



Parkinson's
Disease Society

Falls and Parkinson's

Introduction

Loss of balance and falling can be common in Parkinson's and are caused by many factors. Each individual experiences Parkinson's differently, so not everyone will experience falls. It is important though to be aware of the risk, as it is more common to fall as the condition progresses. Statistics show that if you have had a fall, you are much more likely to have another within the next six months.

Therefore, if you have fallen, don't hide the fact but seek help from your doctor, nurse, physiotherapist or occupational therapist. It is important that they are informed of any falls as they can check that you have not injured yourself, and can help you to find ways of minimising the risk of more falls. Although there is no way that anyone can totally exclude this problem, some precautions can be taken to reduce the likelihood of them occurring. There are three areas of concern when managing falls:

- physical problems
- effect of medication used to treat Parkinson's
- hazards in and around your home

Physical reasons for falling

As Parkinson's progresses there can be physiological changes to posture, which can become more stooped, and changes to muscle tone, which can become more rigid. These changes contribute to the risk of falling.

Some people fall because they experience 'freezing' or problems initiating movement. Freezing is a symptom of Parkinson's that causes the person affected to stop suddenly while walking. They are unable to move for several seconds or minutes. Freezing often happens in doorways and a person can feel like their feet are stuck to the floor, or they find that their feet don't move as easily as they would like. Freezing and initiation problems can leave someone feeling unsteady on their feet and can also contribute to the risk of falling.

A combination of falls and osteoporosis increases the risk of fractures. If you fall it is worth discussing an assessment of osteoporosis with your doctor.

Some tips to help overcome physical reasons for falling include:

- You may find it helpful to get into a rhythm when you walk, by counting each step in your head, singing a tune to yourself, marching on the spot or stepping over patterns on the floor. If there is someone with you when you freeze, the other person can help you by putting their foot in front of yours, helping you to step over the other person's foot to start walking again. If trying this, it is important to raise your foot above theirs or you will trip over. It is also important not to step backwards as this can lead to a loss of balance.
- Try to concentrate on walking and keep distractions to a minimum. This may mean that you need to ask family or friends not to talk or distract you when you walk. There are more tips on overcoming freezing in the PDS information sheet *Freezing*.
- If you need to turn, try to avoid doing so too quickly.
- Don't pivot on the spot. It is better to take a few extra steps and walk around in a half circle or imagine that your feet are stepping round following the numerals of a clock face. Always take your time.
- Some walking aids may be helpful for people with Parkinson's who are unsteady on their feet. However these aids must be the correct height. Be aware that they can also be a hindrance and a cause for tripping. Before you start using a walking aid, it is very important to get advice from a physiotherapist, as some walking aids (such as Zimmer frames) are not always recommended for people with Parkinson's.



- Try to avoid footwear with rubber bottomed soles or slippers or trainers as these have a tendency to stick to the floor. Leather soled shoes are better for people with Parkinson's, but can be slippery on some floors. An occupational therapist can advise on suitable footwear and ways of making the environment easier to manage. There is information about footwear in the PDS information sheet *Clothing*.
- Some people have found that a hip protection system can be helpful in preventing fractures when they fall. These are pads worn over the hips, which can be slipped into specially designed underwear. The benefit is that they reduce the impact on the hip if you fall, but they can be unpopular, as they can make your hips bulge, and the need for special clothing can be unappealing for some people. An occupational therapist or an orthopaedic department in a local hospital should be able to advise on where you can get these.

Parkinson's medication

Most of the drugs used to treat Parkinson's can cause a lowering of blood pressure as a side effect. This can lead to dizzy spells that may lead to falls. If this happens, ask your doctor or practice nurse to check your blood pressure in the sitting and standing positions. Inform your doctor if you continue to have dizzy spells or falls. Drugs used to treat other conditions, such as those used to treat high blood pressure problems, can potentially make this problem worse. See PDS Information Sheet *Low Blood Pressure and Parkinson's*.

Ensure that you take your medication as prescribed. If you find that it doesn't seem to be working as well as it used to, it may mean you need to have your drugs reviewed. Some dizzy spells can be avoided by taking your time during activities. For example, when rising from a chair to the standing position don't immediately walk away from your chair but stand for a while until you feel steady. When you have just sat up ready to get out of bed, allow

your feet to dangle on the floor for a few minutes before you stand up. Then rise slowly.

Hazards in and around your home

Slippery, polished floors, trailing cables, and general clutter left on the floor can all be hazards for you to trip over and fall. Loose carpets or throw rugs can be particularly dangerous. An over-affectionate pet can sometimes create problems by jumping up on you or getting under your feet. An occupational therapist can provide further advice on ways of reducing hazards.

- Clear as much clutter away as you can. Arrange furniture so that moving around the house is as easy as possible. If this includes heavy furniture, don't try to do this on your own, but ask your family and friends to help.
- Apply non-slip mats in the bathroom. Hand or grab rails may be useful in tight spaces, such as toilets, bathrooms or by the stairs.
- Lighting is important. Make sure the house is well lit, especially at night.
- Apply strips of coloured tape to the edge of steps to reduce slipping and to make them more visible.
- Keep commonly used items close to hand and ensure you have contact numbers nearby in case of an emergency. You may wish to change your telephone to a cordless model so that you can carry it with you.
- If you go out alone, it may be safer to carry a mobile phone.
- Don't rush, even if tempted by a ringing phone or someone at the door.
- Those who are particularly vulnerable to falls find that a community alarm system can be helpful. Some people wear a small device which may be a clip on their shirt, a pendant or a bracelet, which has a button to alert an emergency response centre, who



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then summon help for you. Your local Social Services can provide details of local schemes. Aid-call is run by Age Concern. These systems do carry a small cost.

- Floor coverings can be hazardous. Some carpets can cast visually misleading shadows which may give the impression that there is a step on the floor where there isn't. This can cause people to fall. The shadow effects of adjoining, but different carpet piles, can also be visually confusing. Patterned carpets may help or hinder, depending on designs – a checked pattern can sometimes be helpful, as this gives the person with Parkinson's a pattern that is easy to follow when walking.
- If an occupational therapist visits you, they may apply strips of tape or plastic footsteps on the carpet. They act like stepping stones and can be helpful in places where the carpet shadows can be confusing or where the person may be more likely to fall, such as a tricky turn on stairs, or in doorways.

General advice

- Try not to let the risk of falls stop you doing what you want to do, as long as it is sensible.
- Try to keep active and exercise regularly, as this will help you maintain your mobility and can prevent falls. The PDS publishes an exercise video and booklet, *Keeping Moving* (£18 for video and booklet).
- Falls can be the start of a vicious cycle. You can start to restrict some of your normal activities to prevent them happening again. The result of this is more joint stiffness, muscle weakness and more importantly, a loss of confidence. In turn, this will increase the likelihood of falls because of poor physical conditioning. Make sure you seek help.

Professionals who can help

If you are experiencing falls, we suggest you seek advice from your GP or hospital doctor.

Information Sheet

The following professionals can also help.

Chartered physiotherapists

These are highly trained health professionals who use physical treatments, including exercise, to prevent or reduce stiffness in joints and to restore muscle strength and mobility. They can also advise or train carers in safe and appropriate ways of helping someone with mobility problems. As well as giving you exercises to help maintain your posture and balance, they can advise you on ways of preventing or reducing your risk of falling. If you have had a fall, or are prone to falls, the physiotherapist will teach you ways of getting up off the floor, help you get going again, and restore some of the confidence you might have lost as a result of falling.

Referral to a chartered physiotherapist is usually made through your GP or hospital doctor or Parkinson's Disease Nurse Specialist. Some private chartered physiotherapists advertise in yellow pages. The Chartered Society of Physiotherapy also has a register of private physiotherapists who specialise in the treatment of neurological conditions, such as Parkinson's.

Occupational therapists

Occupational therapists are also highly trained health professionals who help people with disabilities to achieve maximum function and independence. They assess an individual's ability to carry out the activities of daily living and advise on ways of making homes and workplaces more safe and manageable. This may involve advice about appropriate aids and equipment, or adaptations. For example they can tell you where best to place a grab rail to help you get in and out of the bath, or up from the toilet. Sometimes their help may involve giving you selected tasks that will help you to improve your ability to perform certain activities, such as tying shoelaces, or cooking. Occupational therapists are also skilled in advising and encouraging leisure activities that will promote physical and mental wellbeing.



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Occupational therapists can be contacted directly in some areas through the local Social Services, or by referral through your GP, hospital doctor or Parkinson's Disease Nurse Specialist. See the PDS leaflet, *Occupational Therapy and Parkinson's*.

Parkinson's Disease Nurse Specialists

These are experienced Registered General Nurses (RGNs) who have undertaken a special course in Parkinson's. They can provide you with support and advice to help you manage your condition. They also play an invaluable liaison role between other health and social care professionals and may be able to link you to other support services to help you with problems relating to Parkinson's. Unfortunately they are not yet available in every area, but it is worth asking your GP or hospital doctor if there is one in your area.

Useful Addresses

Age Concern

Astral House, 1268 London Road, London, SW16 4ER. Tel: 0800 00 9966

For information about the Age Concern Aid-Call service, telephone freephone: 0800 052 3616. The Aid-Call website address is: www.aidcall.co.uk

Chartered Society of Physiotherapy

14 Bedford Row, London WC1R 4ED
Tel: 020 7306 6666 Website: www.csp.org.uk

Department of Trade and Industry

This organisation has produced a booklet called "Step Up to Safety", which has practical tips on how to use the stairs safely, advice on lighting and carpeting. It is available in PDF format on the website: www.dti.gov.uk or available free of charge from: The DTI Publications Order Line, Admail 528, London, SW1W 8YT. Tel: 0845 015 0010.

Rescue Project

The Rescue project was a EC funded project that investigated a cueing therapy programme to improve walking, including freezing and balance problems, in Parkinson's. Information

Information Sheet

sheets about cueing have been developed for people with Parkinson's disease and their carers, and a CD Rom has been produced for physiotherapists. Details can be found on the project website: www.rescueproject.org

Robinson Healthcare Ltd.

Waterside, Goyt Side Road, Chesterfield, S40 2YF. Telephone: 01246 220022
Website: www.robinsoncare.com

ROSPA (The Royal Society for the Prevention of Accidents)

Egbaston Park, 353 Bristol Road, Egbaston, Birmingham B5 7ST
Tel: 0121 248 2000; Fax: 0121 248 2001
Email: help@rospa.co.uk
Website: www.rospa.org.uk
ROSPA publish a number of leaflets about the prevention of accidents.



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