

# Dementia: A Risk Factor for Falls



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# Statistics:

- People with dementia are 4-5X more likely to fall than older people who do not have cognitive impairments.
  - Annual incidence of falls in people with dementia is 70-80% (Shaw, et al 2003)

# Statistics:

- A study by Allan, et al (2005) noted risk factors related to gait or balance disturbances in:
  - 93% of people with Parkinson's dementia
  - 79% of people with vascular dementia
  - 75% of people with Lewy Body Dementia
  - 25% of people with Alzheimer's disease.
- Compared to 7% of the study control group.

# Statistics:

- People with dementia who fall have a 3X higher risk of sustaining a fracture than cognitively well people. (Van Dijk, 1993)
- People with dementia who fall are 5X more likely to be institutionalized than older adults with dementia who do not fall. (Morris, et al 1987)

# 7A's of Dementia

- **Anosognosia** – change in ability to have insight
- **Agnosia** – change in ability to recognize sensory input
- **Aphasia** – change in ability to communicate
- **Apraxia** – change in ability to coordinate movement
- **Altered Perception** – change in ability to interpret environment
- **Amnesia** – change in ability to retain information
- **Apathy** – change in ability to initiate tasks.

<http://www.alzheimer.ca/en/About-dementia/Dementias/What-is-dementia/Seven-A-s-of-dementia>

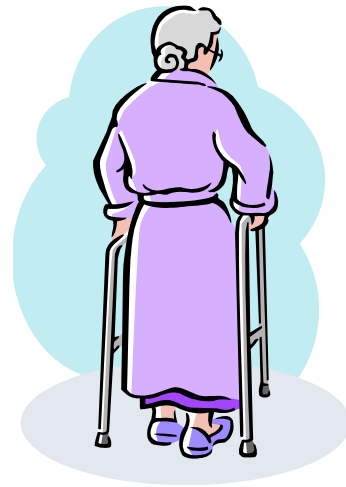
# Points to consider when a person falls:

- Is there a reversible or co-morbid cause for the fall?
  - i.e. Urinary tract infection, dizziness, confusion, hallucination, arthritis, Parkinsons, orthostatic hypotension
- Is the person experiencing pain?
  - Has the person sustained a nonvisible injury?
- Is the person taking multiple medications?
  - Is the person experiencing a reaction or over-medication?
  - Is the person using alcohol?



# Points to consider when a person falls:

- Has the person's mobility changed?
  - i.e. gait, balance, muscle cramping, rigidity
- Is the person restless?
  - Are they searching for someone or something?
- Is the person fatigued?
- Does the person have visual impairment?
  - i.e. cataracts, glaucoma, limited visual field or problems with visual perception
- Are there hazards in the environment?



# Multi-factorial Etiology of Falls

- A median of 4 risk factors for falls have been identified in cognitively impaired older adults. The most common risk factors are:
  - Impairment of gait and balance (99%)
  - Environmental hazards (80%)
  - Medication (70%)
  - Neurocardiovascular instability (60%)
    - Orthostatic hypotension (40%)





# Effective Interventions that Reduce Risk Factors of Falls in General Population

- Exercise
- Physiotherapy & occupational therapy
- Review of medication
- Treatment of orthostatic hypotension
- Withdrawal of psychotropic medications
- Environmental modifications

# When Communicating consider:

- **Attention**
  - Reduce distraction
  - Obtain eye contact
  - Introduce yourself



# When Communicating consider:

- Attention
- **Approach**
  - Consider tone of voice
  - Watch non-verbal communication
  - Use a “Come-along” approach

# When Communicating consider:

- Attention
- Approach
- **Instruction**
  - Use short, simple sentences
  - Give one step at a time
  - Use cues
  - Allow time



# Protective Considerations in the External Environment:

- **Ensure adequate lighting**
  - Increase lighting
  - Reduce glare
  - Limit shadows



# Protective Considerations in the External Environment:

- Ensure adequate lighting
- **Provide visual contrast**
  - Provide obvious colour contrast
  - Use solid colours with no patterns
  - Avoid black surfaces



# Protective Considerations in the External Environment:

- Ensure adequate lighting
- Provide visual contrast
- **Keep pathways clear**
  - Declutter
  - Ensure surfaces are level, dry and nonslip



# Protective Considerations in the External Environment:

- Ensure adequate lighting
- Provide visual contrast
- Keep pathways clear
- **Enhance accessibility**
  - Keep important items in consistent, visible places within easy reach
  - Lower the height of the bed; use a firm mattress
  - Provide adaptive equipment





# Protective Considerations in the External Environment:

- Ensure adequate lighting
- Provide visual contrast
- Keep pathways clear
- Enhance accessibility
- **Reduce noise level**
  - Decrease busyness in the environment
  - Consider going to a quieter area



# Protective Considerations in the External Environment:

- Ensure adequate lighting
- Provide visual contrast
- Keep pathways clear
- Enhance accessibility
- Reduce noise level
- **Ensure adequate footwear**
  - Check fit regularly
  - Use lace-up or Velcro closures
  - Check for proper soles
  - Use footwear suited to the weather

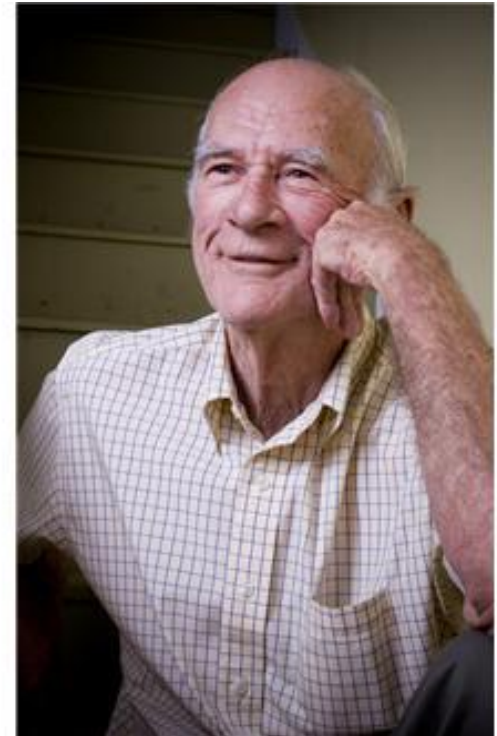


# Fall Prevention and Bathing

- Incorporate bathing into familiar routine
- Organize all items needed for bathing
- Adjust water temperature for safety
- Utilize adaptive equipment



The greatest outcome of a reduced incidence of falls for a person with dementia is increased quality of life.



# The Alzheimer Society of Manitoba



alzheimer.mb.ca  
204-943-6622 or  
1-800-378-6699

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