

Injury Prevention Information Centre

Outcomes following serious falls at home among working-age adults

Background

Falls are the single largest cause of injury resulting in a hospital admission for New Zealanders and home is the commonest location for such injuries.¹⁻⁴ Fall injuries can result in ongoing disabilities which may present a significant burden on the health care system.

On average, seven New Zealanders aged 25 to 60 die each year as a result of an unintentional fall, and almost 3,500 are hospitalised. Just under a third of these falls occur at home.⁵

This fact sheet summarises findings from a study designed to estimate the burden of longer-term morbidity, disability and associated adverse consequences following unintentional falls at home resulting in admission to hospital among adults aged 25 to 60 years (defined as 'working-age' for the purpose of the study).⁶

The Fall Outcomes Study

The Auckland Fall Outcomes Study used a questionnaire to gather information on the longer-term impact of fall-related injuries at home that resulted in a hospital admission. The participants aged 25 to 60 years were recruited to this study from July 2005 and followed up approximately 15 months following their fall. The study successfully followed-up and interviewed 251 individuals recruited to this study, a response rate of 77% (251/328).

Main findings

- One quarter of people stated their health was worse 15 months after their fall compared to before their fall.
- 43% of participants reported a decrease in overall level of functioning at the follow-up interview compared to before the fall.
- Some participants reported limitations or restrictions in levels of participation in everyday activities:
 - 25% - reduced ability to undertake activities of daily living e.g. personal hygiene, cooking, cleaning
 - 14% - reduced ability to care for dependents e.g. children or elderly relatives, living with them
 - 12% - limited ability to undertake voluntary work
- One quarter of those employed at the time of the fall were either unemployed or required changes or assistance in the workplace to enable them to return to work at follow-up.
- Increased dependence on others following the fall was reported by 24% of participants.
- Psychological symptoms were common both before and after the fall. Almost 20% of people had symptoms of depression and/or anxiety prior to the fall; this increased to 33% at follow-up. *Fear of falling* was reported by 40% of participants and *post-traumatic stress* symptoms by 13% at follow-up.

43% of individuals who were hospitalised following a fall at home reported a decrease in their overall level of functioning 15 months following the injury.

Fear of falling and signs of depression and/or anxiety were commonly reported at follow-up (40% and 33% respectively).

Fear of falling: Fear of a subsequent fall that can lead to an individual losing confidence to perform daily activities safely.⁶

Post traumatic stress disorder: Stress incurred after a serious injury or any disturbing or frightening experience.⁵

- Predictors of adverse outcome at follow-up included:

Adverse outcome	Predictor/s
Reduction in functioning	Increasing age
Reduction in general health and functioning	Lower limb injuries
Psychological consequences	Female gender
Anxiety and depression	More severe injuries

Summary

This research indicates that falls at home result in substantial levels of longer-term adverse consequences including loss of productivity among working-age people in New Zealand. The persisting burden of injury in a previously productive population indicates the necessity for continued efforts in fall prevention and safety promotion in the home, and the need to implement and evaluate strategies that could minimize the risk of longer-term disability following falls.

Recommendations

- The identification and management of potentially avoidable longer-term physical, social and psychological consequences should be considered a high priority for this relatively young and productive population.
- There is an ongoing need to identify ways to improve the delivery and evaluation of acute and rehabilitation care.
- Most importantly, greater attention is required to prevent avoidable fall-related injuries among working age people given the substantial personal and societal burden due to these injuries.

Acknowledgements

This fact sheet is based on research conducted by Bridget Kool, Jo Williams and Shanthi Ameratunga at the School of Population Health, The University of Auckland. The project was funded by the Accident Compensation Corporation. We would like to thank the participants who agreed to take part in the Fall Outcomes Study. Fact sheet prepared by: Bridget Kool, Jo Williams, Shanthi Ameratunga, and Gay Richards.

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