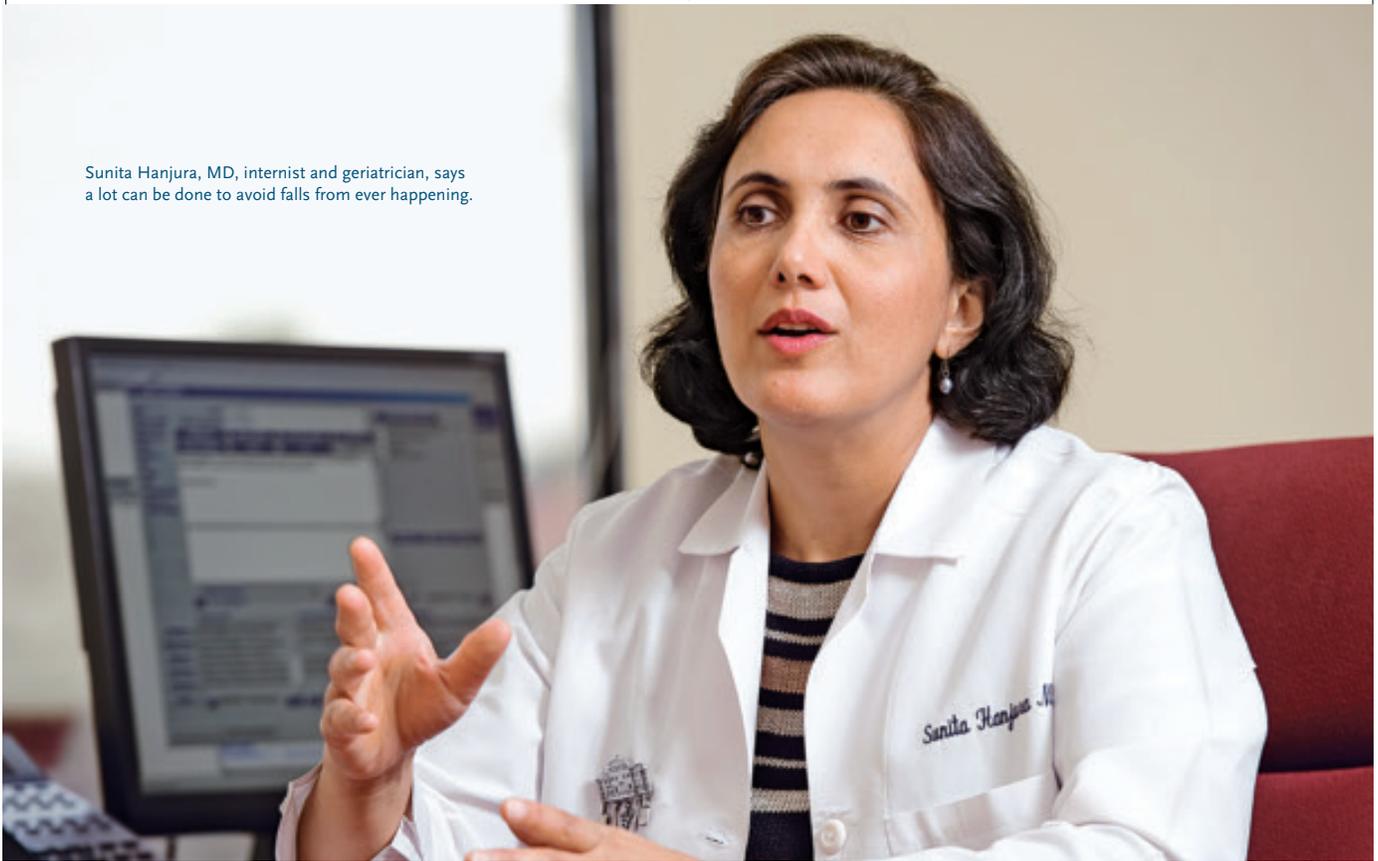


Sunita Hanjura, MD, internist and geriatrician, says a lot can be done to avoid falls from ever happening.



## EMERSON STAFF IS FOCUSED ON PREVENTING FALLS

Falls: not inevitable and not a normal part of aging

It is not uncommon, and it is always sad. When an injury caused by a fall forces an elderly individual to lose their independence and move to an assisted living facility or nursing home, family members are left to wonder: could the fall have been prevented?

That is the frustration with falls, which are the leading cause of injury to individuals over age 65. Often, it is only after the fall has occurred that the questions begin. Did Dad have osteoporosis? Did Mother's antidepressant play a role in her balance problem? Didn't we remove those scatter rugs?

### Addressing falls prevention in a range of settings

Emerson Hospital is focused on preventing falls in hospital rooms and in the homes of elders who live in the community. The hospital's Falls Prevention Committee works vigilantly to prevent falls among inpatients, Emerson Hospital Home Care assesses older individuals to determine their risk for falling at home, and the Better Balance Clinic evaluates and treats people with balance problems (see sidebar). Last spring, the hospital held a free Falls Prevention Conference at the Holiday Inn in Boxborough. More than 240 people attended the forum, which featured screenings and workshops on issues related to falls and their prevention.

Osteoporosis is part of the challenge. The porous, brittle bones caused by the condition make older men and women vulnerable; 87 percent of all fractures in this population are due to falls. "The statistics related to hip fractures are grim," says Sunita Hanjura, MD, an internist and geriatrician in Bedford who served as medical coordinator for the falls conference. "Some people can't re-learn to walk, which is what's required. Others get up, get moving and go home again."

There is a more global issue, she notes. "I believe the biggest problem is the sedentary lifestyle, which causes muscles to atrophy and people to become weaker and weaker. It can be a battle to maintain strength, especially when arthritis limits someone's ability to move around easily. But the fact remains: an exercise program or physical therapy will make a difference."

Exercise increases strength and preserves balance—the ability to keep one’s center of gravity over one’s base of support. Falls occur when the center of gravity, which is located just below the navel, moves past the point where one can recover by changing the base of support—the position of the feet.

Certain medications can interact and contribute to poor balance. “It is not uncommon for older patients to be on ten medications,” Dr. Hanjura explains. “Antipsychotics, antidepressants and anti-anxiety medication place them at greater risk for falling. So do poor vision, scatter rugs and wearing the wrong shoes.

“Regardless of what puts them at risk, my job is to support my elderly patients so that they are safe at home,” she says. “In some cases, that means bringing in a host of community services.”

### The goal: safety at home and in the hospital

Between 5 and 15 percent of elderly Americans live in a nursing facility, meaning that 85 to 95 percent are at home—often alone. Home is where falling happens, which is why Emerson Hospital Home Care staff are an important presence in the homes of community residents. Throughout the hospital, staff are quick to suggest that a patient receive an assessment by home care staff.

“Even if someone comes in for a blood test or a mammogram, if they seem to be unsteady on their feet, we can ask Emerson Hospital Home Care to screen that person at home to determine if they are at risk for falling,” explains Patti Shanteler, RN, MPH, director of nursing quality, who co-chairs the Falls Prevention Committee. “We have an active program in our Emergency Department [ED]. If an older individual comes to the ED because of a fall, we ask that home care staff do a safety evaluation.”

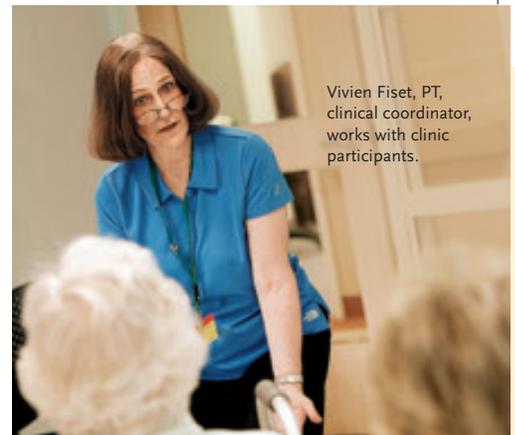
The Committee analyzes each fall that occurs at the hospital. “We look for contributing factors,” says Ms. Shanteler. “Do we need to make a system-wide change in how we provide care? Does the staff need additional education on the factors that contribute to falls? Our goal is to have zero falls at Emerson, so we’ve put several components in place.”

*“I believe the biggest problem is the sedentary lifestyle, which causes muscles to atrophy and people to become weaker and weaker....An exercise program or physical therapy will make a difference.” – SUNITA HANJURA, MD*

For example, patients who are at risk for falling have an orange sign at the entrance to their room that alerts staff. They wear orange “no-slip” socks. Their nurse anticipates and asks about their needs, such as a trip to the bathroom, rather than taking the chance the patient will get out of bed and fall. And they are not left in the bathroom, but are assisted back to their beds. At-risk patients who continue to get out of bed often have a “sitter” in the room—someone whose job is to keep the individual safely in bed.

Emerson’s track record of preventing falls is impressive, notes Ms. Shanteler. “We do particularly well at preventing falls that result in injury,” she says. “We keep careful statistics, so we know who tends to be the most vulnerable and when falls are most likely to occur. It is a man age 76 or older; they tend to fall in the late afternoon or evening.”

Emerson staff are focused on preventing falls, which includes raising awareness among family members. “Falls are not a normal part of aging,” says Dr. Hanjura. “There is a lot we can do together to avoid them from ever happening.”



Vivien Fiset, PT, clinical coordinator, works with clinic participants.

## BETTER BALANCE CLINIC

combines exercise with learning the facts

They stretch, warm up, exercise and listen. For one hour each week, participants of Emerson’s Better Balance Clinic move strategically under the watchful eye of physical therapy staff who aim to build their confidence and make them more sure-footed. In the process, they also learn the facts about balance and how to maintain it.

“We explain about one’s center of gravity, base of support and why the exercises are important,” says Terrie Enis, PT, MS, director of rehabilitation services. Individuals need a physician’s referral. “Some people have been diagnosed with imbalance, while others have conditions known to produce difficult walking. That includes Parkinson’s disease and other neurological disorders, having had total hip or knee replacement surgery or being de-conditioned due to a long hospital stay.”

The six-week class begins with an in-depth balance assessment. Participants must have adequate cognitive skills—i.e., can follow instruction—must be able to stand for 30 seconds independently, with or without an assistive device, and should be interested in participating in a group.

“Patients have a great time,” says Vivien Fiset, PT, clinical coordinator, “and they appreciate the opportunity to learn strategies to reduce their chance of falling.” That includes using the WiiFit, a computer fitness game aimed at improving balance. “We make it fun and interactive.”

*The Better Balance Clinic currently is held at Emerson’s Center for Sports Rehabilitation and Specialty Services in Concord on Fridays from 12:00 to 1:00 pm. For more information, please call 978-287-8200.*