

FALLS

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

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

- Anticholinergics
- Medications affecting blood pressure
- Antihistamines
- 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.

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

For information on the SAFE Medication Review Framework, visit www.cdc.gov/steady

For information on the American Geriatrics Society 2015 Beers criteria, visit www.ncbi.nlm.nih.gov/pubmed/26446832



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