



OWN YOUR HEALTH

ST. PAUL'S HOSPITAL
COMMUNITY FORUMS

Steering clear of the
"F" words this
winter...
Flu and Falls

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**How do you prevent falls?
Strategies to reduce
vulnerability & preserve vitality**

Did you know?

- 1 in 3 adults over the age of 65 fall each year
- Half of this group falls more than once
- 90% of hip fractures are due to falls
- 1 in 5 seniors with hip fractures die within a year of the fracture
- Falls can lead to fear of falling, functional decline, nursing home placement
- They don't have to....

What do we need to stay on our feet?

...Co-ordination of multiple body structures & functions

Source: Sijders et al., Lancet Neurology 2007, 6: 63-74.

Falls are not accidents

- Any health condition affecting the systems required to walk can lead to falls
- More fall risk factors → more chance of a fall

Risk factors for falls



Intrinsic Fall Risk Factors

- Age related changes in physiologic functions
- Health conditions
 - Acute
 - Chronic
- Medications
 - Sedatives
 - Others that act on the brain or lower blood pressure
 - Alcohol



Extrinsic Fall Risk Factors

- Environmental factors
 - Walking surfaces & support structures
 - Obstacles
 - Lighting



Situational Fall Risk Factors

- On-the-spot decisions & behaviour
 - Attention
 - Judgment
 - Assessment of one's physical abilities
 - Competing tasks
 - Fear of falling
 - Cautiousness / risk-tolerance



Falls are preventable: Successful approaches

- Progressive strength & balance exercise
- Stop psychotropic medications
- Vitamin D supplements > 800IU/day
- Expedite cataract surgery
- Change multifocal lenses to single lens
- Home safety assessment by an occupational therapist (OT)



What you can do to reduce your risk

- Exercise, exercise, exercise
- Ensure all your health issues are optimally managed
 - Reduce or manage cardiovascular risk factors
- Ask your MD to review your medications
- Avoid sedative medications
- Treat or prevent vitamin D insufficiency
- Avoid wearing multi-focal or reading glasses while walking



What we do in the fall clinic



- Assess & treat health problems related to fall & fracture risk
- Review & adjust medications
 - Sedative tapering support program
- Facilitate goal-setting for functional mobility
- Monitor balance, gait, physical performance, function, cognition...
- Individualize & supervise an exercise prescription
- Involve dietitian, continence nurse, neuropsychologist consultation as needed