to allow you and others to get up from or on to without difficulty.
- Remove throw rugs, and secure carpets.
- Keep furniture in the same location and if something is moved, set it in its original location; this is especially helpful if you or another family member is sight-impaired.
- Make phones easily accessible from various rooms in the home, so that you will not have to get up quickly and risk falling when trying to get to the phone.
- Ensure living spaces are clutter-free to avoid the risk of someone tripping or falling.
- Keep daily items easily accessible so you do not have to get up on a stool or ladder or bend over to get them.

### **Q. What Home Modifications Should I Consider to Promote Safety and Reduce Fall Risk?**

**A.** You may need to hire a contractor for certain home modifications. If so, use recommendations from friends; be sure the contractor is reliable; insist on a contract in writing; and do not pay in cash. Never pay in full until the job is complete. You can check with the Better Business Bureau or your city or county office of Consumer Affairs regarding the contractor's reliability and performance record. The following modifications might be among those you consider:

- Install handrails on both sides of stairways where possible.

- Mark the first and last stair with a strip of bright paint or colored adhesive tape made especially for stairs.
- Use non-skid strips in the tub and shower.
- Install grab bars in the tub and shower and next to the toilet.
- Install an elevated seat on the toilet if it is too low and you or a family member has difficulty getting on and off.

## **Q. What Are the Risk Factors Related to Children and Falls at Home?**

**A.** Furniture, windows, stairways, and floor surfaces can all pose risks for falls in children. Babies left unsupervised can roll off changing tables, beds, and couches unexpectedly. Infants and toddlers do not understand the dangers of falling down stairs. Small children are curious and will explore an open window. Slippery surfaces and clutter on stairway can lead to falls for children at any age. Sharp edges on furniture or furniture that is not secured and can be pulled over by small children can lead to injury. Additionally, some equipment made for children can lead to falls or injury. Baby walkers, for instance, cause more injuries than any other nursery products with injuries most likely to occur between the ages of 5 and 15 months. The risks of children falling and the risk of injury from a fall can be mitigated by taking certain precautions at home. The subsequent questions provide tips for protecting your child from falls and fall-related injuries.

### Q. What Are Important Steps to Protect a Baby or Toddler from Falling?

A.

- A baby should never be left alone on a bed, changing table, or other piece of furniture such as a couch. When you do not have a changing table or crib with guard rails or safety straps, keep a hand on the infant at all times.
- Make sure any equipment you use meets safety standards for infants and children.
- Use a safety strap on changing tables, high chairs, and infant seats.
- Avoid using baby walkers. A young child can fall out of the walker or fall down stairs while using a walker.
- When a child can pull to a standing position, the crib mattress should be adjusted to its lowest point. You should stop using the crib when the top rails are less than three-fourths of the child's height.<sup>3</sup>
- Toys, bumper pads, and other objects that can be used to climb out should be taken out of the crib when the child can pull to a standing position.
- Use barriers (e.g., safety gates) to block a toddler's or small child's access to stairs or balconies.
- Keep a close eye on children when they are trying out new physical and developmental skills such as pulling up to a standing position, climbing, and jumping. This is when children are much more likely to have an accident.

- Keep windows locked and screens in place. A young child can squeeze through a window that is open as little as five inches. Although all windows that open should have screens, screens aren't strong enough to keep a child inside.
- Don't store or display anything a child could climb near a window.
- When children first become toddlers teach them what they are not allowed to climb on.

## **Q. What Home Safety Measures Can Reduce the Risk of Falls and Injury from Falls in Both Young and Older Children?**

**A.**

- Make certain all furniture is sturdy so it can't topple over. Secure bookcases and cupboards to the wall so a child cannot pull them over.
- Move furniture with sharp corners out of hallways and away from doorways or other areas where children run around. If furniture can't be moved pad its corners with foam or commercial corner protectors to prevent injury.
- Avoid slippery surfaces. Clean up spills on the kitchen floor quickly and use a rubber pad in the bath tub to prevent a child from slipping and falling.
- Do not allow your child to stand up while bathing.
- Keep extension cords out of the way of small children. They can easily trip over them and fall.
- Discourage play near windows and patio doors which could lead to a fall through glass.

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- Use foam carpet padding, double-sided tape, or a rubber pad under area rugs to keep them from sliding.
- Never allow a child under age six to sleep in the top bunk of a bunk bed.
- For older children, if a bunk bed is not against a wall, use guardrails on both sides. No matter how old the child is keep guardrails in place on the top bunk as children can roll in their sleep.
- Keep all stairways free from clutter.

# Resources for You

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## **AARP**

[www.aarp.org](http://www.aarp.org)

888-687-2277

A non-profit membership organization dedicated to improving the quality of life for people over age 50. Its Web site provides information on a variety of topics including fall prevention. It also includes a home safety checklist which can be accessed at:

[http://assets.aarp.org/external\\_sites/caregiving/checklists/checklist\\_homeSafety.html](http://assets.aarp.org/external_sites/caregiving/checklists/checklist_homeSafety.html).

## **Dynamic Living**

[www.dynamic-living.com/index](http://www.dynamic-living.com/index)

888-940-0605

Dynamic Living offers products and equipment to make life easier and safer. The equipment includes devices to help prevent falls, including grab bars, shower chairs, and items to assist with walking and safe transferring (e.g., from bed to chair).

## **Fall Prevention Center of Excellence**

[www.homemods.org](http://www.homemods.org)

888-940-0605

This Web site provides helpful information and resources on home modification to prevent falls and improve access. This Web site, a university-based and non-profit effort, is dedicated to promoting aging in place and independent living for persons of all ages and abilities.

### **National Center for Injury Prevention and Control**

[www.cdc.gov/HomeandRecreationalSafety/index.html](http://www.cdc.gov/HomeandRecreationalSafety/index.html)

800-CDC-INFO (800-232-4636)

Part of the Centers for Disease Control and Prevention (CDC), the National Center for Injury Prevention and Control provides an online program with tips for fall prevention for both adults and children. It also includes other important safety recommendations for protecting yourself and those you care about.

### **National Safety Council**

[www.nsc.org](http://www.nsc.org)

800-621-7615

The National Safety Council offers information and resources surrounding a variety of safety issues for all ages. These include fact sheets on home safety to prevent falls for infants, children, and adults.

Fact sheets can be accessed at:

[http://www.nsc.org/news\\_resources/Resources/Pages/SafetyHealthFactSheets.aspx](http://www.nsc.org/news_resources/Resources/Pages/SafetyHealthFactSheets.aspx)

### **Temple University's Fall Prevention Project**

[www.temple.edu/older\\_adult](http://www.temple.edu/older_adult)

A federally funded grant project established to inform and educate older adults, health care practitioners, and students about the causes of falls as well as prevention, assessment, and rehabilitation. It also provides links to additional resources related to fall prevention.

## United States Consumer Product Safety Commission (CPSC)

[www.cpsc.gov](http://www.cpsc.gov)

800-638-2772

The Web site contains safety information on a variety of products and includes a “crib information center” at: <http://www.cpsc.gov/info/cribs/index.html> as well as a variety of downloadable publications.

There are also a number of publications available to download in the CPSC Library. These include publications specific to child safety and safety for older consumers. You may also call to obtain product safety and other agency information and to report unsafe products.

# Endnotes

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<sup>1</sup> *Falls and Older Adults*, Centers for Disease Control and Prevention (CDC), [www.cdc.gov/homeandrecreationalafety/falls/adultfalls.html](http://www.cdc.gov/homeandrecreationalafety/falls/adultfalls.html) CDC, accessed via Internet. 1/11.

<sup>2</sup> *First Aid: Preventing Falls*, University of Maryland Medical Center, [http://www.umm.edu/non\\_trauma/falls.htm](http://www.umm.edu/non_trauma/falls.htm), accessed via Internet, 1/11.

<sup>3</sup> *Crib Safety Tips*, National Safety Council, accessed via Internet at: [http://www.nsc.org/news\\_resources/Resources/Documents/Crib\\_Safety\\_Tips.pdf](http://www.nsc.org/news_resources/Resources/Documents/Crib_Safety_Tips.pdf), 1/11.

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