

Falls are very common in older adults. They cause significant mortality and morbidity. Fall-related injury in later years of life is a major health concern, especially for those who have chronic conditions. Gait problems, a major contributor to the risk of falls and related injuries, can occur due to simple age related changes in gait and balance as well as specific dysfunctions following a period of inactivity in old age. The costs related to medical management, hospital stay, and rehabilitation of fall-related injuries are considerable. The consequent morbidity and dependency for daily activities may require assistance of family members (informal caregivers) or nursing aides (formal caregivers). Both types of assistance are associated with considerable direct and indirect costs. According to the World Health Organization global report on fall prevention in older age, risk factors for falls involve biological, environmental, behavioural, and socio-economic factors. Biological (intrinsic) risk factors include sex, race, age-related declines in strength, balance, vision, cognition, and chronic diseases. Behavioural risk factors include risky behaviours such as hurrying, sedentary lifestyle, and multiple medications. Socio-economic risk factors include low income, low education, inadequate housing, and limited access to health care services. Environmental (extrinsic) risk factors include physical environmental features in the home or community that may pose hazards, such as slippery or uneven surfaces, steps, and poor building design.

Fall Prevention includes awareness, assessment, and intervention. Awareness is critical for the success of fall prevention programmes. Culturally relevant educational programmes are required to improve awareness of older adults, their families, the community at large, health agencies, and the government. Educational programmes should emphasise the positive outcomes (health and functional independence) of interventions, positive self-image, and social participation. Media are powerful tools to increase awareness, as many older adults watch television for leisure.

Assessment of fall risk factors is important to develop effective fall prevention programmes. It is cost-effective and easier to prevent rather than treat falls. Fall-specific comprehensive assessments should be available at primary health centres for older adults. Screening for intrinsic risk factors can help identify at-risk older adults. Assessment of the home and bathroom for hazards is important, especially for older adults with a history of fall. Assessment of intrinsic factors is important for the old-old and oldest-old, whereas assessment of extrinsic risk factors is important for the young-old. Accessibility and safety of roads, public places, and transport services also need to be assessed. Interventions include multifactorial and multidisciplinary fall prevention programmes. Yoga can improve balance and gait. Home and bathroom modifications are important, especially for the oldest old, as they spend most of their time at home and most falls occur at home and in the bathroom. There is an urgent need for coordinated and collaborative efforts of health professionals, researchers, policy makers, and health care delivery systems to prevent falls and promote active ageing.