

## Falls Among Older Adults – A serious public health problem in Washington State

### Key facts:

- 35% of people 65+ fall each year
- Those who fall are 2-3 times more likely to fall again
- 10% - 20% of falls cause serious injuries
- Falls among older adults are one of the leading causes of traumatic brain injury and hip fractures
- Fall prevention strategies are critical for aging in place and reducing Medicare costs

### In Washington State:

- Falls among older adults are the leading cause of injury-related hospitalizations
- In 2005 falls resulted in 12,200 hospitalizations and nearly 500 deaths among adults 65+
- By comparison, for motor vehicle occupant injuries, which are the 2<sup>nd</sup> leading cause of injury hospitalization, there were 2,663 hospitalizations *for all ages combined*.
- The age-adjusted fall death rate among older adults in Washington State has more than doubled between 1990 and 2005 from 29 to 60 per 100,000
- Washington's death rate due to older adult falls exceeds the national death rate
- Falls are a major threat to the independence and quality of life of older adults.
- Among Washington seniors who were hospitalized due to a fall in 2000, nearly two-thirds were discharged to nursing facilities for additional care.
- While many nursing home placements are short-term, falls remain a strong predictor of long-term placement in a nursing home.
- Adults age 65+ are the fastest growing segment of Washington's population

### Economic Impact

- In 2000, the total cost nationally of fall injuries among people 65+ was \$19 billion. In Washington, the cost of hospitalizations for falls among older adults exceeds hospitalization costs for injured motor vehicle occupants, for all ages combined.

### Leading Modifiable Risk Factors in Older Adults

- Muscle weakness
- Gait and balance problems
- Vision problems
- Psychoactive medications

### Interventions – What works?

Numerous studies and several meta-analyses indicate that there are effective interventions to prevent falls.

The two most effective interventions, in order of importance, are:

1. Comprehensive clinical fall risk factor assessment and management programs
2. Exercise for balance and strength

Leading approaches also include:

- Medication management
- Vision correction
- Reducing home hazards

### What are the key issues in sustaining falls prevention programs?

The RAND Evidence-Based Recommendations on Fall Prevention Interventions in the Medicare Population identified two key issues in sustaining falls prevention programs:

- Insufficient funding
- Lack of available programs

### **What is happening in Washington?**

- The Department of Health (DOH) completed a four year grant from the CDC to initiate and evaluate a community based falls prevention program, which is now being disseminated.
- DOH, in partnership with the Division of Aging & Disability Services, Department of Social and Health Services, is creating systems linkages, conducting professional education, and providing technical assistance to communities on senior falls prevention.
- A model falls prevention coalition that was formed in Pierce County through the CDC grant is serving as a state model.
- Local foundations have provided support for senior falls prevention projects to continue in Pierce County.
- The Washington Health Foundation has funded two falls prevention projects in rural communities
- Over 280 physical therapists and 120 physicians have received specialized training in fall risk assessment and intervention.
- Linkages between the EMS/Trauma system and the aging network are emerging at the state and community levels
- Widespread distribution of an educational pamphlet on staying active and avoiding falls (over 23,000 copies distributed in less than a year to Washington seniors) – copy enclosed.
- Ten communities have collaborative senior falls prevention activities underway (Pierce County, Thurston County, King County, Wenatchee, Walla Walla, Snoqualmie Valley, Lewis County, Kitsap County, Okanogan County, and Spokane County)
- Ten counties have exercise programs for older adults underway that have been evaluated for effectiveness in reducing fall risk factors
- For the second year, Governor Gregoire has issued a proclamation for Falls Prevention Awareness Day (this year September 20, 2007). Last year, the first proclamation spurred community activities in 14 locales statewide.

### **What else needs to happen?**

- Stable funding for state leadership and infrastructure, with a focus on supporting community partnerships to integrate best practices and systems integration
- Resources for local coalition leadership (seed money) to develop and implement local, collaborative strategies and referral networks
- Availability of low or no cost *evaluated* exercise programs for seniors in communities (*program costs impede program implementation and senior participation in classes*)
- Professional education for health care, emergency medical, and aging services systems on assessment of fall risk factors and effective interventions/preventive strategies/treatment, and available reimbursement mechanisms
- Resources for enhanced fall prevention interventions for seniors at higher risk for falling

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Contact: Ilene Silver, [ilene.silver@doh.wa.gov](mailto:ilene.silver@doh.wa.gov)