



Annual Physical & Vision Exam and Medication Review Results from the Older Adults Falls Prevention Survey, 2012

Purpose

In 2012, Ottawa Public Health (OPH) conducted the Older Adults Falls Prevention Survey to meet a need for local data on older adults' falls prevention behaviours. It surveyed 1,050 non-institutionalized Ottawa adults aged 65 years and older by telephone.⁽¹⁾ This fact sheet summarizes results on the extent to which Ottawa seniors do the following fall prevention behaviours recommended by OPH^(2, 3):

- **Have a regular health exam with your doctor or nurse practitioner and report any falls;**
- **Have an annual eye examination; and**
- **Review medications on an annual basis with a doctor or pharmacist.**

A description of OPH, partner and community falls prevention services are provided at the end of the fact sheet. The results are intended to help service providers who work with older adults to tailor awareness and education campaigns on preventing falls, to support client education, and to inform program priorities and policy development.

Highlights of survey results

- 71% of seniors had their last general physical examination less than one year ago.
- Three quarters (75%) of seniors had their last vision examination less than one year ago.
- 43% of seniors take four or more different prescription or non-prescription medications on the same day. 79% of seniors taking four or more medications on the same day reported that they had talked to their family doctor, pharmacist or health care provider at least once in the past year about the possible side effects of the medications they were taking.

Background

As reported in the *Perception of Falls Risk and Protective Behaviours Among Older Adults* fact sheet,⁽⁴⁾ more than three quarters (77%) of Ottawa seniors think that having an annual eye examination reduces their risk of falling; while 56% of seniors said that reviewing their medications on an annual basis with a doctor or pharmacist reduces their risk of falling. Less than half (44%) of seniors know that taking four or more medications daily increases their risk of falling, while 31% think taking four or more medications daily has no impact on their risk of falling.⁽⁴⁾

Results

Annual medical and vision examinations

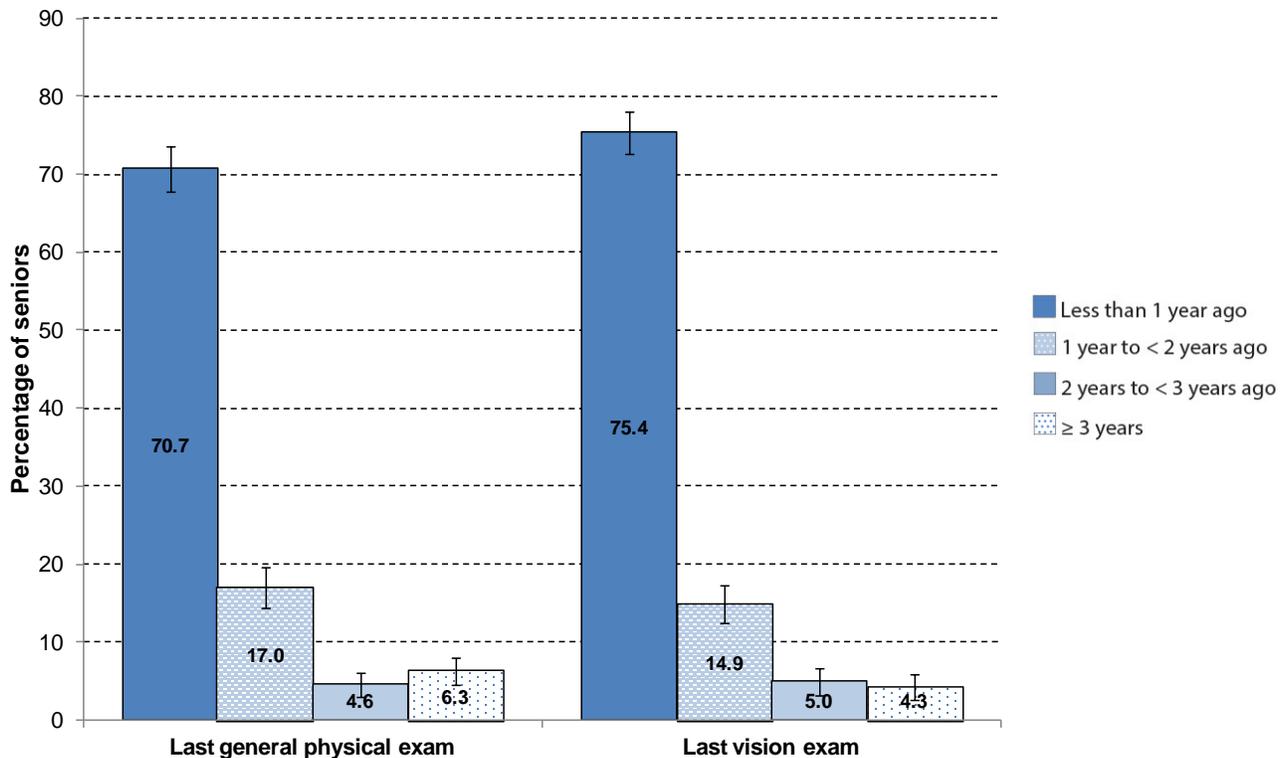
Last general physical examination

- 70.7% (67.7%, 73.6%) of seniors had their last general physical examination less than one year ago, while 17.0% (14.7%, 19.6%) had a general physical examination one to less than two years ago, 4.6% (3.4%, 6.1%) had an examination two to less than three years ago and 6.3% (4.9%, 8.0%) had their last physical examination three or more years ago. (Figure 1) This is not different by age, sex, income or education.
- Non-immigrants (72.7% (69.2%, 75.9%)) were more likely than immigrants (64.4% (57.9%, 70.5%)) to have their last general physical examination less than one year ago.

Last vision check-up

- Three quarters (75.4% (72.5%, 78.1%)) of seniors had their last vision examination less than one year ago, while 14.9% (12.8%, 17.3%) had their last vision examination one to less than two years ago, 5.0% (3.8%, 6.7%) had their last vision examination two to less than 3 years ago and 4.3% (3.1%, 5.9%) had their last vision examination three or more years ago. (Figure 1) This is not different by sex, income, education, or immigration.
- Seniors aged 85 and older (67.6% (61.5%, 73.1%)) were less likely to have their vision checked less than one year ago compared to those aged 75 to 84 years (79.9% (75.5%, 83.6%)).

Figure 1: Last time having a general medical examination and vision examination among seniors, Ottawa, 2012



Data source: Older Adults Falls Prevention Survey, Ottawa Public Health 2012. Based on self-reported data.

Medication Use and Review

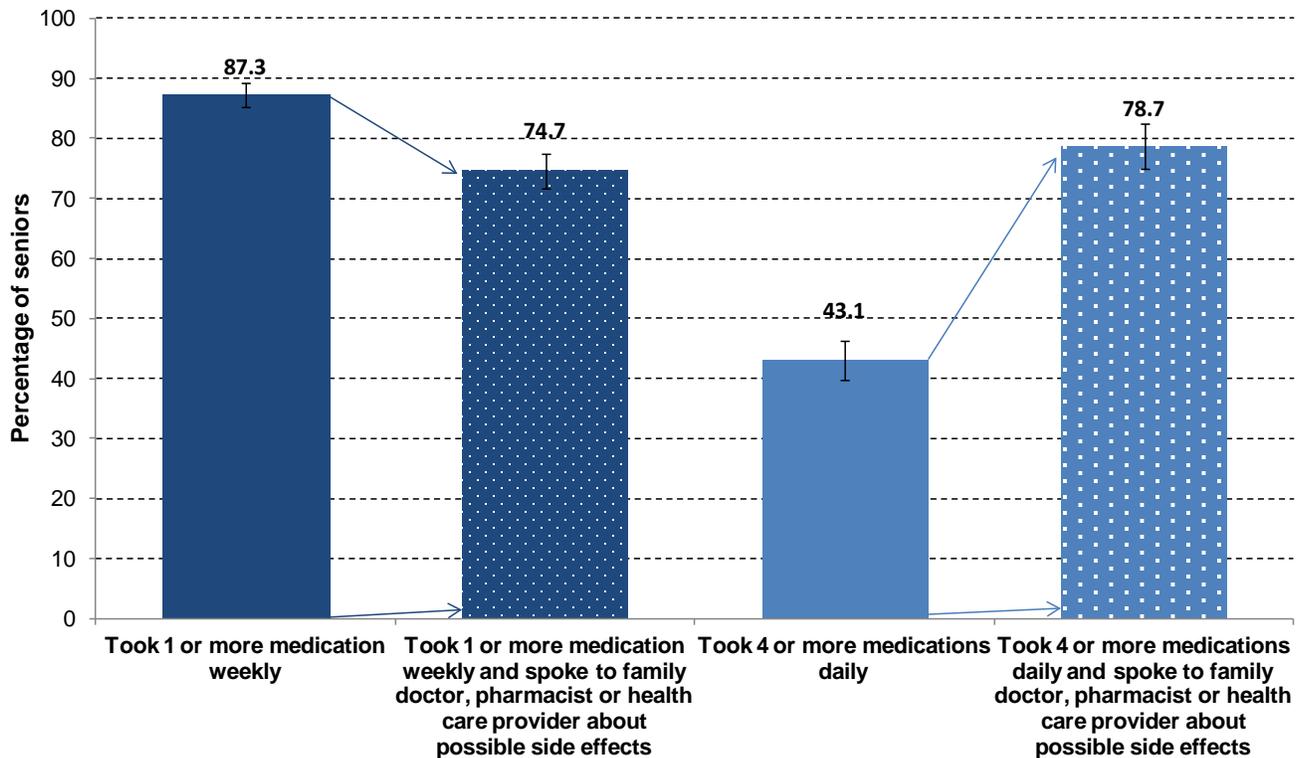
Taking at least one prescription or non-prescription medication in the past week

- 87.3% (84.9%, 89.4%) of seniors reported taking prescription or non-prescription medications in the past week. Three quarters (74.7% (71.6%, 77.6%)) of seniors taking at least one prescription or non-prescription medication reported that they talked to their family doctor, pharmacist or health care provider at least once in the past year about the possible side effects of the medication they were taking. (Figure 2)
- Older seniors aged 85 years and older (92.0% (87.9%, 94.8%)) were more likely than younger seniors aged 65 to 74 years (85.3% (81.5%, 88.5%)) to report taking at least one prescription or non-prescription medication in the last week.
- The proportion of seniors taking at least one prescription or non-prescription medication in the last week did not differ by sex, income, education, mother tongue language, or immigration status.

Taking four or more prescription or non-prescription medications daily

- 43.1% (39.9%, 46.3%) of seniors took four or more different prescription or non-prescription medications daily. 78.7% (74.5%, 82.4%) of seniors taking four or more medications daily reported that they had talked to their family doctor, pharmacist or health care provider at least once in the past year about the possible side effects of the medications they were taking. (Figure 2)
- The proportion of seniors taking four or more medications daily increases with age: 65 to 74 years (36.6% (31.9%, 41.5%)); 75 to 84 years (47.5% (42.6%, 52.5%)); 85 years and older (57.6% (51.4%, 63.6%)).
- Immigrants (33.7% (27.9%, 40.1%)) were less likely than non-immigrants (46.0% (42.4%, 49.8%)) to report taking four or more medications daily.
- The proportion of seniors taking four or more medications daily did not differ by sex, income, education, or mother tongue language.
- The proportion of seniors who took four or more medications daily and talked to their family doctor, pharmacist or health care provider at least once in the past year about the possible side effects of the medications they were taking did not differ by age, sex, income, education, mother tongue language, or immigration status.

Figure 2: Seniors' medication use and review, Ottawa, 2012



Data source: Older Adults Falls Prevention Survey, Ottawa Public Health 2012. Based on self-reported data.

Implications for programs and practice

Everyone can play an active role in preventing falls, from the clinician and service provider to the planner and policy maker. For example, we can:

1. Encourage older adults to report falls and near falls to care providers;
2. Increase access to primary care providers for older adults;
3. Organize community wide medication clean-outs; and
4. Educate older adults about side-effects from both prescription and over-the-counter medications.

What Ottawa Public Health does

Ottawa Public Health's (OPH) Fall Prevention Program carries out individual, group and community-level interventions to engage and support older adults in reducing their falls risks and adopting healthy living practices. OPH's efforts in addressing seniors' issues are enhanced by our relationships with community agencies and other city departments, for example, the Aging in Place Project in Ottawa Community Housing buildings.

Some of OPH's key activities include:

- The "Taking Care of My Health" Campaign and Community Awareness. Using a multimedia approach, the campaign includes articles in local newspapers, interstitials and messages on social media – information and tips posted on OPH website and Tweets.

- Education. Falls prevention messages, tips and demonstrations are also integrated into ongoing group education sessions and community events. These activities are carried out at seniors' apartment buildings, churches, seniors' centres and in other settings where seniors congregate.
- Screening Clinics and Referrals. Public Health Nurses organize and conduct screening clinics targeting older adults. The screening includes:
 - history of falls
 - gait and balance testing
 - postural hypotension

Older adults identified at risk for fall are referred to appropriate community resources for further assessment.

- The Friendly Corner is a health information and activity centre for seniors, managed in partnership with St. Laurent Shopping Centre, Ottawa Public Health, and a group of dedicated volunteers. A public health nurse and volunteers coordinate activities that promote healthy living enhance safety and independence for participants. For information call: 613-580-9620
- Supportive Environments. Ottawa Public Health participates in key regional and citywide coalitions and committees to support the development of programs and policies that help reduce falls risks and improve overall health of older adults in Ottawa.

OPH's key messages for seniors regarding falls prevention:

Have an annual check-up:

- Have a regular health exam with your doctor or nurse practitioner every year and report any falls
- Review your medications with your doctor or pharmacist every year
- Have your eyes checked every year for changes in their health and vision

Be active:

- Take part in at least 150 minutes (2.5 hours) of aerobic physical activity every week
- Minutes count-be active in blocks of 10 minutes at a time
- Do strength and balance activities like lifting weights and Tai chi at least twice a week

Eat for healthy bones:

- Eat 3 servings of foods high in calcium every day
- Take a daily vitamin D supplement of 400 IU

Make your home safe:

- Keep your home well lit and free of trip hazards
- Remove scatter rugs and loose carpets
- Add secure grab bars in bathroom
- Install sturdy handrails that extend to the bottom on both sides of your stairs

For more information on healthy aging programs offered by Ottawa Public Health, to book a group education session and to find out about screening clinic locations near you call:

613-580-6744

1-866-426-8885

TTY: 613-580-9656

www.ottawa.ca/health

Community resources

There are also many resources within our community that encourage older adults to adopt fall prevention behaviours.

Falls Prevention resources:

West End Integrated Falls Prevention Program

- Works with seniors, health service and community agencies to reduce the number of falls and their impact on seniors, their caregivers and the health care system through: assessment and intervention for high risk seniors, education, information and health promotion, and best practices education for practitioners. <http://www.pgchc.com/seniors/falls-prevention/>

Regional Geriatric Program of Eastern Ontario

- The program is a coordinated network of specialized assessment, treatment and rehabilitation services for elderly persons whose well being, independence, or functional ability is threatened by multiple health or social problems. <http://www.rgpeo.com/en.aspx>

Community Care Access Center

- The program coordinates professional health and treatment program in residents' home. <http://www.ccac-ont.ca/>

Reference documents can be found on:

- <http://www.champlainhin.on.ca/> Integrated Provincial Falls Prevention Framework & Toolkit
- <http://www.canadianfallprevention.ca/>
- <http://www.oninjuryresources.ca/>
- <http://www.findingbalancealberta.ca/>
- <http://www.preventfalls.ca/>
- <http://www.phac-aspc.gc.ca/seniors-aines/>

Additional Resources:

MedsCheck is a one-on-one 30 minute annual appointment with a pharmacist to review medications and help a patient better understand their medication therapy and ensure that medications are taken as prescribed. There is no cost to the patient. To learn more about MedsCheck talk to a **Pharmacist** or contact **INFOline** 1-866-255-6701

Health Care Connect helps Ontarians who are without a family health care provider (family doctor or nurse practitioner) to find one. People without a family health care provider are referred to a family doctor or a nurse practitioner who is accepting new patients in their community. Register by phone 1-800-445-1822 or on-line www.health.gov.on.ca.

To find an optometrist in your area contact the **College of Optometrists of Ontario** at www.collegeoptom.on.ca.

Visit www.champlainhealthline.ca for more information on additional community resources and programs.

Survey methods and data analysis

In this fact sheet, older adults or seniors are defined as adults aged 65 years and older.

Ninety-five percent confidence intervals (95% CI) are presented following the population estimates in smaller font and within brackets (e.g., 75.5% (72.4%, 78.3%)). 95% CI are used to describe the precision of the population estimate.

Only statistically significant findings are included for demographic breakdowns (sex, age, education, income, immigration, and mother tongue). 95% CI were not used to test for statistically significant differences; Chi-square tests ($p < 0.05$) were used first, followed by a Bonferroni correction ($p < 0.05$) to adjust for multiple comparisons.

The asterisk (*) indicates a high sampling variability in the responses from seniors to this category and the findings should be interpreted with caution.

See the Older Adults Falls Prevention Survey Methods Fact Sheet for more information.

Acknowledgements

This report was written by:

Katherine Russell & Jacqueline Willmore, Epidemiologists, Ottawa Public Health
Ginette Asselin, Myriam Jamault & Jacqueline Roy, Health Promotion and Disease Prevention, Ottawa Public Health

Special thanks to the following peer reviewers for their technical advice and review:

France Brunet, B.Sc., Health Educator Promoter, Eastern Ontario Health Unit
Robyn Hurtubise, M.A., Program Manager, Eastern Ontario Health Unit
Suzanne Shaw, RN, West End Integrated Falls Prevention Program & Primary Care Outreach to Seniors, Pinecrest Queensway Community Health Centre

References

1. Ottawa Public Health. Older Adults Falls Prevention Survey, 2012. Survey Methods. Ottawa (ON): Ottawa Public Health, 2013.
2. Scott, V. Fall Prevention Programming: Designing, Implementing and Evaluating Fall Prevention Programs for Older Adults. Raleigh, North Carolina: Lulu Publishing, 2012.
3. The American Geriatrics Society. AGS/BGS Clinical Practice Guideline: Prevention of Falls in Older Persons. [cited May 2013]. Available from: http://americangeriatrics.org/health_care_professionals/clinical_practice/clinical_guidelines_recommendations/prevention_of_falls_summary_of_recommendations
4. Ottawa Public Health. Older Adults Falls Prevention Survey, 2012. Perception of Falls Risk and Protective Behaviours Among Older Adults. Ottawa (ON): Ottawa Public Health, 2013.