

Philips Lifeline, the leading medical alert service provider, delivers prompt access to help 24 hours a day, 365 days a year.

Any falls safety program needs to provide a plan for how to reduce potential harm resulting from a fall and, essential to that plan is how to call for help. A subscription to Lifeline with AutoAlert⁵ is a means of accessing help quickly after a fall or medical event.

Advanced: Detects over 95% of falls and can automatically call for help, if a fall is detected, with or without the push of a button.⁶

Preferred: the most widely adopted fall-detection technology in the US personal emergency response market.⁷

Make sure older adults have the most advanced technology; refer Lifeline with AutoAlert. Lifeline is North America's leading medical alert service, supporting seniors and their families for 40 years.



TAKE ADVANTAGE OF A SPECIAL OFFER

Free Falls Education and Prevention Resources

Contact me for additional resources for you and older adults in your care.

Falls affect more Americans aged 65 and over than heart attack and stroke combined.

Falls are a serious, epidemic problem and a major contributor to functional decline and healthcare utilization. Over 13 million older adults fall every year and death rates from falls have risen sharply over the past decade. In 2010, approximately 21,700 older adults died from unintentional fall injuries.¹

Not many people are aware that more than half of all falls occur at home. Falls and fall injuries are among the most common causes of decline in the ability to care for oneself and to participate in social and physical activities. People age 75 and older who fall are four to five times more likely than those age 65 to 74 to be admitted to a long-term care facility for a year or longer.²

Although preventing falls is the best solution, not all falls can be prevented and about half of older adults who fall cannot get back up without help. Delayed intervention or prolonged lie times after a fall may result in dehydration, pressure ulcers and rhabdomyolysis; serious medical complications that very likely require hospitalization and which may be avoided with quick access to help.

Part of our mission at Philips Lifeline is to keep seniors informed of the risk of falls at home. We are committed to advancing the knowledge of professionals caring for older adults to address risk factors and offer possible solutions to help avoid these adverse events. Toward that end, this educational piece presents five proven falls intervention strategies that address common fall risk factors including balance, mobility, sensory deficits, home hazards and medications.

Proven Falls Prevention Interventions



1. Effective Physical Therapy and Exercise Interventions



2. Multifactorial Interventions



3. Preparedness for Impairments and Conditions Predisposing Falls

Source for screening: American Geriatrics Society, Prevention of Falls in Older Person AGS/BGS Clinical Practice Guideline, Screening and Assessment, Algorithm.

1 Center for Disease Control, Falls Among Older Adults: An Overview. <http://www.cdc.gov/homeandrecreationalafety/Falls/adultfalls.html>

2 Center for Disease Control, Falls Among Older Adults: An Overview. <http://www.cdc.gov/homeandrecreationalafety/Falls/adultfalls.html>

3 Gillespie, L D, Robertson, C. "Fall Prevention in Community-Dwelling Older Adults." 2013.

4 Kumar, C, Tinetti, M E. "The Patient Who Falls: It's Always a Trade Off." 2010.p259.

5 AutoAlert does not detect 100% of falls. If able, you should always press your button when you need help.

6 Based on the number of undetected falls that have been reported to Philips Lifeline by US AutoAlert subscribers for the period from January 2012 through July 2012.

Undetectable falls can include a gradual slide from a seated position – such as from a wheelchair – which may not register as a fall.

7 Claim based on current number of subscribers.

INTERVENTIONS THAT REDUCE FALLS RISK

Although falls are an epidemic, there are ways to reduce falls risk at home. The diagram below details proven intervention strategies that reduce falls risk in older adults.

TOP 5 FALL PREVENTION INTERVENTIONS

Fall-prevention exercise programs, home safety interventions, vitamin D supplementation, and individually targeted multifactorial interventions are associated with lower fall rates.³



Exercise Programs

Exercise is the most widely studied single intervention. Combinations of strength, gait, balance, and endurance training reduce falls risk significantly. Reported findings show falls risk decreased 22%-46%.



Tai Chi Classes

Classes that used simplified movements and in coordination with a balance training program reduces falls risk significantly as well as improves strength, walking speed and other functional measures.



Multifactorial Interventions

Successful multifactorial interventions include multiple risk factor assessment, PT or exercise, withdrawal or minimization of psychoactive and other medications and home safety modification.



Supplementation in People with Lower Vitamin D Levels

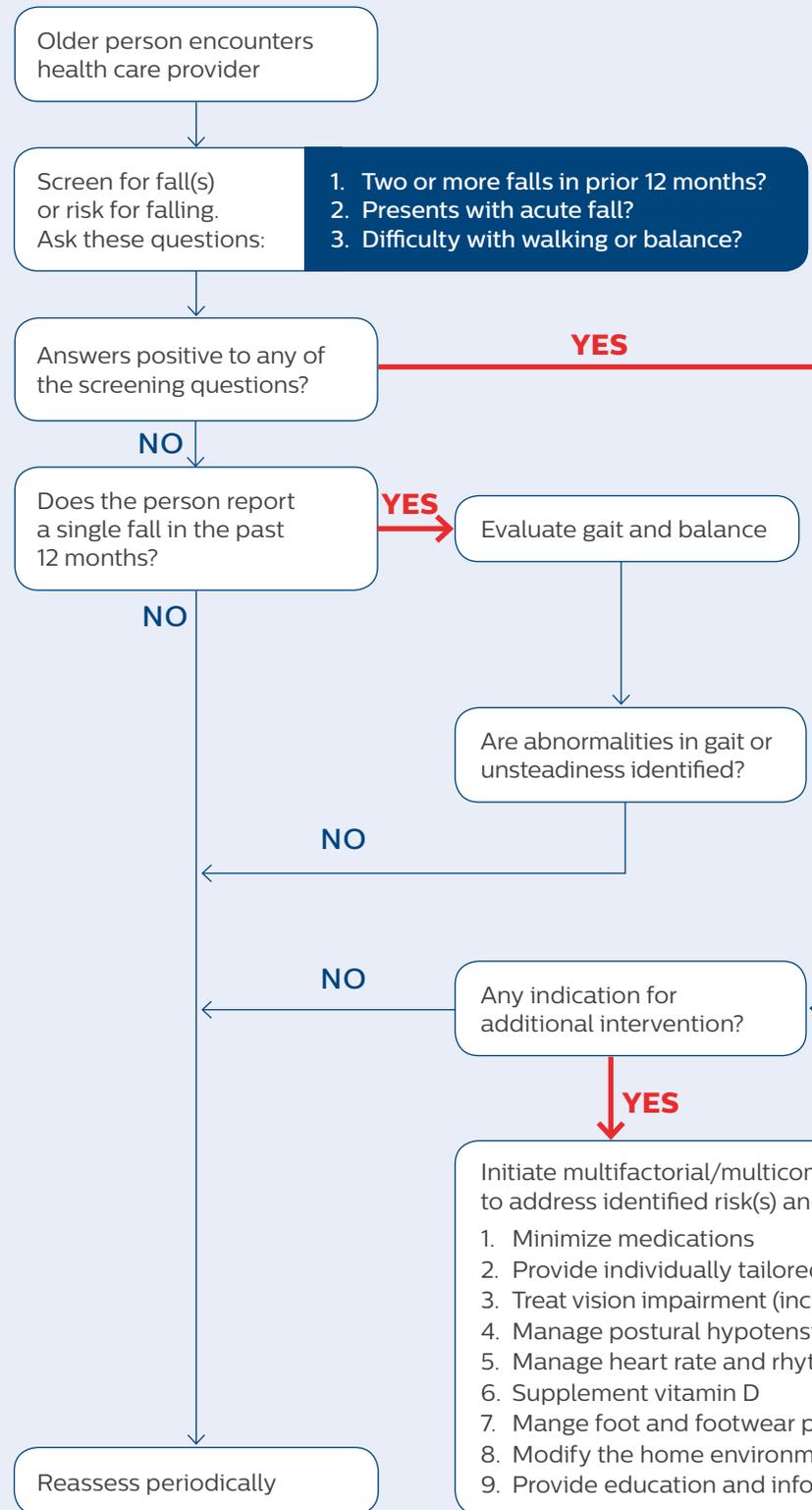
Older men with decreased vitamin D levels can develop muscle pain or weakness. Although vitamin D as a falls intervention remains controversial, it has the strongest clinical trial evidence in preventing fractures among older men.



Home Safety Assessment + Modification

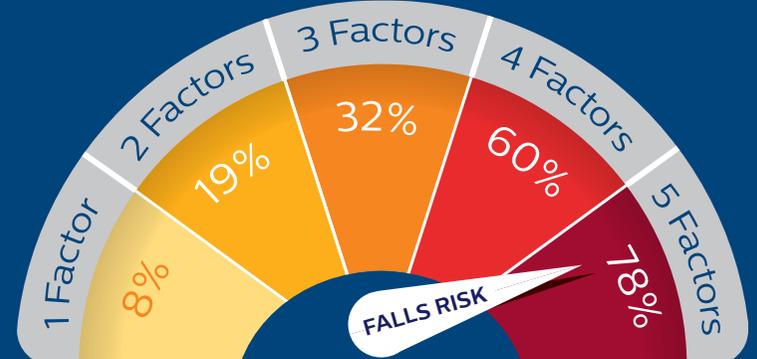
Physical and/or occupational therapy can identify the need for adaptive devices, remove tripping hazards in and around the home and ensure older adults know how to access help in the event of a fall.

The screening for falls and risk for falling is aimed at preventing or reducing fall risk. All older persons who are under the care of a health professional (or their caregivers) should be asked at least once a year about falls, frequency of falling, and difficulties in gait or balance. **Any positive answer to the screening questions puts the person screened in a high-risk group that warrants further evaluation.**



1. Obtain relevant medical history, physical examination, cognitive and functional assessment.
2. Determine multifactorial fall risk:⁴
 - a. Previous fall
 - b. Balance impairment
 - c. Decreased muscle strength (upper or lower extremity)
 - d. Visual impairment
 - e. Medications (>4 or psychoactive medication use)
 - f. Gait and impairment or walking difficulty
 - g. Depression
 - h. Functional limitations, ADL disabilities
 - i. Age >80 y and/or Female
 - j. Low body mass index

Falls Risk | The risk of falling increases with the number of risk factors.



Impairments + Conditions Predispositioning Falls

Women are more likely to experience fractures. Men and African Americans are more likely to experience traumatic brain injuries

Effective Multifactorial Interventions

The multifactorial nature of fall prevention means that care must be coordinated among physicians, nurses, physical therapists and occupational therapists. Regardless of location or disciplines involved, effective fall prevention requires assessing potential risk factors, managing the risk factors identified, and ensuring that the interventions are completed.

SPECIAL OFFER: It's not possible to prevent every fall, but a majority of falls have easily avoidable causes. Ask me how you can receive a **free** copy of *How to Create a Safer Home Room by Room Guide*.