

**Falls Among Older Adults are Preventable;
Don't Let Falls Myths Keep you from Seeking Help
By Safe Communities Falls Prevention Task Force**

"Falling is one of the most unexpected things that can happen to a person, especially as they age. I didn't think my fall was significant and didn't seek treatment until my husband insisted. It turned out I needed immediate treatment." - Dr. Virginia Henderson, speaker at *Safe Communities Falls Prevention Summit*

Unfortunately, 35-40% of people age 65 and over who live in their own homes fall each year. Older adults who fall once are likely to fall again within a year. Of those who fall, 20% to 30% suffer moderate to severe injuries such as hip fractures or head traumas that reduce mobility and independence and can lead to long term nursing home stays and premature death.

Falls are preventable, however, and seeking help from your doctor about how to avoid falling is the best way for an older person to avoid injuries and to remain independent. Don't let these myths keep you from getting the help you need!:

Falling is just a part of aging. There is nothing you can do about it. You just have to accept it. FALSE - Falls can be prevented! Ask your doctor about how to avoid falls.

Good lighting in the home can help prevent a fall. TRUE.

It is possible to fall so you don't get hurt. FALSE – don't count on it! There are truly effective ways to prevent injuries from falls - worrying about how to fall "correctly" isn't one of them.

Certain types of exercise can help prevent a fall. TRUE! Regular activity is key to falls prevention, but talk to your doctor before starting in on a new program. Walking and exercises that enhance balance (Tai Chi, dance, bowling, ping pong, for example) are good falls prevention activities.

You are at increased risk for a fall if you use sleep medications. TRUE. Talk to your doctor or pharmacist about medications that can affect the central nervous system and cause dizziness, drowsiness, and confusion, such as: sleeping pills, allergy medications, antidepressants, and over the counter sleep aids.

If you have trouble with balance, using a cane or a walker should help prevent a fall. TRUE! Assistive Devices (walkers, canes) can be beneficial if fitted by a physical therapist and the person using the device correctly trained in how and when to use it.

The best kind of shoes for falls prevention is thick-soled sneakers with deep tread so you don't slip. FALSE! Indoors – tie or Velcro, smooth, thin soles are desirable. Avoid bare feet or slippers. Outdoors – find a good walking shoe with traction. Obtain shoes with larger toe box if need.

You are at higher risk for a fall when you are feeling sick or have just come out of the hospital. TRUE. 10% of falls occur in situations involving an acute illness. People just released from the hospital or recovering from an illness are a higher risk of

falling due to dehydration, muscle weakness, poor nutrition and/or other causes that arise from illness.

Paying more attention and being careful should help prevent a fall. TRUE! But fear of falling is an indication that you may be at risk for falls. If you're concerned about falling, call your doctor to schedule an appointment.

You are not at risk for falls if you have a cataract in one eye and see fine out of the other. FALSE! Ask your doctor and seek treatment for cataracts. In addition, he or she may recommend replacing bifocals/multifocals with single vision lenses, especially if you are tripping. Regular eye exams and following advice you receive from your optometrist/ophthalmologist is important if you want to avoid falling