

Renfro, associate professor of physical therapy at Touro University Nevada.

The single most important intervention is exercise—but not just any kind. Notably, simply walking—the type of exercise most older adults get—won’t help unless seniors have previously been sedentary. “If you’re walking, by all means, don’t stop: It’s good for general health and well-being,” Phelan said. “But to prevent falls, you need to focus on strength and balance.”

Exercise such as tai chi or the Otago Exercise Program could improve strength and balance, advises Cameron of the National Council on Aging.

A national directory of resources to help older adults make home modifications is being expanded through a new program led by USC’s Leonard Davis School of Gerontology. Occupational therapists can evaluate homes and suggest changes to reduce your chance of falling. Ask your physician for a referral.

Your doctor’s guidance will be needed to review medications that can contribute to falls. Using three or more psychotropic medications such as opioids, antidepressants, antipsychotics, benzodiazepines (such as Valium) and “Z” drugs for sleep (such as Ambien) puts seniors at substantial risk, said Dr. Donovan Maust, an assistant professor of psychiatry at the University of Michigan Medical School.

• **Be careful during transitions.** Older adults coming home from the

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hospital or starting new medications should be especially careful about falling, because they may be weak, deconditioned, exhausted and disoriented.

A new paper from researchers at the University of Michigan and Yale University highlights this risk. They looked at 1.2 million older adults readmitted to the hospital within 30 days of being discharged in 2013 and 2014. Fall-related injuries were the third most common reason for readmissions.

In other studies, Geoffrey Hoffman, an assistant professor at the University of Michigan School of Nursing, asked seniors and caregivers about their experiences during discharge planning. None remembered receiving information about falls or being advised that they might be at risk.

• **Consider the message.** In research studies and focus groups, older adults report they don’t like negative messages surrounding falls.

“Telling older adults what they need to do to be safe feels patronizing to many people and raises their hackles,” Hoffman said.

Instead, seniors respond better to messages such as “taking these steps is going to help you stay independent,” Burns of the CDC said. □

WEEKLY DOSE

Sanitizer or soap?

You know the drill. Someone next to you sneezes and you immediately reach for your hand sanitizer. Phew, you’re safe! But not so fast—a new study out of Japan suggests that as long as your hands are still wet with the contaminant (usually mucus), your hand sanitizer is no match for the cold and flu bugs you are trying so hard to avoid. When researchers dabbed wet mucus harvested from people infected with the flu onto the fingertips of 10 brave volunteers, and then applied hand sanitizer, the ethanol didn’t kill the virus (even when left on for a full two minutes). In contrast, the study found that washing hands with lathered soap in running water for 30 seconds killed both wet and dry flu-infected mucus. So, next time someone sneezes on you, wash your hands for as long as it takes to sing Happy Birthday twice.

Source: CNN Health



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