FACT SHEET

Medications Linked to Falls

Review medications with all patients 65 and older. Medication management can reduce interactions and side effects that may lead to falls.

STOP medications when possible.
SWITCH to safer alternatives.
REDUCE medications to the lowest effective dose.

Check for psychoactive medications, such as:

- Anticonvulsants
- Antidepressants*
- Antipsychotics
- Benzodiazepines
- Opioids
- Sedatives-hypnotics*

Review prescription drugs, over-the-counter medications, and herbal supplements. Some can cause dizziness, sedation, confusion, blurred vision, or orthostatic hypotension. These include:

- Anticholinergics
- Antihistamines
- Medications affecting blood pressure
- Muscle relaxants

Develop a patient plan that includes medication changes, and a monitoring plan for potential side effects. Implement other strategies, including non-pharmacologic options to manage conditions, address patient barriers, and reduce fall risk.

Visit the American Geriatrics Society Beers Criteria for more information on medications linked to falls.

CDC's STEADI tools and resources can help you screen, assess, and intervene to reduce your patient's fall risk. For more information, visit www.cdc.gov/steadi

*Antidepressants include TCAs and SSRIs. Sedative-hypnotics include eszopiclone, zaleplon, and zolpidem.

Centers for Disease Control and Prevention
National Center for Injury Prevention and Control

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STEADI Stopping Elderly Accidents, Deaths & Injuries