

Medications, Falls, and You

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Falls are one of the most common causes of injuries in older people, especially those 65 years and older. Falls can happen to even those who are seemingly strong and healthy. One of the risk factors associated with falling is the use of multiple medications.

Older people take three to five prescription medications and many take more than this. Unfortunately, many medications cause drowsiness, blurred vision, balance problems, and/or agitation, which can increase the chance of falling.

If appropriate, your doctor may be able to lower the dose of a medication, or switch to another with fewer side effects. More importantly, the following ten things that you can do for safer, more effective medication use to decrease the risk of falls and fall related injuries.

The ten steps you can take to help prevent medication related falls:

1. Take all medications to your doctor's office for review. By bringing in your prescriptions, over the counter medications, herbal products, and vitamins, your doctor can assess their safety and appropriateness.
2. Have a single doctor coordinate your healthcare. Make sure your doctor knows all of the medications you are taking and you feel comfortable reporting falls and near falls to them.
3. Fill your prescriptions at one pharmacy. This allows the pharmacist to maintain a complete list of your medications to screen for drug interactions.
4. Ask about calcium and vitamin D supplementation. It is well known that calcium and vitamin D will prevent fractures. Ask to make sure they will not interact with any of your current medications.
5. Take your medications as prescribed. Making changes to your medication regimen on your own can cause harm. Ask your pharmacist if you are still unclear how to take your medication after a doctor's visit.
6. Take your time getting up from a sitting or laying position. This is important if you are starting a new blood pressure medication since these medications may cause dizziness at first.
7. Have your vision checked and use vision aids if needed. It is important that you can read the

information on prescription labels and can see the medication you are about to take.

8. Install good lighting in your home. Be sure there is enough light to see what you are doing while taking your medications.

9. Use devices to help maintain your balance. This is important during and after you take medicine.

10. Stay healthy by limiting alcohol intake, not smoking, and practicing balance/strength training. [such as T'ai Chi.]

Common medications that may contribute to falls in the elderly:

Antidepressants: amitriptyline (Elavil), doxepin (Sinequan), imipramine (Tofranil) .

Antihistamines (for allergies): chlorpheniramine (Chlor-Trimeton), clemastine (Tavist), diphen-hydramine (Benadryl), hydroxyzine (Vistaril, Atarax)

Antihypertensives (for high blood pressure): clonidine (Catapres), doxazosin (Cardura), prazosin (Minipress), terazosin (Hytrin), nitrates, diuretics (water pills) .

Antipsychotics: chlorpromazine (Thorazine), clozapine (Clozaril), mesoridazine (Serentil), thioridazine (Mellaril) .

Benzodiazepines (for sleep, anxiety, nerves): clorazepate (Tranxene), chlordiazepoxide (Librium), diazepam (Valium), flurazepam (Dalmane), quazepam (Doral) .

Muscle Relaxants: carisoprodol (Soma), clidinium (Librax), cyclobenzaprine (Flexeril), dicyclomine (Bentyl), donnatal, hyoscyamine (Levsin), metaxalone (Skelaxin) .

Pain Medications: meperidine (Demerol), pentazocine (Talwin), propoxyphene (Darvocet)

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For more information on falls see our Summer 2007 issue. This is available as a download from our website:

<http://www.7starsma.com/resources/magazine.html> or as individual articles on:

<http://www.7starsma.com/articles/miscellaneous/articles.html>

The Balance Self Test

To help determine if you may be headed for a fall, take the Balance Self Test below. Simply answer yes or no to each question, and keep a tally of your answers.

1. Have you fallen more than once in the past year?

2. Do you take medicine for two or more of the following diseases: heart disease, anxiety, hypertension, arthritis, and depression?

3. Do you feel dizzy or unsteady if you make sudden changes in movement such as bending down or quickly turning?

4. Do you have black-outs or seizures?

5. Have you experienced a stroke or other neurological problem that has affected your balance?

6. Do you experience numbness or loss of sensation in your legs and/or feet?

7. Do you use a walker or wheel chair, or do you need assistance to get around?

8. Are you inactive? (Answer yes if you do not participate in a regular form of exercise, such as walking or exercising 20-30 minutes at least three times a week.)

9. Do you feel unsteady when you are walking, climbing stairs?

10. Do you have difficulty sitting down or rising from a seated or lying position?

Your answers:

Yes: _____ No: _____

If you answered 'yes' to one or more of the above questions, then you could have a balance problem and should consult with your physician.