Falling is not an inevitable part of aging. Through practical lifestyle changes the number of falls among seniors can be reduced substantially.

Falls are the leading cause of injury-related death and hospitalizations in Utahns aged 65+. These incidents are just the tip of the fall problem among older adults (Figure 1).1,2

Nearly one-third of Utah adults aged 65+ reported falling at least once in the past year.3

Every week, 179 Utahns aged 65+ are injured severely enough from a fall to seek treatment in an emergency department, 61 are admitted to a hospital, and three die.1,2

In 2012, 66% of fall-related injuries that required hospitalization among this age group occurred at home, with the most falls occurring in the bathroom (22%), followed by the bedroom (14%) and the kitchen (10%).4

Every 50 minutes Emergency Medical Services (EMS) is dispatched to the residence of an older adult with a complaint of a fall.5

As many as 30% of older adults who fall suffer significant injuries which may limit their ability to live independently.6

Utah and U.S. Trends

Falls are the leading cause of non-fatal injury-related hospital admissions in Utah for adults aged 65+.7 The rate of fall injuries in Utah was lower than the national rate since 2008 (Figure 2). Adults 65+ accounted for 75% of all fall-related deaths in Utah. The rate of fall injury deaths in Utah was higher than the national rate between 2011-2013 (Figure 3).
### Age and Sex

Females of every age group had a significantly higher rate of fall hospitalizations than their male counterparts (Figure 4). Utahns 85 years of age and older had the highest rates of both fatal fall-related injuries and fall hospitalizations.7

Sixty-eight percent of Utahns aged 65+ who were hospitalized for a fall sustained a fracture, nearly one-third of these were hip or pelvic fractures.4 Seventeen percent of falls resulted in a traumatic brain injury (Figure 5).4

Almost two-thirds of Utahns aged 65+ who were hospitalized due to a fall were discharged to residential care or a rehabilitation facility. Only 32% were able to return home. (Figure 6)4
FALLS AMONG OLDER ADULTS

Costs

In 2013, more than 3,000 Utahns aged 65+ who fell were hospitalized at a cost of $105 million (Table 1). The average hospitalization charge was $33,300.7

<table>
<thead>
<tr>
<th>Table 1. Falls hospitalization charges by primary payer: 2013</th>
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<tbody>
<tr>
<td>Self Pay</td>
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<tr>
<td>Other Government</td>
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<td>Industrial and Worker's Compensation</td>
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<td>Other Commercial</td>
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<td>Medicare</td>
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<td>Overall</td>
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Many falls can be prevented by addressing home safety, managing medications, receiving annual visions checks, and performing regular strength and balance exercises.

Hospitalizations

Two-thirds (65%) of Utahns aged 65+ who fell had four or more co-morbid conditions. The most common conditions were arthritis (40%) and diabetes (28%) (Figure 7).4

Nearly three of every four (72%) were taking four or more medications at the time of their fall. Thirteen percent were taking more than 10 medications.4 Among adults aged 65+ who were hospitalized for a fall, 21% were taking sedatives/hypnotics, 31% were taking antidepressants, and 51% were taking anticoagulants or antiplatelet medications (Figure 8).4
**Prevention Tips For Healthcare Providers**

- Increase multifactorial risk assessment and individually tailored interventions to address modifiable risk factors: strength, gait and balance, vision, home safety and medication management.8

- Encourage older adults to participate in an evidence-based community program to reduce falls, such as Stepping On, EnhanceFitness, or TaïChi: Moving for Better Balance.

**Prevention Tips For Older Adults**

- There are six easy ways for older adults to reduce the risk of falls:
  1. Begin a regular exercise program. Exercise improves strength and balance, as well as coordination. Your local Area Agency on Aging or local health department may offer exercise and falls prevention classes near you.
  2. Talk to your health care provider. Ask your doctor if you are at risk of falling. It’s also important that you tell your doctor if you’ve fallen before.
  3. Have your health care provider review your medicines. Some medicines or combinations of medicines can make you sleepy or dizzy and cause you to fall.
  4. Have your vision and hearing checked. Have your eyes checked by an eye doctor at least once a year. Poor vision can increase your chance of falling. It’s also important that you can hear properly, as your eyes and ears are key to keeping you on your feet.
  5. Make your home safer. Remove tripping hazards like throw rugs and clutter in walkways as well as books and papers from stairs. Install grab bars next to your toilet and shower.
  6. Talk to your family members. Ask your family for their help and support in taking simple steps to stay safe and keep you safe. Falls aren’t just a seniors’ issue.

**Resources**

- Centers for Disease Control and Prevention [www.cdc.gov/homeandrecreationalsafty/falls/](http://www.cdc.gov/homeandrecreationalsafty/falls/)

**References**

2. Utah Inpatient Hospital Discharge Data, Office of Health Care Statistics; Utah Emergency Department Encounter Database, Bureau of Emergency Medical Services, Utah Department of Health; 2009-2011 data queried via Utah’s Indicator-Based Information System for Public Health (IBIS-PH) [cited 2014 January].
5. Pre-Hospital On-line Active Reporting Information System; Bureau of Emergency Medical Services and Preparedness, Utah Department of Health.
7. Utah Inpatient Hospital Discharge Data, Office of Health Care Statistics, Utah Department of Health; 2009-2011 data queried via Utah’s Indicator-Based Information System for Public Health (IBIS-PH) [cited 2014 January].

If your life has been affected by a fall, the Utah Department of Health wants to hear from you. Share your story with the Utah Health Story Bank at [www.health.utah.gov/bhp/sb/](http://www.health.utah.gov/bhp/sb/).