

HEAD OVER HEELS - BRIEFING SHEET

Podiatrists – your role in preventing falls in older people

Key points

- Falls are a major cause of significant injury and death in older people
- Foot pain, deformities, biomechanical, balance and gait problems experienced by many older patients contribute to an increased risk of falls
- Over 80 per cent of older people have one or more foot problems
- Inappropriate footwear also increases the risk of falls
- **Podiatrists can help patients reduce the risk of a fall by**
 1. Providing advice on the most appropriate footwear
 2. Maximising foot function
 3. Minimising deformities
 4. Making appropriate and timely referrals to other health professionals
 5. Making available to patients copies of the *Avoiding Slips, Trips and Broken Hips* booklets on keeping safer around the home and particularly on and around the stairs
 6. Making sure their own work place and its environs are well lit and hazard free

Falls are a major cause of death and disability in older people

Standard Six on Falls in The National Service Framework for Older People (2) has set councils, the NHS and all collaborating health professionals and voluntary agencies the major challenges of

- reducing the number of falls that result in serious injury
- and the establishment of specialist services primarily for those who have already fallen

Podiatry has an important part in play in reducing the risk of older people falling over. The National Service Framework requires NHS Trusts to set up specialist falls services. The inclusion of Podiatry on such teams is also a requirement.

Falls represent the most frequent and serious type of accident in the over 65s age group.

The home – whether private or residential – is the most common place for falls. 75% of deaths from falls occur in the home environment; the street is the next most likely place for such fatalities. (3)

Of those fatal falls in the home, 60% occur on the stairs resulting in almost 1,000 deaths of older people every year. (3)

Fifteen per cent of these deaths result from falls off a chair or out of bed (between two levels); the same number from a slip or trip on the same level, often caused by an object such as a rug. (3)

In addition, there are over 55,000 non-fatal falls on stairs or steps in the 65+ age group each year, 21% of these falls resulting in very serious injury and hospital admission. (1) Although the number of falls in the 'oldest old' are lower than in 'younger old' groups, many more significant fractures occur in the 85+ age group (3).

Many more falls remain unreported.

Reduced confidence and activity

Non-injurious falls also have a major impact on the health and outlook of older individuals.

The fear of future falls, combined with reduced levels of confidence, may reduce personal, social and physical activity, thus increasing the risk of falling again.

Isolation can also lead to increased risk of depression, which in turn increases the risk of falls.

Risk factors

Research has indicated a wide range of multiple risk factors for falls (4) including:

- physical disability and lack of mobility
- balance and gait disorders
- weak muscles associated with lack of exercise
- Vitamin D and calcium deficiency
- acute and chronic health problems such as stroke and heart disease
- impaired vision
- medication especially polypharmacy
- lifestyle factors such as alcohol use
- a history of previous falls
- environmental hazards

Research has also demonstrated a clear link between the incidence of foot pain and falls (5). Additionally, 80 per cent of older people have at least one foot problem.

Attention to the prevention of osteoporosis through exercise and appropriate diet, and the treatment of existing osteoporosis through drug and supplementation regimes, together with appropriate and safe activity, can also reduce the severest effects – fractures – of a fall.

Podiatry – appropriate interventions to reduce the risk of falls in the older population

As a podiatrist, you will know that older people benefit from your professional intervention in order to manage their foot problems and overcome their mobility problems.

Foot pain

Older people with foot pain walk more slowly and experience more difficulty in carrying out the activities associated with daily living than those with no pain. Additionally, older people who have foot pain are less able to balance and co-ordinate stability, especially when walking up and down stairs. Plantar hyperkeratosis may impair proprioception and therefore contribute to the risk of falling. (5)

Biomechanical and gait problems

Lesser toe deformities or other biomechanical problems that inhibit the anterior transfer of weight provide a significant indicator of an inability to balance. Accurate

diagnosis and appropriate intervention may help to maximise the function of the older foot and thus reduce the risks of falling. Where functional orthoses are not appropriate or well-tolerated, older people may benefit from palliative insoles.

Foot surgery

Many older people are suitable for foot surgery, providing that they have sufficient vascular supply to the foot. Procedures that may be undertaken on a day case basis can dramatically alter the functionality of the older foot by correcting deformities, such as Hammer toes and Hallux Valgus.

Inappropriate footwear

Poor footwear is frequently cited as a causative factor in falls. Footwear advice should be automatically included in Podiatric treatment and care plans. Particular emphasis for the older patient should be placed on the suitability, fit and effect on balance of footwear.

Research has shown that thin soled shoes, which also have a good grip, can aid mobility and reduce risk. Additionally, shoes with a high collar that hold the ankle firmly are also an aid to staying upright.

Physical activity

Exercise programmes aimed at increasing mobility and improving balance can help older patients to maintain their independence and quality of life by reducing the risk of falls. Care plans for older patients should include appropriate foot and lower limb exercises. Advice on general exercise may also be helpful.

Referral to other specialists

Older patients who are at risk of falling may need referral to other health professionals. GPs, physiotherapists and occupational therapists are all involved in falls prevention.

Additionally, the full range of health professionals should be made aware of the podiatrist's role in reducing the risks of falling. NHS departments should ensure the involvement of podiatrists in falls prevention initiatives and specialist falls services, as required by the National Service Framework for Older People (2)

Private practitioners in chiropody and podiatry should build communication and referral links with other health professionals at local level.

This material was prepared with the assistance of Anne Stephens, Society of Chiropodists and Podiatrists.

The Avoiding Slips, Trips and Broken Hips campaign from Health Promotion England and the Department for Trade and Industry provides a wide range of materials FREE OF CHARGE for both professionals and the public.

The materials are ideal for professionals wishing to extend their knowledge and develop their practice on falls prevention as part of their Continuing Professional Development.

How to avoid falls in the home

Advice booklet for older people – English, Welsh, Urdu, Punjabi, Gujarati and traditional Chinese

Advice for carers – English and Welsh

Advice on avoiding falls in the home – audio cassette

Step up to safety

Resource pack on stair safety – for professionals

Campaign poster

Advice booklet for older people on stair safety – English and Welsh

Advice on using the stairs safely – audio cassette

Factsheets – for professionals

1. Older people in the population
2. Older people and accidents
3. Older people, visual impairment and accidents
4. Promoting the health of older people: evaluating approaches and methods
5. Older people and physical activity

Call the DTI publications line: 0870 1502 500 to order your copies

Log onto www.preventinghomefalls.co.uk

References

1. *Statistics*, Resource pack on stair safety, Health Promotion England/ Department of Trade and Industry, 2000
2. *The National Service Framework for Older People*, Department of Health, 2001
3. *Older people and accidents*, Factsheet 2, Health Promotion England/ Department of Trade and Industry, 2000
4. *International review of interventions in falls in older people*, Easterbrook L *et al*, Department of Trade and Industry, 2001
5. *Foot pain impairs balance and functional ability in community dwelling older people*. Menz HB, Lord SR. JAPMA vol 91(5) 2001

Further reading

Guidelines for the prevention of falls in older people, American Geriatric Society/British Geriatric Society, J Am Geriatric Society 2001; 49: 664-72

Osteoporosis Facts and Figures, National Osteoporosis Society, www.nos.org.uk

Saving Lives: Our Healthier Nation, The Stationery Office, 1999

Further sources of information

Age Concern England, Astral House, 1268 London Road, London SW16 4ER

0800 00 99 66 www.ace.org.uk

Department of Health, Richmond House, 79 Whitehall, London SW1A 2NL 020 7210 4850

www.doh.gov.uk

Department of Trade and Industry, DTI Enquiry Unit, 1 Victoria Street, London SW1H 0ET

020 7215 5000 www.dti.gov.uk/preventinghomefalls

Help the Aged, 207-221 Pentonville Road, London N1 9UZ Seniorline: 0808 800 6565

www.helptheaged.org.uk

National Osteoporosis Society, P O Box 10, Radstock, Bath BA3 3YB 01761 471771

www.nos.org.uk

RoSPA Royal Society for the Prevention of Accidents, Edgbaston Park, 353 Bristol Road, Birmingham B5 7ST 0121 248 2000 www.rospa.org.uk

Published in association with the Society of Chiropodists and Podiatrists, 1
Fellmongers Path, Tower Bridge Road,
London SE1 3LY Tel: 020 7234 8620 www.feetforlife.org