



Aging & Chronic Diseases

Development of an exercise programme for falls prevention

How can we ensure optimal exercise delivery for falls prevention?

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Falls are a leading cause of mortality for older people with multifactorial aetiology and potential modifiable risk factors. Evidence supports exercise to reduce rate and risk of falls by 29% and 22%, respectively, however variation exists in exercise programme delivery.

This large multi-centre RCT used a 3 arm approach to compare effectiveness of 1) advice only; 2) advice with exercise; and 3) advice with Multifactorial Falls Prevention assessment (MFFP) over a 6 month period. The population consisted of community dwelling older adults deemed at moderate or high risk of falling.

The Otago exercise programme (OEP) was selected following review of evidence and consensus work, and subjects were encouraged to walk 30 minutes twice per week if safe. The OEP can be tailored and includes 5 lower limb strength and 12 dynamic balance exercises lasting 30 minutes. The OEP was completed 3 times per week and subjects were given an exercise calendar to facilitate adherence. Therapists were observed to ensure protocol adherence and given training.



Balance and strength was assessed using the chair stand and four test balance score. Face to face and telephone contacts were completed 3 times over 6 months to complete an exercise treatment log, assessments and progress exercises.

Effectiveness will be reported on trial conclusion. If effective the programme should be easy to replicate and deliver with the detail of description given.

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