

Falls and epilepsy



Falls in people in their later years can lead to death, injuries including fractures, a loss of mobility and independence, a fear of further falls and restriction of physical activity.

The cause of falls should be assessed to identify if any underlying medical condition such as epilepsy is the cause.

Falls and epilepsy in the later years

Around 10% of falls in people aged 65 years or over result in a fracture.

Falls in people in their later years can lead to fractures, a loss of mobility and independence, a fear of falling in the future, severe injuries requiring hospitalization such as a traumatic head injury, and an increased risk of death. Frequent falls with no recollection of what happened could be a symptom of seizure activity and epilepsy or other underlying medical conditions.

Ongoing falls can lead to the need for increased levels of support and potentially admission to a residential aged care facility. It is therefore important to ensure that falls are investigated and the cause identified.

What does this mean for the older person?

A risk management approach should be taken to prevent falls where possible, to help increase confidence, maintain independence and to ensure that the older person can live safely in the community or in an aged care setting.

It is best to see a doctor if there are any signs of changes in balance and mobility. Home assessment, assistive aids or protective wear may be recommended by the doctor such as, medical alerts, helmets, walking supports or an Occupational Therapist home assessment.



What can you do to help?

For an older person the loss of, or reduction of, independence can be a very confronting challenge to face.

Aged care workers and carers can assist the older person to identify suitable supports which can help them to maintain a safe and active lifestyle and reduce the risk of falls where possible.

Many falls can be prevented so it is important that fall and injury prevention strategies are implemented on a person centred basis. This is especially important for the person living with epilepsy.

There are several programs and services run by trained health professionals for preventing falls which are carried out

in the community, e.g. community rehabilitation centres, community health services and specialised falls clinics.

These programs and services can be accessed through the doctor, some of which may require a referral.

Exercise is also recognised as being beneficial for falls prevention, particularly functional strength and balance exercise such as yoga and Tai Chi. Studies have shown that balance can be improved, reducing the number of falls, through doing exercises that challenge the balance systems and improve strength and flexibility.

Where to go for further information?

Epilepsy Foundation

www.epilepsyfoundation.org.au

Australian Government Department of Health and Ageing

www.health.gov.au

Search: Don't fall for it. Falls can be prevented! – A guide to preventing falls for older people.

Victorian Government, Department of Health and Human Services

www.health.vic.gov.au

Search: Falls prevention: Information for health professionals

Monash University

www.monash.edu

Search: NoFalls Exercise Program: A program of fall reduction exercises for older people

NSW Government, Department of Health

www.activeandhealthy.nsw.gov.au

Search: Your active and healthy guide and Staying active and on your feet

This information sheet is part of a suite of resources that are targeted to aged care workers and carers of older people, to assist with caring for older people living with epilepsy.

The information contained in this publication provides general information about epilepsy. It does not provide specific advice. Specific health and medical advice should always be obtained from an appropriately qualified health professional.

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