Falls are a normal part of aging – aren’t they?  The truth is, they’re not.  While we might think, “It won’t happen to me”, the truth is that more than 1 in 4 older adults fall every year in the United States.  The good news is, most falls can be prevented if we plan ahead.

Falling is not a normal part of aging.  Strength and balance exercises, managing medications, having our vision checked annually and making our living environment safer are all steps we can take to prevent a fall.

Contrary to popular belief, staying at home and limiting our activity will not reduce our risk of falling.  More than half of all falls take place at home.  We can make our home a “falls-free zone” by removing hazards such as clutter, throw rugs and poor lighting.  Adding grab bars in the bathroom, a second handrail on the stairs and non-slip paint on outdoor steps can go a long way in helping prevent falls.

Performing physical activities will actually help us stay independent, as our strength and range of motion benefit from remaining active.  While we lose muscle as we age, exercise can partially restore strength and flexibility.  It’s never too late to start an exercise program – even if you have been a “couch potato”.  Becoming active now will benefit you in many ways, not just in fall prevention.  If you don’t feel steady on your feet, walking aids such as a cane or walking/hiking sticks may help.

Another common myth about falls is that we don’t need to get our vision checked each year.  Vision is another key risk factor for falls.  Aging is associated with some forms of vision loss that increase risk of falling and injury.  Have your eyes checked at least once a year – even if you have had corrective surgery to improve your vision – and update eyeglasses as needed.

Taking any medication may also increase our risk of falling.  Medications affect people in many different ways and can sometimes make us dizzy or sleepy.  In addition, if more than one medication is taken at a time, we should discuss with our health care provider how they might interact with one another and if it will increase our risk of falls.

Last, but not least, we should remember that fall prevention is a team effort.  Thinking that we don’t need to talk to family members or health care providers if we are concerned about our risk of falling is far from the truth!  Whether it is making your home safer or finding a fall prevention program in the community – the goal of your “fall prevention team” is to help you maintain your mobility and the highest degree of independence possible.
Do not fall victim to the common myths about falling. Be proactive. Take steps to make changes that will help prevent falls. You have the power to reduce your risk.

Source: National Council on Aging (ncoa.org/FallsPrevention). For more information on aging well, contact Kathy Goul at 913-294-4306 or via email at kgoul@ksu.edu.