

HEALTHY AGING

5 Steps to Take After a Loved One Has a Fall

Healing physically is just one part of the recovery process after a fall. Here's what else you can do to support your loved one and keep them safe at home.

By Barbara Brody



Every year, about **3 million older adults** suffer a fall that's bad enough to land them in the emergency room. Falls caused more than 34,000 deaths in 2019 (the latest year for which statistics are available), making it the leading cause of death by injury for people 65 and older. Despite these scary statistics, most people don't think about **fall prevention and recovery**—until someone they love falls.

If an aging parent or another older adult in your life has recently taken a tumble, you're probably anxious about what should happen next. How do you make sure they are OK? What can you do to keep them living at home safely and prevent them from falling again? While there aren't any one-size-fits-all answers, there are several steps you can take to reduce your loved one's chances of having another accident. Consider this your action plan:

1. Take your loved one for a medical exam to determine what might have caused the fall.

One out of five falls causes a serious injury, like a hip fracture or head injury. While treating such damage is clearly the first priority, the next crucial move is to arrange a checkup with your loved one's primary care doctor or a geriatrician, a physician who specializes in caring for older adults.

"The single most important thing to do when an older person falls is [to] determine the root cause," says Michael Wasserman, MD, a geriatrician, past president of the California Association of Long-Term Care Medicine, and a member of TheKey's Scientific Advisory Board. In other words, you need to try to figure out why the person fell in order to prevent future falls.

A number of **chronic medical conditions** are associated with falls, including arthritis, **Parkinson's disease**, diabetes, and neuropathy (nerve damage that typically causes numbness in the legs or feet). Other factors, such as vision loss, inner-ear problems that can cause **vertigo**, and orthostatic hypotension (a condition in which a person's blood pressure drops quickly when they stand) are also common, says Dr. Wasserman.

Anemia, thyroid problems, dehydration, and incontinence—which can lead to frequent, urgent trips to the bathroom—can be problematic, too. And some older adults suffer from "**frailty syndrome**," which refers to the loss of muscle, stamina, and overall fitness that can increase the risk of falling.

Oftentimes, several overlapping issues contribute to an older adult's tendency to fall, and it's important to identify as many as possible, Dr. Wasserman adds. Your loved one's doctor should give them a thorough physical, including a gait and balance assessment. Alzheimer's and other diseases that cause dementia may lead to **gait changes** or impact balance or motor skills. The doctor should also evaluate your loved one's cognitive skills by using an assessment tool such as the **Mini-Mental State Examination**. (Assessment tests should always be done by a trained medical professional.)

2. Check the number of medications your loved one is taking—and the possible side effects.

Whether or not a medication's side effect, such as dizziness, directly caused your loved one's fall, this is a good time to conduct what's called "a comprehensive medication review" with the help of a pharmacist. Polypharmacy, which refers to taking multiple medications, is linked to **mobility problems**—and **23 percent of older adults** take five or more meds per day. Polypharmacy also increases the risk of adverse drug reactions, which, in turn, can lead to falls.

A comprehensive medication review, an in-depth, in-person or virtual meeting with a pharmacist, is designed to highlight medications' side effects, catch potential drug interactions, and determine whether all the medications your loved one is taking are necessary and/or if dosages need to be adjusted in some way. Yet, **very few older adults** ever have such a review. Ask your pharmacist about scheduling a session for your loved one as soon as you can.

3. Encourage your loved one to address their relevant health issues.

The exact game plan for preventing falls will vary from person to person. However, here are some proactive steps you can take now:

- Ask your loved one's physician about making changes to medications to alleviate side effects such as **dizziness**, **sleepiness**, and sudden changes in blood pressure.
- Encourage your loved one to use a cane, walker, or other supportive aid.
- Have your loved one work with a physical or occupational therapist to improve their balance, muscle strength, and endurance.
- Make sure your loved one's eyeglasses and hearing aid prescriptions are up to date.
- Consider getting your loved one an ankle-foot orthotic device. Also called an orthosis, the device is a brace designed to help maintain better balance and stabilize posture.
- Enroll your loved one in a local exercise program for older adults, such as tai chi or yoga, which emphasize balance. **Research** shows that older adults who exercise are less likely to fall.
- Sign your loved one up for a formal fall prevention program. You can search for one near you **here**.
- Hire a home care aide, such as a senior companion from TheKey, so that your loved one doesn't have to take walks alone.
- Modify your loved one's home with handrails or grab bars to make it easier to get around safely. Call **Eldercare Locator** (1-800-677-1116), a free national service of the Administration on Aging, to find local resources that can help with purchases and installations.

4. Hire a professional to conduct a home safety evaluation.

An estimated **six out of 10 falls** happen in the home, which is why it's wise to bring in an outside expert to do a thorough safety evaluation of the residence. If you decide to do this type of assessment on your own, use a formal checklist—like **this one from the CDC**—to guide you.

"The main things we're looking for are whether there are enough handrails, adequate lighting, and whether there are throw rugs or loose cords that are easy to trip on," says Beth Popolizio, PT, DPT, a training and development specialist for TheKey. It's also important to **minimize clutter** (especially on the floor and around stairs), use nonskid mats in the bathroom, and add grab bars where necessary, such as near toilets and showers. You might need to rearrange some furniture to make moving around the home easier.

Don't hesitate to enlist help, as a team approach may be best: **Research** from Johns Hopkins University found that bringing a nurse, occupational therapist, and handyman (to help install safety equipment, like grab bars) into the home resulted in an improvement in people's functionality, notes Dr. Wasserman.

5. Help your loved one get past the fear of falling.

Falls are scary, and it's natural to want to avoid having another. The problem is that some older adults become so fearful of falling, that they end up moving less because of it. "People can get stuck in a fear/avoidance cycle and start to limit their activity," says Dr. Popolizio. "Over time, that degrades their strength, power, endurance, and functional independence, which increases their risk of subsequent falls."

To break the fear-of-falling cycle, focus on building your loved one's confidence and strength. Signing them up for a supervised exercise program like **tai chi or yoga** for older adults, as mentioned above, can help as well as encouraging them to use assistive tools, such as canes and grab bars.

If the person is extremely fearful, a type of talk therapy called cognitive behavioral therapy (CBT) may help. **Research** has shown that CBT is effective in reducing the fear of falling and improving balance in older adults. CBT teaches them how to identify and reframe negative thoughts that would otherwise have a detrimental impact on their behavior. Ask your doctor for a recommendation or visit **locator.apa.org** to search for a therapist near you (ideally one who focuses on aging).

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