



# ABSOLUTE SCOOP

## DID YOU KNOW?

Fall risk increases as medication burden increases.

Any medication acting on the brain or affecting cardiovascular function can increase fall risk.



## FACTS ON FALLS

*Written by Amanda Mattingly, R.Ph., BCGP, BCMTMS, Consultant Pharmacist*

Falls are the number one cause of fatal and nonfatal injuries among older Americans. More than 1 in 4 adults aged 65 and older fall every year. These falls often lead to hospitalizations, hip fractures, and loss of independence. Over 95% of hip fractures are caused by falling. Most falls result from a combination of risk factors, including age, female gender, chronic conditions, and medication use. Falls can have a major impact on Quality Measures. CMS explains “falls are a leading cause of injury, morbidity and mortality in older adults” and “a previous fall, especially a recent fall, recurrent falls, and falls with significant injury are the most important predictors of risk for future falls and injurious falls.”

Fall risk increases as medication burden increases. Any medication acting on the brain or affecting cardiovascular function can increase fall risk. Some medications may cause troublesome side effects that can lead to falls. Medications should be reviewed routinely to see if they can be reduced, changed to a safer alternative, or discontinued. Deprescribing is essential to helping decrease polypharmacy and reduce fall risk. Your consultant pharmacist is specifically trained in medication review and management and is available to support these efforts!

### Common medications that may increase fall risk

Medication Class:	Side effects to watch for:
Opioids	Sedation, dizziness, CNS depression, delirium
Antipsychotics	Orthostatic hypotension, sedation, slow reflexes, impaired balance
Antidepressants	Drowsiness, impaired balance, orthostatic hypotension
Anxiolytics	Sedation, impaired cognition, unsteady gait
Sedative Hypnotics	Sedation, impaired cognition, unsteady gait
Antihypertensives	Orthostatic hypotension, dehydration, syncope
Muscle Relaxants	Sedation, reduced muscle tone
Anticholinergic medications	Blurred vision, confusion, urinary retention
Anticonvulsants	Drowsiness, slow reaction times, impaired coordination

### Medication Optimization Guidelines

- STOP medications when possible
- 🔄 SWITCH to safer alternatives
- ▼ REDUCE medications to the lowest effective dose

While identifying and reducing these medications is important, other strategies should also be evaluated and employed to reduce fall risk. As mentioned, most falls are caused by a combination of risk factors.

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By working to recognize and correct the following modifiable risk factors, we can help to reduce a person's risk for falling:

- Lower body weakness
- Difficulties with walking and balance
- Environmental hazards (rugs, poor lighting, handrails, clutter, etc.)
- Vision problems
- Foot pain or inadequate footwear
- Dehydration
- Vitamin D deficiency

Some other steps that may decrease fall risk include:

- Sit upright for at least 10 seconds before standing to avoid dizziness
- Perform strength and balance building exercises when possible
- A scheduled toileting routine may be helpful for residents with incontinence

Falls among our older adults are COMMON, COSTLY, and PREVENTABLE. The rising number of deaths from falls can be addressed by screening for fall risk and intervening to reduce patient specific risk factors. The CDC has developed the Stopping Elderly Accidents, Deaths, and Injuries (STEADI) initiative to help health care providers implement fall prevention. Several helpful tools and resources are provided at the link below to help members of the health care team manage their patient's fall risk. As a healthcare provider, your efforts can prevent many of these falls and fall-related injuries.

**Clinical Resources | STEADI - Older Adult Fall Prevention | CDC :**

[https://www.cdc.gov/steady/hcp/clinical-resources/?CDC\\_AAref\\_Val=https://www.cdc.gov/steady/materials.html](https://www.cdc.gov/steady/hcp/clinical-resources/?CDC_AAref_Val=https://www.cdc.gov/steady/materials.html)

## About the Author



*Outside of work  
Amanda enjoys  
cooking, playing  
tennis, and  
working on house  
projects.*

Amanda has been a consultant pharmacist for over 15 years. She joined Absolute Pharmacy in 2022, and since then has made a tremendous impact on our clinical services. Amanda enjoys the challenge of helping to solve the medication related issues of the senior population. Amanda is a graduate of Ohio Northern University and lives with her husband Josh and 11 year old twins Reese and Lincoln, and their dog Pepper.

**When do you go at red and stop at green?**

When you're eating watermelon.



**Why did the pineapple stop in the middle of the road?**

Because it ran out of juice.