

Fall Prevention Interventions for Community-Dwelling Older Adults

Author Block:

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Primary Focus: Productive Aging

Learning Objectives:

At the conclusion of the session, the learner will be able to:

1. Recognize the impact of falls on community-dwelling older adults
2. Describe ways to include fall prevention interventions into current clinical practice
3. Discuss benefits of preventative interventions in regards to current healthcare trends

Abstract:

According to the Centers for Disease Control and Prevention (CDC), older adults (65+ years) are the largest growing population in the United States which comprises 14.5% of the total population (CDC, 2015). This population is estimated to almost double by 2030 to approximately 71 million Americans over the age of 65 (CDC, 2015). Unfortunately, research reports that 33% of home-dwelling older adults fall each year (Palvanen, 2014). After a fall, the older adult is two to three times more likely to experience additional falls. Ninety percent of older adults in the US want to remain living in their homes as long as possible (Farber, Shinkle, Lynott, Fox-Grage, & Harrell, 2011). This supports a vast need for fall prevention interventions to reduce the frequency of falls to allow the elderly to more safely age in place. Three databases, PubMed, CINAHL, and Ovid, were searched to address the question "What is the evidence for fall prevention interventions for decreasing the frequency of falls for community dwelling older adults?" Of the 1,957 preliminary results from the three databases, specific inclusion and exclusion criteria were applied to identify 14 articles to review critically. The inclusion criteria was English language, peer reviewed journals from 2011 to 2016, randomized controlled trials, fall prevention/intervention, older adults aged 65 year and older, community-dwelling, men and women, and outcomes directly linked to fall frequency or number of falls. The purpose of this presentation is to identify interventions for preventing falls in community-dwelling older adults. The findings of the critical review demonstrated that multi-component interventions are more effective in reducing the fall rate in older adults than physical exercise alone. Strong evidence supports perturbation training (inducing slips and trips) and stepping programs are statistically and clinically significant in reducing the frequency of falls in older adults. In this session, the audience will learn current effective fall prevention interventions for community-dwelling older adults. The findings will advance the field of occupational therapy by assisting to make the profession more widely recognized across the United States. The need for occupational therapy is relevant for increasing the safety and overall health of older adults while also minimizing the impact on the healthcare system.

References:

Centers for Disease Control and Prevention. (2015). Falls among older adults: An overview. Retrieved from <http://www.cdc.gov/HomeandRecreationalSafety/Falls/adultfalls.html>

Farber, N., Shinkle, D., Lynott, J., Fox-Grage, W., & Harrell, R. (2011). Aging in place: A state survey of livability policies and practices.

Palvanen, M., Kannus, P., Piirtola, M., Niemi, S., Parkkari, J., & Järvinen, M. (2014). Effectiveness of the Chaos Falls Clinic in preventing falls and injuries of home-dwelling older adults: a randomised controlled trial. *Injury*, 45(1), 265-271.

Other:

Level of material being presented: Introductory

Target Audience: Mixed Audience for CREATE Day (Family members of older adults, OT's, OTA's, faculty, researchers, and healthcare professionals)