

## EVALUATION OF FALL RISKS IN ELDERLY PATIENTS

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### OBJECTIVE

Falls among hospitalized elderly patients are a major public-health concern since these can cause loss of independence, injuries and sometimes patient death.

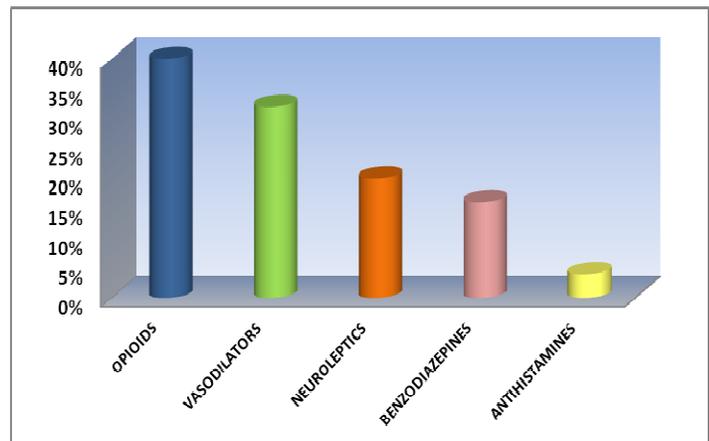
Objective of this study was to examine risk factors, especially drugs, potentially related with falls in elderly patients and to define possible actions.

### METHOD

A retrospective (May 1 2010-March 31 2013) study was performed at ISMETT, a 90-beds hospital. Patient characteristics (age/gender/body mass index, BMI), clinical conditions (diagnosis/comorbidity), ward (Intensive-Care-Unit, Step-Down-Unit, Cardiothoracic-Surgery-Unit and Abdominal-Surgery-Unit), length of stay, number of medications taken within three days before falling, injuries severity were recorded. According to STOPP (Screening Tool of Older Persons' potentially inappropriate Prescriptions) criteria, medications responsible for falls were analyzed. Data were collected from incident report forms and electronic medical records. Results were expressed in percentage.

### RESULTS

In the study period 49 cases were reported: 32 (65%) were male, 17 (35%) were female, 26 (53%) were older than 65 years, 20 (41%) were overweight, 27 (55%) were admitted for heart diseases. The main comorbidities were cardiovascular diseases (74%), anxiety/depression (26.5%), arthropathies (26.5%). Highest falls number was recorded in Cardiothoracic-Surgery-Unit (63%) and occurred in less than ten days from admission (51%). Sixty-seven % received more than ten drugs three days before falling. Injuries severity has been: mild (83%), moderate (15%) and severe (2%). Forty-six % (12/26) took at least one of STOPP criteria drugs, while 31% (8/26) two or more drugs (TAB. A).



**TAB. A** % of fall-risk related drugs, according to STOPP criteria, taken by elderly patients.

### DISCUSSIONS

Falls incidence is related to higher percentage of male patients, older than 65 years, overweight and with heart failures. According to STOPP criteria 77 % (20/26) of patients took drugs related to higher fall risk.

### CONCLUSIONS

Although it is difficult to draw definitive conclusions on drugs influential, it is important to monitor patient treatment. The pharmacist due to its contribution can highlight potential risks for patient and suggest dosing changes or medications associated with a lower fall risk.

