



Foot & Practice

A foot health message from
Mawson Lakes Podiatry Clinic

Fall prevention in the elderly



Falls are a leading cause of morbidity and mortality in the elderly, yet are preventable through multidisciplinary approaches to fall prevention, incorporating podiatric care for patients over the age of 65. Podiatric complications are a significant contributor to falls in elderly patients, with the key risk factors for falls being:

- Age >65 years: a patient's risk of falling increases with age, with the highest risk affecting patients >85 years.
- History of falls: the probability of falling is more likely if the patient has suffered a fall previously.
- Decreased muscle strength: grip strength in the feet and muscle strength in the lower legs are crucial to maintaining balance and stability.
- Decreased range of motion in joints (particularly of the ankle): affects balance and ability of the joints to react quickly to stabilise the foot in the event of a trip or stumble.
- Polypharmacy: patient medications should be checked for any potential side effects that may cause dizziness
- Diminishing eyesight: cataract surgery should be recommended if it can improve eyesight.
- Cognitive impairment

Falls among patients over 65 years are a major burden on the public health system and on the community. According to the Australian Bureau of Statistics:

- One in three people over the age of 65 become injured through a fall every year
- The number of falls in elderly patients has increased by 400% in the past decade
- The most common cause of falls requiring hospitalisation is slipping, tripping, or stumbling on a flat, even surface, usually in the home; suggesting that most falls relate to unstable gait and foot problems
- Falls result in 1.3 million in-hospital patient days per year for over 65s
- The national cost of falls in elderly patients is estimated to be well over \$1 billion per year

Treatment advice for fall prevention should include regular screening for fall risk factors; referral to a podiatrist for balance and gait analysis, along with specialised podiatric care targeted at fall prevention; and patient education regarding appropriate exercise regimes, foot care and hazard prevention.



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