Are Your Medicines Increasing Your Risk of a Fall or a Car Crash?

Older adults (65 years and older) are at a greater risk if they:

- Use any medicine with side effects that can cause problems with how they think and remember, and the way their bodies perform.
- Take multiple medicines daily with these side effects.

How can I reduce my risk of falling or having a car crash?

- Use the Personal Medicines List to make a list of the medicines you take. Include all prescription medicines, over-the-counter medicines (OTCs), dietary supplements, and herbal products.
- Use the Personal Action Plan to help guide your conversation with your doctor or pharmacist at least once a year, or when you change your medicines.

Ask your doctor or pharmacist these questions:

- What is this medicine used for?
- Does this medicine interact with others I am taking?
- Could this medicine have side effects that might change my ability to drive safely or increase my risk of falling?
- Is there another medicine or dose I should try?
- If I stop or change this medicine, what side effects should I expect?

Side effects of prescription medicines, over-the-counter medicines, dietary supplements, and herbal products may cause falls or car crashes.

Download the Fact Sheet, Personal Medicines List, and Personal Action Plan at www.cdc.gov/motorvehiclesafety/older_adult_drivers/meds_FS
As we age, our bodies process what we eat and drink—including medicines—differently. A medicine that worked well in the past could start causing side effects now or in the future.

What are some side effects to look out for?

- Changes in vision
- Changes in awareness
- Loss of balance
- Slower reaction time
- Fainting, or passing out
- Muscle weakness
- Lack of muscle coordination
- Tiredness
- Sleepiness
- A drop in blood pressure when you stand up from sitting or lying down—also known as postural hypotension—that causes dizziness, lightheadedness, or fainting.
- Lower alertness level or difficulty concentrating, leading to:
  - Lane weaving,
  - Increased risk of leaving roadway, or
  - Hesitant driving (second-guessing or over-correcting).

For more information visit:
www.cdc.gov/motorvehiclesafety/older_adult_drivers/mymobility

The medicine categories and examples listed below can contribute to falls or car crashes.

- **Opioid or narcotic pain medicines:**
  - Oxycodone (e.g., OxyContin, Roxicodone)
  - Hydrocodone (e.g., Lortab, Vicodin)

- **Anti-depression or mood medicines:**
  - Fluoxetine (e.g., Prozac)
  - Amitriptyline (e.g., Elavil)

- **Anti-anxiety medicines:**
  - Diazepam (e.g., Valium)
  - Alprazolam (e.g., Xanax)

- **Prescription and OTC sleep aids:**
  - Zolpidem (e.g., Ambien)
  - Diphenhydramine (e.g., Benadryl)

- **High blood pressure/heart medicines:**
  - Metoprolol (e.g., Toprol, Lopressor)
  - Amlodipine (e.g., Norvasc)
  - Furosemide (e.g., Lasix)

- **Muscle relaxing medicines:**
  - Carisoprodol (e.g., Soma)
  - Cyclobenzaprine (e.g., Flexeril)

- **Anti-psychosis or mood stabilizing medicines:**
  - Risperidone (e.g., Risperdal)
  - Quetiapine (e.g., Seroquel)

**Note:** This is not a complete list of all medicines or potential side effects. The examples provided are some of the most frequently used medicines in each category.