# Falls prevention: The lifelong battle against gravity

alls are a major cause of morbidity and mortality in older adults; they also cost the BC health care sector \$1.1 billion in 2018. The *BCMJ* has published many articles about falls prevention for older adults; what remains salient and what is new?

The BC Guideline Fall Prevention: Risk Assessment and Management for Community—Dwelling Older Adults,<sup>2</sup> published in June 2021 for use by primary care practitioners and summarized in the BCMJ,<sup>3</sup> addresses how to identify and manage adults 65 years of age and older in the community with risk factors for falls. Although hospital, facility-based care settings, and acute fall management are outside of the guideline's scope, some of the principles may be useful in those settings. Guideline recommendations for physicians include:

- Conducting an annual screening with a "three-questions approach" or "staying independent checklist" [Box].
- If a screening is positive, doing a multifactorial risk assessment (reviewing medications; medical conditions like frailty, impaired safety awareness, impulsivity, impaired mobility, and osteoporosis; and the home environment).<sup>2,3</sup>
- If available, suggesting a Falls Prevention Clinic<sup>4</sup> or Osteofit program.<sup>5</sup>

The most effective falls prevention intervention is exercise to improve strength,<sup>6,7</sup> gait and balance training (e.g., walking backward),<sup>8</sup> core exercise training,<sup>9</sup> and safe mobility. Since sarcopenia<sup>10-12</sup> is closely related to falls risk, resistance training<sup>11</sup> is recommended as well.

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Future prevention efforts may target those most at risk: women, adults age 80 and older, and those living alone or on a low income. Falls occur mainly in the household or while walking.<sup>13</sup>

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National Seniors Day is 1 October, and November is Fall Prevention Month. ¹⁴ Let's remember that falls prevention is so much more than removal of rugs in this lifelong battle against gravity. ■

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BOX. Risk factors for falls, screening tools, exercises, and resources.

#### Who is at greatest risk:

- · Women.
- Anyone age 80 and older.
- Those living alone or on a low income.
- People with medical conditions including frailty, sarcopenia, cognitive impairment, and osteoporosis.

#### Screening tools:

- Three-questions approach:
  - 1. Have you fallen in the past year?
    - How many times?
    - Were you injured?
  - 2. Do you ever feel unsteady when you stand or walk?
  - 3. Do you worry about falling?
- Staying independent checklist: www2.gov.bc.ca/assets/gov/health/ practitioner-pro/bc-quidelines/fall\_prevention\_stayingindependentchecklist. pdf.

#### **Exercises:**

- Strength: resistance exercises, lifting weights, wall pushups.<sup>6,7</sup>
- Balance: tai chi, standing on one foot, heel-toe walk, balance walk, standing from seated position,<sup>6,7</sup> backward walking.<sup>8</sup>
- Core: bridges, planks, opposite arm and leg raises.<sup>9</sup>

#### **Resources:**

#### For patients:

- Fall resources for seniors (multilingual): https://findingbalancebc.ca/ fall-resources-for-seniors.
- Staying Independent (handout): https://findingbalancebc.ca/wp-content/ uploads/2016/04/staying\_independent\_checklist\_interactive.pdf.
- Seniors' Falls Can Be Prevented (handout, multilingual): www.healthlinkbc.ca/ healthlinkbc-files/seniors-falls-can-be-prevented.
- Canadian 24-hour Movement Guidelines for Adults Aged 65 Years and Older: https://csepquidelines.ca/guidelines/adults-65.

#### For practitioners:

- BC Guideline: Fall Prevention: Risk Assessment and Management for Community-Dwelling Older Adults: www2.gov.bc.ca/gov/content/health/ practitioner-professional-resources/bc-guidelines/fall-prevention.
- Government of Canada: Surveillance Report on Falls among Older Adults in Canada: www.canada.ca/en/public-health/services/publications/ healthy-living/surveillance-report-falls-older-adults-canada.html.
- "World Guidelines for Falls Prevention and Management for Older Adults: A Global Initiative": https://doi.org/10.1093/ageing/afac205.

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