



Stay **STRONG**  
Stay **STEADY**  
Falls prevention information for clients



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Building a  
Better Health  
Service

HSE Mid West  
Community Healthcare

# Am I at risk of a fall?

Everyone is more at risk of a fall as they age; it's a big cause of hospital admissions and can result in serious injuries and long-term complications. Falling can also contribute to a loss of confidence and independence.

We can't change our biological age, but by understanding what puts us at risk, we can take preventative action.

If you've fallen before, you're right at the top of the risk list for another one, so it's even more vital to take the steps outlined in this booklet.

So take a look at the checklist opposite and see how many you tick. Then read the following pages to find out why our fall risk increases as we age – and the many positive and easy steps we can all take to cut that risk and protect our freedom, whether we're 65 or 95!



# Checklist



- I have had a fall but not seen anyone about it
- My GP has not reviewed my medication in the past year
- I often need to get up at night to go to the toilet
- I often skip meals because I don't feel hungry/ I feel full soon after I start eating / I have lost interest in food
- I am probably not as active as doctors recommend (30 minutes moderate activity five times a week).
- I sometimes feel dizzy or light-headed on standing or walking
- I struggle with basic maintenance on my home
- I wear bi-focals or vari-focals
- I haven't had an eye test in the past 12 months
- I sometimes feel weak when I get up from a chair or the bed
- I should drink 8 to 10 cups of fluid per day, preferably water
- A bit of clutter has built up at home over the years
- My slippers have that 'lived-in' look
- Taking care of my feet is quite difficult these days
- I have a long-term condition such as Parkinson's, heart disease/stroke, arthritis, COPD, diabetes, dementia
- I save electricity by turning off unnecessary lights
- My alcohol intake should be limited to 11 standard drinks per week for a woman and 17 standard drinks per week for a man
- I don't get out as much as I'd like because I worry about tripping, I feel unsteady
- If I had a fall I would probably be too embarrassed to tell anyone
- I often get my feet tangled up in things that could trip me; my pets or grandchildren running around worry me sometimes; they make me feel wobbly!
- I am not always that warm at home

# How to reduce your risk

Looking at photographs taken 30 years ago reveals how our bodies have changed on the outside, but what about the changes on the inside? We can't see them, but they can put us at greater risk of falling.

We can't stop the ageing process, but we can counteract some of the effects with a few gentle tweaks to our lifestyle.

Previous falls (with or without injury) are one of the biggest independent risk factors for falling again; guidelines recommend that if you have or have had a fall you should get yourself reviewed if this has not been done automatically.

Mention it to your GP, Physiotherapist or other Health Professional at your next routine appointment. If you are not seeing someone regularly, make a specific appointment to see someone to discuss it.



We rely on our balance to stay upright when we over-reach for something or trip up. But as we age, our balance reaction times get slower and so do reflexes. That makes it harder to regain balance, especially when doing something quickly.

### What can I do ?

It's surprisingly easy to improve your balance: Ask the advice of your health professional.

Between the ages of 50 and 70, we lose about 30% of our muscle strength, which isn't great news if we're trying to regain our balance or stop a fall.

### What can I do ?

Regular physical activity strengthens muscles, whatever your age. The recommended activity level is 30 minutes, five times a week: gardening, vigorous housework, cycling and daily walks all count. Experts also advise twice-weekly muscle-strengthening exercises for the over-65s.

Bones naturally become more brittle as we age, which makes a fracture more likely if we do fall. This is true for both men and women, but is especially true in post-menopausal women.

### What can I do ?

Weight-bearing activities are also great for maintaining strong bones, and a healthy balanced diet will help ensure you get enough calcium to maintain bone strength.

Vitamin D, which helps the body absorb calcium, can be obtained from exposure to sunlight and from some foods.

Certain groups of the population are at risk of not getting enough vitamin D. It is recommended that people 65 years and over, those not exposed to much sun, and those with darker skin, all take a daily vitamin D supplement (10 micrograms).

Sunlight exposure without sunscreen should be limited to 10 mins per day on the arms and face between May and September but NO burning!

# Rushing for the toilet

If you hurry, especially in the dark at night, it can make falls more likely. In Ireland Urinary Incontinence problems affect 1 in every 3 women and 1 in every 9 men.

## What can I do ?

Incontinence can be improved and sometimes cured – talk to your continence nurse or physiotherapist. You can also refer yourself to a local continence clinic, which can recommend exercises and give advice. Some continence medications can also make you dizzy – let them know. [www.continence.ie](http://www.continence.ie) or [csp.org.uk/conditions/incontinence](http://csp.org.uk/conditions/incontinence)

Multiple medications  
The older we get, the more likely we are to be prescribed medications for several different health conditions; it's estimated that 36% of people over 75 are on four or more different drugs. Some common ones are associated with dizziness, drops in blood pressure when you stand up, or sleepiness – all of which can raise the risk of falling.

Talk to your GP if you are experiencing any of these problems and ask whether your medication should be adjusted.



*“It was only when a new young GP started at the surgery that I had all my medication reviewed , and she reduced some of my doses. I feel much better and no longer feel so dizzy when I stand up.”*

## What can I do ?

Never stop taking any prescribed medication suddenly. If you suspect one or more of your medications is making you dizzy or faint, see your GP – and make sure the GP reviews your prescriptions every 12 months. (That's every six months if you are over 75 or taking four or more medications.) Watch out for alcohol intake: you may find you can't drink the same quantity you used to without feeling dizzy or ill, and it may interact with prescribed medications.

# Eyesight changes

It's not just 'old-age long sight' that can cause vision problems. Ageing can decrease contrast sensitivity (making it harder to see the edge of steps and kerbs), alter depth-perception and could cause visual field disturbances – all of which make you more likely to fall.


# Alcohol

As we get older, drinking the same amount results in higher blood alcohol concentration. This is because fat replaces muscle as we age, and alcohol is not drawn into body fat as well as it is into muscle.

Older people are more likely to experience unsteadiness after drinking alcohol, and so are more susceptible to falls.

## What can I do ?

It is recommended that everyone has their eyes checked every 2 years. Any person with a medical card is entitled to an eye test/ glasses every 2 years. If you are over 75, a diabetic, have macular degeneration or cataracts, a yearly check is recommended.



**The risk of unsteadiness after drinking alcohol increases with age.**



# Fall-proof your home

Six out of ten falls happen in the home or garden. Not surprising, as homes get old too: carpets get worn, clutter builds up and we may not stay on top of maintenance as we once did.

Often we don't notice problems because we've lived with them so long. But clutter can present a very real risk for falls. So take a few minutes to look round your home with a critical eye, using the checklist below.

## Lighting

- Did you know that 60-year-old eyes need three times more light than 20-year-old eyes? Consult a trusted, professional electrician about your lighting options – such as branched lights to replace single bulbs – to increase light without glare.
- Avoid trailing cables from lamps that could trip you.
- Consider installing two-way switches on the landing/hall and/or extra stair lighting. Wire in a smoke alarm at the same time – one more hazard sorted!

- Always use your bedside light when getting up at night; if the switch is not easily accessible keep a good torch by the bed.
- Never walk about in the dark: if you regularly get up for the toilet, keep a landing light on.

## Living areas

- Check all rugs have a non-slip underlay and replace worn ones. Consider replacing frayed carpets, or ask someone to tack them down.
- Cable tidies and/or boxes will organise jumbled wires by the TV, computer or music centre. Tape any trailing extension leads to skirting boards.



*“I always hated the idea of hand rails and non-slip mats everywhere – it was a sign you were getting old . But making a few little changes at home has actually given me more freedom and confidence, not less.”*

- Clear away clutter, especially in the hall/landing and doorways.
- Never store items on the stairs!
- A surprising number of people trip over their pets. Buy them a bright collar, and a bell to alert you to their presence.

## Kitchen/bathroom

- Continually reaching up for things? Rearrange cupboards so that frequently used items are within easy reach.
- Clear up spills straight away.
- Always use a non-slip mat in the bath/shower.
- Consider installing grab rails in the bathroom.

## Garden

- Keep paths free of moss and leaves. Repair any cracks in paving.
- Ensure your back/front doors and garage are well-lit.
- Consider installing safety rails on your steps.

### Hot Tip:

**You can request a review of your home by your Occupational Therapist if you feel at risk**

# Stay safe out and about

There's no reason to curtail your activities away from home because you are worried about falling, but it makes sense to take some simple precautions.

## In the street

- Take your time and don't rush. Scan an area for trip hazards – cracked pavements, obstacles and uneven surfaces – before walking.
- Carrying shopping bags can obstruct your view of the pavement; consider using a rucksack instead (it's also better for your back).
- Watch out for shop entrances with 'lipped' door frames, especially if you're stepping inside out of bright light; give your eyes time to adjust to the darker conditions.
- Watch out for subtle changes of gradient, especially near pedestrian crossings.
- Keep your bus pass/money near to hand so you don't have to root around in your bag. That way you'll stand a better chance of boarding safely.
- Don't be afraid to ask the bus driver to wait until you're seated before moving off.
- Don't worry if you think you're being slow and inconveniencing others: staying safe is more important. Chances are that no one has noticed anyway.

## Walking aids

*“I didn’t really like the idea of a walking stick, so my son bought me a top-of-the-range mountaineering pole, which we’ve adjusted to the right length. It started as a bit of a joke but I wouldn’t be without it now.”*

Don’t be embarrassed to use a walking aid if it helps you stay steady. It’s important a stick is the right length: level with your wrist crease when your arm is down by your side. It should also have a rubber end (‘ferrule’) to stop it slipping; replace worn-out ones promptly. If a stick is no longer supporting you enough, talk to your physiotherapist about getting a walking frame or rollator (wheeled frame).



# Getting up from a fall

If you should fall, lie still for a minute, stay calm and check for injuries. If you are unhurt and think you can get up, follow the steps opposite (rest between each one if you need to). If you know you can't get up, or feel pain in your hips or back if you move, see overleaf for ways to summon help.



1



Roll on to your side, then push up on to your elbows.

2



Use your arms to push yourself on to your hands and knees.

3



Crawl to a very stable piece of furniture (a sturdy chair or bed) and hold on to it for support.

4



Slide or raise the foot of your stronger leg forwards so it's flat on the floor.

### Hot Tip:

If you can't get on to all fours, bottom-shuffle or roll to a low surface like the bottom stair or sofa. Sit with your back to it, put your arms behind you on to the surface and push up with your hands and feet, lifting your bottom onto the surface. If using the stairs, go up to the next step before standing up.

5



Lean forwards and push up using your arms and front leg, slowly rising to standing position.

6



Turn around and sit down. Sit for a minute or two to rest.

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*"I slipped in the kitchen and couldn't get up. Afterwards, my daughter suggested I practised while she was there to help. I felt silly crawling around the house, but now I feel much more confident about getting up on my own."*

# If you fall and can't get up

Follow these steps – and they will be a lot easier if you've already done a bit of forward planning.

## To get help

- Use your pendant alarm if you have one or call nearby neighbours on your phone – put them on speed dial now.
- Use your phone to call 999.
- Bang on the wall, radiator or floor.
- Stay warm. Cover yourself with anything you can find – tablecloth, blanket, rug or coat.
- Put a cushion under your head or roll up an item of clothing.
- Keep moving. Roll from side to side and move your limbs as pain allows to help keep you warm and maintain circulation.
- Keep your fluids up if you can reach a drink.

## Planning ahead

- It makes sense to prepare yourself and your home just in case the worst happens. Then you can get on with enjoying life, knowing that you've done the Groundwork.
- Make sure you've read the pages of this guide on how to make your house as fallproof as possible.
- Place cushions and blankets around the house at floor level so that, if you do fall, you can keep warm and comfortable while waiting for help.
- Use your common sense on placement: they need to be easily accessible but should be stored so they don't cause a hazard in themselves!

- Put a bottle of water with the cushions so you can stay hydrated while waiting.
- If you have a cordless landline phone, carry it in your pocket.
- Get a mobile phone if you don't already have one and keep it (switched on) in your pocket or on a belt.
- Programme in the phone numbers of neighbours or friends/relatives nearby who could help if you fell.
- Consider getting a community alarm. You wear it like a pendant, or on your wrist, and when you press a button the control centre will telephone your nominated key holder(s) so they can check on you.



*“I can’t tell you how humiliating and miserable it was lying on the floor, waiting two hours until my home help found me. Now I carry a simple old-style mobile phone - my grandson jokes that it’s ‘Grandpa’s brick’ - and I feel much safer.”*

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# In Case of Emergency

Keep these useful contact numbers near your phone in  
LARGE PRINT

## DOCTOR:

## NEIGHBOUR:

## GARDA STATION:

## USEFUL LINKS

### **Osteoporosis:**

Lo Call 1890 252751 or  
[www.Irishosteoporosis.ie](http://www.Irishosteoporosis.ie)

### **Alzheimers Society of Ireland:**

Call 1800 341341 or visit  
[www.alzheimers.ie](http://www.alzheimers.ie)

### **Carers Association:**

Call 1800 250724 or visit  
[www.carersireland.com](http://www.carersireland.com)

### **Acknowledgements:**

Dr. Christine McArthur- NHS Highland Falls Prevention Programme  
[saga.co.uk/falls](http://saga.co.uk/falls) (in association with CSP UK)