



## OBJECTIVES

Fall in elderly is a major public health problem. Polypharmacy, which is defined as taking more than 4 drugs a day, is a major risk factor for falls in the elderly

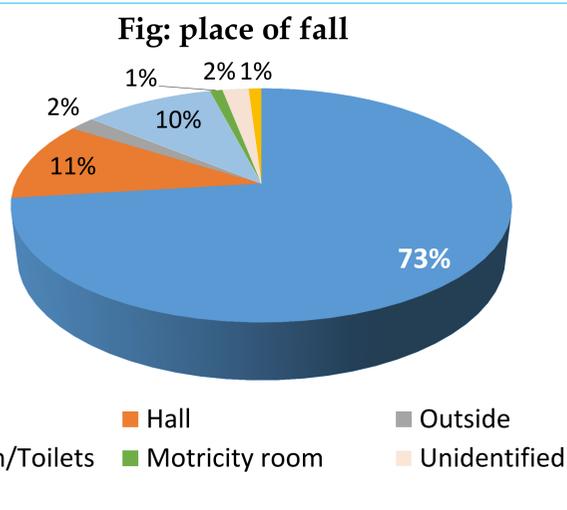
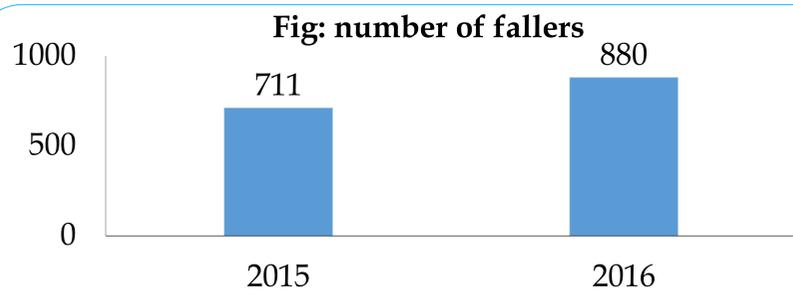
⇒ **The aims:** determine the frequency of use of drugs that increase the risk of falls and the impact of changes in these treatments in the occurrence of falls

## METHODS

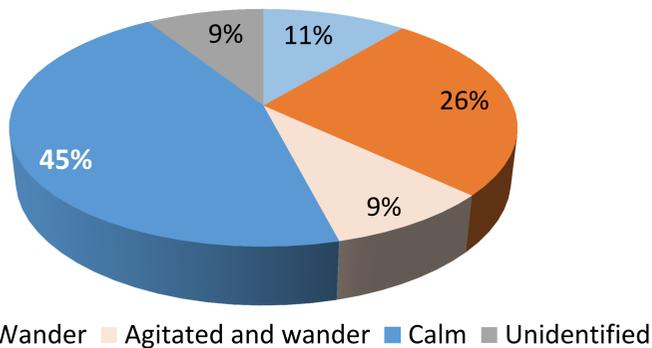
- ❖ Retrospective study of medical records of fallers in 2015 and 2016. The list of fallers was obtained from the fall reporting data
  - ❖ **First:** clinical characteristics of patients and environmental falls were analyzed
  - ❖ **Second:** pharmaceutical data of patients with a recent modification of their treatments were sought and type of recent modifications of these treatments

## RESULTS

### Clinical characteristics and environmental falls n=1591



### Fig: patient's condition during the fall



|                    |      |
|--------------------|------|
| No clinical signs  | 69%  |
| Wound, erosion     | 12%  |
| Pain               | 9%   |
| Hematoma           | 5%   |
| Fracture suspicion | 2%   |
| Sprain             | 0.1% |
| Hyperthermia       | 0.1% |
| Epistaxis          | 0.1% |
| Syncope            | 0.1% |
| Convulsions        | 0.1% |
| Unidentified       | 3%   |

Table. Clinical signs after the falls

⇒ **31% of patients had clinical signs**

### Pharmaceutical data n=244

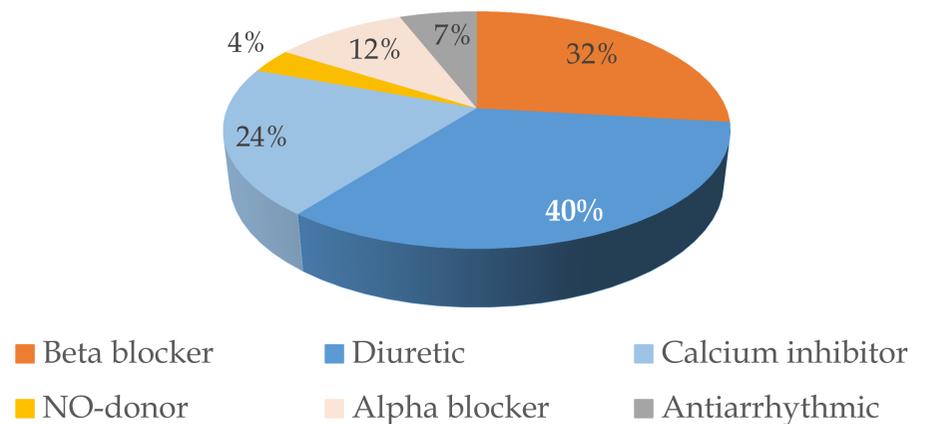
### Fig: modification of patient's treatments

15% of patients had a change in their treatment before falling

Number of drugs per patient per day=9

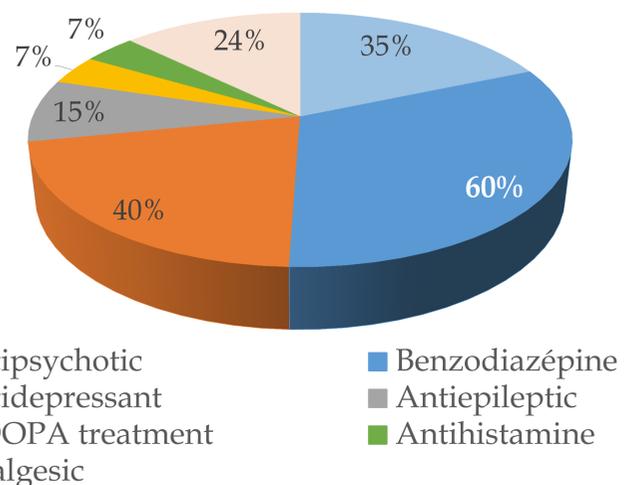
-Modification treatments:  
-Hypotensive: 24%  
-Inducing drowsiness: 65%

### Fig: distribution hypotensive treatments



⇒ 87% of patients have hypotensive treatments  
⇒ On average **1.86 hypotensive treatments/patient**

### Fig: distribution inducing drowsiness treatments



⇒ 91% of patients had inducing drowsiness treatments  
⇒ On average **2.38 inducing drowsiness treatments/patient**

## DISCUSSION/CONCLUSION

- ❖ The use of drugs that increased the risk of falling was common in our hospital
- ❖ The recent change in inducing drowsiness treatments seemed to increase the risk of falling
- ❖ Pharmaceutical interventions with prescribers on good prescribing practices in the elderly should be strengthened to minimize the use of drugs at risk of falling.

## ACKNOWLEDGEMENTS

❖ To the health Framework

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