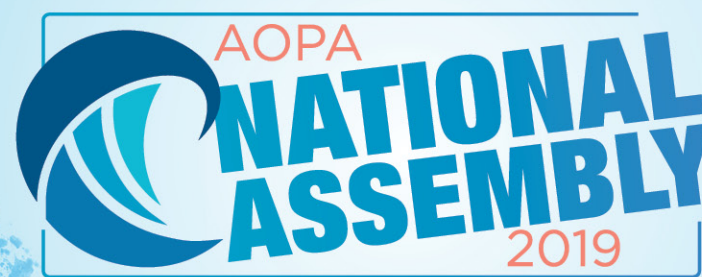


IS THE ALLIED HEALTH FIELD “PASSING THE BUCK” REGARDING FALL TRAINING?

Charles Noble¹, Goeran Fiedler¹

¹University of Pittsburgh



Driving the Waves of Change

SEPTEMBER 25-28 / 2019

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Introduction

Falls are the leading cause of fatal injury in older adults. One in four able-bodied adults over the age of 65 falls every year.¹ However, the rate is doubled (52 percent) in this population.² Risk factors included proximal amputation level and limited prosthesis experience.² Aside from efforts to reduce the rate of falls, there are many ways to mitigate the seriousness of a fall. Fall training interventions have shown excellent outcomes in reducing risk of injury from a fall.³ However, there is limited literature on fall training with amputees. Prosthetists may have neither the education nor the time to administer fall training on a regular basis. This study investigated whether sufficient fall training is provided to the lower limb amputee community.

Methods

A comprehensive literature review informed the composition of an online survey (Table 1), which, after IRB review, was posted on the Amputee Coalition website. A two-tailed t-test was used in Excel to determine any differences ($\alpha=0.05$) in fall rate between people who had and had not received fall training.

Table 1: Selected items from the questionnaire.
Additional items covered demographics, physical fitness, and prosthesis experience

Question	Answer options
Have you fallen within the last three months?	<ul style="list-style-type: none">• Yes, with/out hospitalization• No
Have you been trained to properly fall to prevent injury?	<ul style="list-style-type: none">• Yes• No
Have you been trained to stand after a fall?	<ul style="list-style-type: none">• Yes• No
Have you ever taken a Martial Arts or Tai Chi class?	<ul style="list-style-type: none">• Yes• No, but would be interested• No

Conclusion

The results show that lower limb amputees are not receiving fall training in most situations. However, lack of fall training did not seem to affect the frequency and seriousness of falls.

Results

A total of 180 responses (169 complete) were recorded. The majority (69%) of respondents reported having received no fall training (Figure 1). No significant effect of fall training was detected. Forty percent of respondents who received fall training reported a fall in the past three months, compared to 48% of those who had not received training

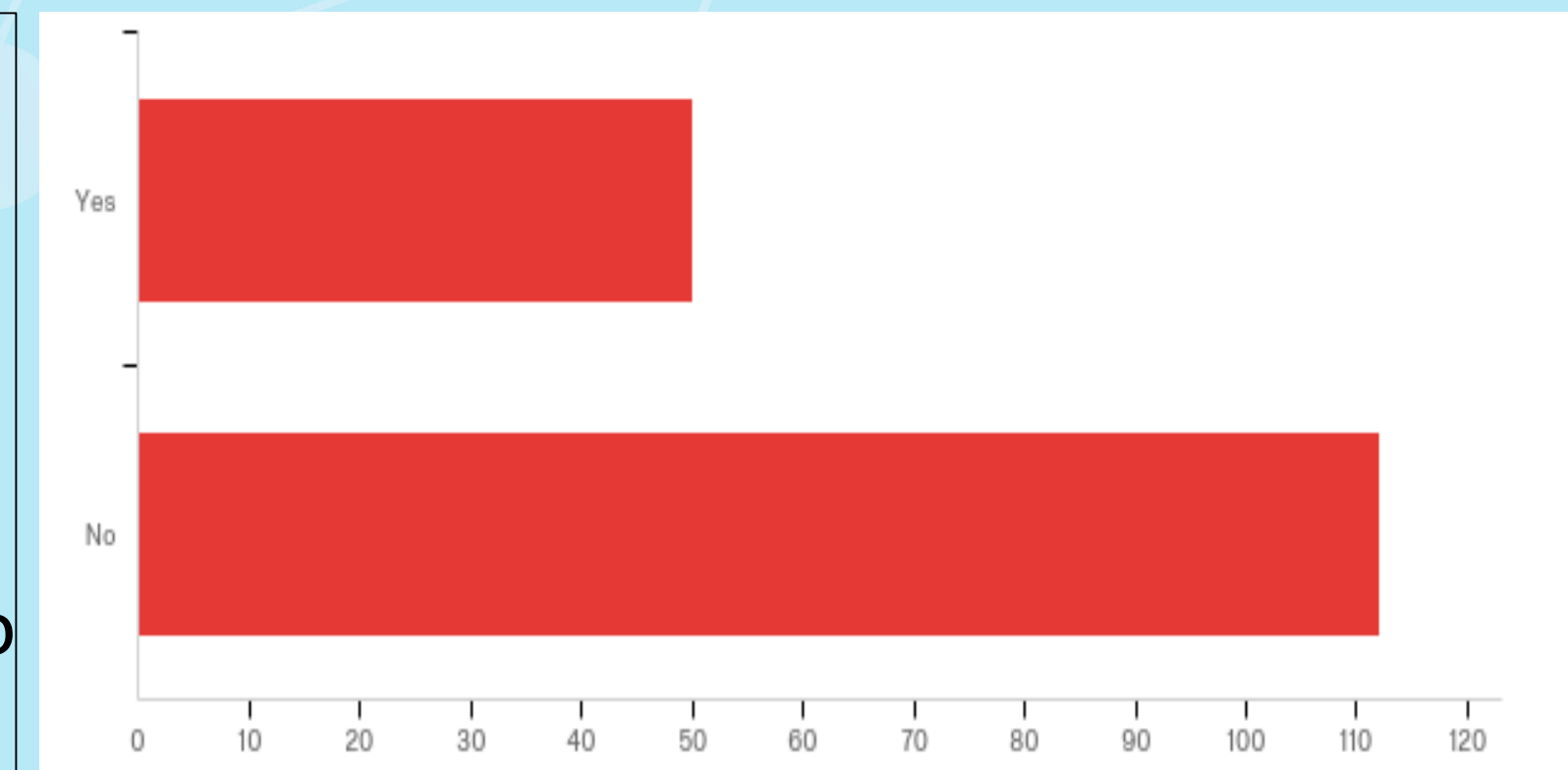


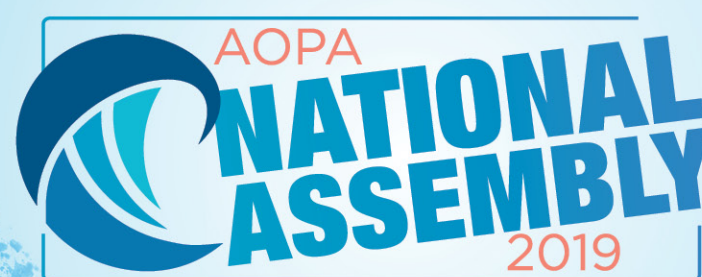
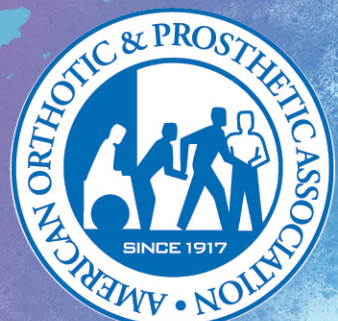
Figure 1: Number of respondents who received (top) and not received (bottom) fall training after their limb loss.

Significance

Fall training as part of physical rehabilitation after limb loss is only made available to a minority of patients. A reason for its low prevalence may be that it is not clearly a domain of either of the involved healthcare professions.

References

1. CDC: Home and Recreational Safety. 2017, retrieved February 19, 2019 from www.cdc.gov/homeandrecreationalafety/falls/adultfalls.html
2. Miller, Speechley and Deathe. Arch Phys Med Rehab. 2001; 82: 1031-7.
3. Hwang et al. J Am Geriatr Soc. 2016; 64: 518-25.



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