

Evaluation and Prevention of Falls

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ABSTRACT

The baby boomer generation became older adults. Following generations didn't follow suit. Birth rates never attained post war era in western countries while life expectancy constantly increases throughout the World. The result is the graying population. This is a challenge not only for welfare systems, but also for health services. US citizens older than 64 years constitutes 50% of hospitalizations and 40% of health expenditures. Most crucial issue is whether we provide with our seniors a successful pattern of aging, or a frail one. And when it comes to successful ageing vs frail ageing, falling is a breaking point. Preferred definition of falls is 'Unintentionally coming to the ground or some lower level other than as a consequence of a violent blow, loss of consciousness, sudden onset of paralysis as in stroke or an epileptic seizure'.

Falls rather resembles frailty in terms of risk factors and consequences. Falls rates increases nine fold in population beyond 65 years old and it's annual rates ranges between 28-39% varying with different communities and study settings. Falls constitutes 14% of emergency admissions, 4% of all hospital admissions, 1% of all cause mortality while accounting for 40% of injury-related deaths. We will try and reveal the versatility of the risk factors of falls and then focus on preventive measures.