Fall

(normally due to combinations of intrinsic and extrinsic factors)

Syncope/ presyncope

→ Cardiac causes
(CHF, aortic
stenosis,
arrhythmias, etc)
→ Non-cardiac
causes (vasovagal
responses,
orthostatic
hypotension,
carotid sinus
hypersensitivity)

Neurological/ psychiatric impairment

Neurological
issues

→Stroke

→Parkinsonism
→Cognition

Depression
(very common in elderly,
can have physical
manifestations! Can be
due to bereavement, ↓

→Others...

Sensory Impairment

Intrinsic

socialization, shrinking

social network, etc)

- →Bad vision (even with bifocals, feet are blurry when standing up)
 →Bad vestibular system
 - → Neuropathy

Reduced physical capacity

→ Weakness
→ Balance and gait
abnormalities
→ MSK pain (arthritis, etc)
→ COPD, diabetes (musclewasting pro-inflammatory
conditions)

Extrinsic

Drugs

→Polypharmacy (>4 meds)
→Psychotropic meds:
benzodiazepines, sedatives like
opids, anti-depressants, antipsychotics, anti-cholinergics,
diuretics (worsen orthostatic
hypotension, cause parkinsonism
which ↓ balance and corrective
movements, impairs
cognition/alertness).

Environment

→Rugs
→Stairs (esp w/ no handrails)
→Bad Lighting

→ Footwear (socks or bare feet ↑ falls at home)

Biggest risk factors for Falls:

- 1. Prior fall in last year
- 2. Impaired vision (cataracts, no glasses)
- 3. Impaired gait (weakness, pain)