The Courtyard Clinic





Osteopathy/Physiotherapy Sports & Remedial Massage

- Back, Neck & Shoulder pain
- Joint & Muscle Injuries
- Headaches
- Arthritis
- Rib Pain
- Sports Injuries

Podiatry/Chiropody

- Toenail Problems
- Corns & Callouses
- Verrucae
- Diabetic Foot Checks
- Foot Odour
- Footwear Advice





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When do we stop 'falling over' and start 'having a fall'? There is definitely a change in vocabulary as we get older. One definition I read describes 'falling over' as caused by something else, like something we've tripped over. Whereas 'having a fall' is internal, something balance related. My favourite definition is that when you fall over, everyone laughs but when you have a fall, everyone panics! This can be for good reason as having a fall is statistically a very common cause of injury and disability as we get older. In fact, 30% of people aged 65 and over will fall at least once a year, this goes up to 50% in the 80+ age group. Falls are the number one cause of older people attending A&E. Around 5% of falls in the elderly result in a fracture and hospitalisation. However, the vast majority of falls could be prevented with some fairly modest changes to our lifestyle and homes.



Falls don't just affect the elderly, in fact in a society that is becoming increasingly sedentary, falls will start to affect more people at a younger age. There are many different factors that combine to make someone more likely to fall, these include:

- Muscle weakness: Loss of strength is a big cause of falls. This is not entirely age related, while we do lose muscle as we age, inactivity is a big factor in instability. Exercise can improve strength and flexibility at any age, it's never too late to start an exercise program. Even if you've been a "couch potato" your whole life, becoming more active now will benefit you in many ways, including protection from falls.
- Poor balance: As we age, most of us lose some coordination, flexibility, and balance, primarily through inactivity.
 Our balance mechanisms need exercise and will become deconditioned if unused. This makes it easier to fall.

Falls Prevention

Generally getting more active will be hugely beneficial to all aspects of health including balance.

- Visual impairment: Vision is another key risk factor for falls. Aging is associated with some forms of vision loss that increase risk of falling and injury. People with vision problems are more than twice as likely to fall as those without visual impairment. Have your eyes checked at least once a year and update your glasses if necessary.
- Medication: Medication may affect people in many different ways and sometimes cause dizziness or a drowsiness. Be careful when starting new medication. Talk to your GP about potential side effects or interactions of your medications.
- Environmental hazards: Over half of all falls take place at home. Inspect your home for fall risks. Fix simple but serious hazards such as clutter, throw rugs, and poor lighting. Replace those worn-out old slippers. Make simple home modifications, such as adding grab bars in the bathroom, a second handrail on stairs, and non-slip paint on outdoor steps.
- Medical conditions: More than 80% of older adults have at least one chronic condition like diabetes, stroke, or arthritis. Often, these increase the risk of falling because they result in lost function, inactivity, depression, pain, or multiple medications.



None of us like to admit we're having problems, and it is very common for people suffering just to struggle on.

There are some key signs that can help you spot if someone is having difficulties. Notice if they're holding onto walls, furniture, or someone else when walking or if they appear to have difficulty walking or arising from a chair. It can be hard to talk to parents, spouses, friends or other family members we are concerned about for fear of hurting their feelings. However, letting them know about your concerns and offering support sooner rather than later will maximise their chances of making improvements and help them maintain the highest degree of independence possible. Even if a fall does not result in an injury there is cyclic nature to falls that make them more likely to happen with each occurrence. A fall leads to loss of confidence, which causes someone to be less active, losing strength and stability and becoming ever more likely to fall again.



There are many things you can do to help straight away, including removing trip hazards in the home, checking footwear isn't too worn (old comfy slippers are a regular culprit for this) or setting up an eye check. Medically speaking, recurrent falls can be an indication that something else isn't quite right, so if it is an ongoing problem, you should get checked out with your GP.

A trained physical therapist can help improve balance, strength, and walking gait through treatment and exercise. At the Courtyard Clinic our Physiotherapist Victoria Duerden can provide a tailormade program to reduce your risk of falling and keep you steady and active.

If you have would like some advice or to book an appointment, please give us a call on 01621 842750.

The Courtyard Clinic - Osteopathy, Physiotherapy, Massage Therapy, Podiatry/Chiropody



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