Summary of USPSTF Draft Recommendation Interventions to Prevent Falls in Community-Dwelling Older Adults

December 2023



What is this draft recommendation about?

Falls are a common problem among older adults and a leading cause of injury and death in this age group. The Task Force looked at several ways to prevent falls. Exercise interventions include either supervised individual physical therapy or group exercise classes. Multifactorial interventions include assessing an individual's risk of falling and developing a personalized plan to address the risk, such as nutrition therapy, education, and reviewing and adjusting the medications that a person takes.



What does the USPSTF recommend?



The USPSTF recommends exercise interventions to prevent falls in community-dwelling adults 65 years or older who are at increased risk for falls.



The USPSTF recommends that clinicians individualize the decision to offer multifactorial interventions to prevent falls to community-dwelling adults 65 years or older who are at increased risk for falls. Existing evidence indicates that the overall net benefit of routinely offering multifactorial interventions to prevent falls is small. When determining whether this service is appropriate for an individual, patients and clinicians should consider the balance of benefits and harms based on the circumstances of prior falls, presence of comorbid medical conditions, and the patient's values and preferences.

So, what does that mean?

To help prevent falls in older adults, healthcare professionals should recommend exercise for adults 65 or older who live at home and are more likely to fall. Healthcare professionals also should talk with their older patients about whether additional interventions might be helpful to reduce their risk of falling.



Who is this draft recommendation for?

This recommendation is for community-dwelling adults 65 years or older who are at increased risk of falls. "Community-dwelling" means living at home and not in nursing homes or other live-in care settings. Risk level is determined by a healthcare professional and based on many factors such as age and history of falling.

This recommendation is not for people who have certain medical conditions, such as Parkinson's disease or dementia, for which interventions to prevent falls are part of their regular care.



Why is this draft recommendation and topic important?

- Falls are the leading cause of injuries in older adults and can lead to serious disability and even death.
- More than one in four older adults fall each year, and more than one in 10 have a fall-related injury.
- Reducing the risk of falls is important because it can improve the physical well-being of older adults.



Interventions to Prevent Falls in Community-Dwelling Older Adults



What are the benefits of interventions?

For all older adults at increased risk of falling, exercise can help prevent falls and fall-related injuries.

Multifactorial interventions can also be beneficial, but the benefits are smaller, and they are not a good fit for all older adults. Healthcare professionals can talk with their patients to decide whether multifactorial interventions are right for them.



What are the harms of interventions?

The Task Force found that the harms of exercise and multifactorial interventions are small. Harms can include minor injuries from exercising.



Where can I learn more?

Older Adult Fall Prevention (Centers for Disease Control and Prevention)

STEADI—Older Adult Fall Prevention (Centers for Disease Control and Prevention)

Falls and Falls Prevention (National Institutes of Health)



How can I send comments to the Task Force about this draft recommendation?

Visit the USPSTF website to read the full draft recommendation and submit a comment.











The Task Force welcomes comments on this draft recommendation.

Comments must be received between December 5, 2023, and January 8, 2024.

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All comments will be considered for use in writing final recommendations.