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Media Statement

LINK BETWEEN DEPRESSION, MEDICATION AND FALL INJURY

New research has prompted calls for fall prevention to be a priority in treating older Australians with depression.

A study published in the international journal *PLoS ONE* today has found depression and antidepressant medication significantly increases the risk of falling and associated injuries for older people.

The findings show that people who are 60 years or older with depression or taking antidepressants are 50 per cent more likely to fall than people without symptoms or medication.

The paper reports that older people with any degree of depression are up to 70 per cent more likely to have multiple falls and injury than those without depression.

Research Director, Professor Osvaldo Almeida from the WA Centre for Health and Ageing based at the Western Australian Institute for Medical Research (WAIMR) said the risks associated with antidepressant medication had not previously been reported in such a large community group.

“We’ve found symptoms and medication for depression significantly increases the risk of falls, and those at highest risk were taking SSRI’s, a commonly prescribed antidepressant,” he said.

“One of the high risk groups identified in the study were women 80 years or older, with depression, taking an SSRI – more than 60 per cent of these women fell in the last year.

“These findings have highlighted how crucial it is that strategies to prevent falls become a routine part of helping older people with depression and part of the process of prescribing medication to treat it.”

The survey also found older people who fall are twice as likely to be depressed compared with those who do not; that women were more likely to sustain injury from a fall than men; and taking any antidepressant and having ideas about self-harm, stroke, arthritis or more than three medical problems were associated with falls.

Every year, up to 35 per cent of older people fall every year and almost a quarter of them need medical attention while 68 per cent of sustain injury.

Of the 21,900 Australians 60 years and older surveyed, almost a quarter reported at least one fall in the past year, 11 per cent had injured themselves through falling and nearly 10 per cent had needed to see a doctor because of a fall.

“Among those we surveyed, thousands could be classed as being at high risk because around one quarter said they had depression symptoms and more than 10 per cent were taking some form of antidepressant,” Professor Almeida said.

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“We would strongly urge older people as well as their GPs and carers to make use of proven, inexpensive prevention programs to reduce the risk of falls and injury, such as lower leg strengthening, balance retraining, exercise programs as well as home hazard assessment and modifications including lighting, removing obstacles and transfer rails.

“We’d also encouraging family members to be aware of fall prevention and taking action in making modifications to homes that will help older relatives prevent falls.”

The research conducted at the WA Centre for Health and Ageing in conjunction with Associate Professor Ngaire Kerse at the University of Auckland was funded by the National Health and Medical Research Council.

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