

Information for the Primary Caregivers - Family and Friends



In an effort to prevent falls, goals should be to enhance Seniors' mobility to the greatest degree, maintain their autonomy and independence, and to reduce the risk of falls and the complications that can result from falls.

The focus of preventive action should be on treating medical conditions that predispose a senior to falling (see below), encouraging a physician-approved exercise program, removing or correcting fall hazards in the home, and minimizing the fear of falling by installing an emergency response and daily monitoring system.



A daily exercise program--either a simple walking program, a water-exercise program, or an exercise class--will increase bone density (and make bones less fragile and likely to break), improve a Senior's gait and balance, and improve the ability to correct any loss of balance. *Exercise programs should **only** be begun after consulting with a person's physician!*

A Senior's fear of falling can lead to a self-imposed restriction in activities. This decrease in activity can begin a cycle in which less activity results in more joint stiffness and muscle weakness, which in turn increases the likelihood of falls due to reduced physical conditioning.



This fear of falling and the restriction in activities that so often follows leads to a decreased quality of life, increased dependency, and eventual loss of independence.

What can you do?

- Provide assistance with participation in an exercise program and during periods of illness (a time when falls are more likely to occur).
- Help with home maintenance and the removal of hazards that can lead to a fall.
- Consult with their doctor and assume a proactive roll in assuring direction for fall prevention is followed.
- Manage their medications to assure compliance
- Observe for side effects of medications.
- Document any drug interactions or side effects and contact the prescribing physician for advise
- Document any and all falls that occur and consult a physician when a fall occurs.
- Give encouragement so that Seniors can continue pursuing interests and engaging in their lives as usual.

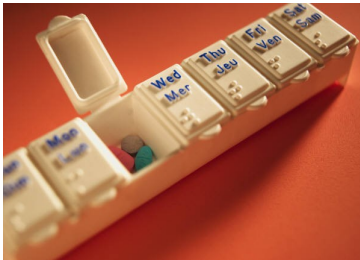
Persons with accurate memories, but with alterations in their ability to solve problems, with generalized anxiety, or who have problems with keeping their attention focused have an increased likelihood of falling.

Depression--whether it is an understandable response to one of life's losses or of undetermined origin--puts a person at increased risk for falling.

Depression causes a person to give less attention to hazards around them that might lead to a fall, and produces a slowing of a person's reaction to a hazard or a loss of balance.



The symptoms of many medical conditions place a person at a greater risk for a fall. Among them are: poor vision, arthritis, muscle weakness, foot problems, back, hip or knee problems, anything that affects gait and balance (such as a stroke or Parkinson's disease), some heart problems, or dizziness when quickly changing position. A recent illness with prolonged bed rest will make a Senior weak. Difficulty transferring in or out of bed, the tub, or a chair, and on or off the toilet also is an indication of increased risk. A history of previous falls is the best indication that a Senior is likely to fall again.



Prescription and over-the-counter medications can have an unexpected affect on Seniors. **Everyone** should tell **every** physician they see the names of **all** medications that they take on a regular basis. Medications should always be taken as they are prescribed. Studies have shown that as many as 50% of medications are not. This can be a major problem with Seniors, since many Seniors take a number of medications.

Healthy and active Seniors can be more at risk for injury on basement or outside stairs--these stairs are more likely to have uneven surfaces, be poorly lit, and have inadequate railings. In one study, a large number of Senior men fell while on ladders , repairing roofs, or cleaning gutters.

Offer assistance when weather conditions make having a sure footing more difficult--ice, snow, wet autumn leaves.

Offer assistance with the removal or correction of home hazards, and with the installation of safety devices such as additional lighting or tub grab bars.



Be aware that it is essential that Seniors are closely observed after a fall. Seniors are more likely to experience shock than younger adults, and shock is the most common cause of death from falls in Seniors. A head injury that seems minor can cause serious injury in Seniors, and a fall on the ribs can result in fractures that can seriously hinder breathing.

ResponseLink offers information for general educational and informational purposes only. This information is not intended as a substitute for advice, treatment, or recommendation from health care professionals. The information is not exhaustive and does not cover all fall related ailments, physical conditions, or their treatment. It is important to follow the advice of your doctor and other health care professionals regarding your individual health care needs.

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