

PATIENT GUIDE

Physical Therapy for Balance and Fall Prevention



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About Fall Risk Assessment & Balance Treatment

Falls are the main cause of injury-related death for people over 65 years old. The U.S. Congress has supported fall prevention research and education since 2003, and passed laws to protect seniors from falls in 2006 and 2007. Medicare also advises all its patients to get a yearly Fall Risk Assessment.



A fall risk assessment is the first step for reducing fall risk and reducing the fear of falling.

A major problem confining older people to their homes is the fear of falling. In many cases, older adults are afraid to talk about this as they fear it will lead to a loss of independence.

Many seniors are afraid of falls, but even more are afraid to admit their fear. That's why **Medicare recommends that all Medicare patients receive an annual fall risk assessment.**

When followed, this recommendation helps address one of the most difficult aspects of balance and dizziness problems in the elderly— the fear of losing independence. Experts suggest that the often unspoken fear of losing independence, due to admitting to having a fear of falling, can be a significant obstacle to beginning prevention planning at the earliest opportunity. **Early intervention can provide the greatest chance to reduce the risk of a debilitating fall.**

Comprehensive Balance & Fall Risk Assessments Include Four Types of Evaluations

- 1 Individual Tests & Measurements
- 2 Physical Therapy Tests & Measurements
- 3 Drug Interactions and Adverse Side Effects
- 4 Home Safety



Individual Risk Factors & Physical Therapy Tests

Years of research has shown eleven risk factors that are most significant when assessing fall risk. The risk factors are listed below by their significance. **If you have one of the below risk factors, there is a 27% chance of a fall within 1 year. If you have four or more, chances are 78%.****

Common Risk Factors Ranked By Significance

1	Muscle weakness	7	Arthritis
2	History of falls	8	Impaired ability to do activities of daily living
3	Gait deficit	9	Depression
4	Balance deficit	10	Cognitive impairment
5	Use of an assistive device	11	Age > 80 years
6	Visual deficit		
			**Journal of the American Geriatrics Society: American Geriatrics Society/British Geriatrics Society Guidelines.

Physical Therapy Tests & Measurements

Individual Tests & Measurements

- **Muscle Strength:** A detailed assessment of the muscles in the legs is performed to identify key muscles that may be weak. An emphasis is placed on the muscles that are most active during standing, balance, and walking, as weakness in these muscles can lead to falls.
- **Balance:** Balance during standing and walking is assessed both on firm (tile) and uneven (foam) surfaces. A physical therapist will also assess your gait and ability to perform pivot turns to gauge safety in the home and community. Depending on the extent of the balance deficits, your balance may also be assessed with your eyes closed.
- **Functional Limitations:** A physical therapist may assess your ability to stand up from a chair, climb stairs, and traverse curbs to see where your baseline is. Overall, a physical therapist will give you exercises to help you restore and improve your individual functional limitations.



Drug Interactions & Home Safety

This information is not a substitute for medical advice from your doctor. However, your physical therapy balance and fall risk assessment will include a review of your medications and supplements.

Adverse Side Affects From Drug Interactions

As we age, we become increasingly susceptible to the adverse side effects and interactions of the medications we take. This fact is compounded by the likelihood that additional medications may be added over time to help manage newly diagnosed conditions.

As part of your fall risk assessment and prevention planning program, it's important to periodically review your symptoms and determine which ones may be due to medication. It's extremely important to avoid mistaking any adverse symptoms you may be experiencing for normal aging when they may be more directly related to adverse drug side effects and interactions.

Please do not stop taking any prescribed medication without consulting with your doctor. Many medications must be gradually weaned to avoid serious complications.

Home Safety

When you are prone to falling, your home can either support you or become a reason for your falls. The following is a list of common things that make a difference in lowering the risk of falls due to home hazards. Look around your home environment and think about your home is helping you avoid falling. You may need to change things to make it less likely that you will fall.

- Avoidable Trips – Remove all clutter, electrical cords, low furniture, area rugs, or other items that impede pathways.
- Handholds – Make sure sturdy handholds are placed room to room in case you feel unsteady or lose your balance.
- Lighting – Make sure lighting is adequate, especially in the bathroom, kitchen, hallway, and bedroom.
- Footwear – Avoid loose fitting slippers and wear comfortable shoes.
- Bath & Toilet – If you have difficulty getting into the bath/shower, or up and down from the toilet, consider assistive fixtures and equipment recommended by your physical therapist or medical supplier.
- Stairs – Consider adding additional handrails, or modifying a room configuration to improve safety in the home. Limiting the use of certain living levels may be necessary.
- Reach – Make sure all household items are accessible without extending, overreaching, or standing on tip-toes.
- Outside – In the places you walk outside, identify and fix areas with uneven or slippery surfaces, cracks, or other potential hazards.
- Help – Make sure you have a way to get help quickly should you fall or are unable to get up.



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