Profile of CA Falls
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Falls are a serious threat to the health and quality of life for California’s 5 million older adults age 60 and older. Twenty to 30% of those who fall suffer moderate to severe injuries such as hip fractures. Hospitalized fall injuries have a serious impact on an older person’s quality of life and independence.

But falls can be prevented if at-risk populations are identified. This fact sheet profiles hospitalized fall injuries among older Californians (60+). Note that it does not include falls in the community that do not result in a hospital admission. These data will help to identify subgroups at high risk for fall injury and therefore, appropriate populations to be targeted for fall prevention programs.

Profile of Hospitalized Fall Injuries Among Older Californians

Falls are a major public health problem for the elderly. The number of fall injuries has steadily increased from 2000 to 2004 (see Figure 1).

In Summary
As our population ages, more older Californians will suffer from fall injuries and become a greater burden on the health system. Persons of advanced age, women, and whites are at highest risk. Most falls occur at home and the likelihood of returning home after a hospitalization declines with age. Falls are costly for individuals and families, with fall hospitalizations averaging more than $40,000.

However, research has shown that effective fall prevention programs are cost-effective and help to maintain an older adult’s independence and quality of life. Falls can be prevented by targeting community-dwelling older adults through a multi-factorial approach that includes exercise, medical assessment, and home modification. For more information, visit the Fall Prevention Center of Excellence website at www.stopfalls.org.

Note on data sources: Hospitalized fall injury data came from 2000 and 2004 California Patient Discharge Data, supplied by the California Office of Statewide Health Planning and Development in partnership with the California Department of Health Services, EPIC Branch. All injury records contain an external cause of injury code, which enables researchers to analyze incidence of hospitalized fall injuries. Fall injuries were identified using the International Classification of Diseases, Ninth Revision E-code Series, “Accidental Falls”, E880-E886, E888. For denominator populations, we used California Department of Finance population estimates and Census 2000 data for the race/ethnicity table.

Disposition at Discharge
Almost half (48%) of older Californians hospitalized with a fall injury were discharged to a long-term care setting (i.e., skilled nursing or intermediate care facility), whereas only 24% went home. As persons become hospitalized at older ages, the proportion of persons who are discharged to their homes decreases and the percent of those discharged to a skilled nursing facility increases (see Figure 9).

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Age and Hospitalized Fall Injuries

The rate of hospitalized fall injuries increased dramatically with age (see Figure 3). Among older Californians aged 60-64, the rate of hospitalized fall injuries was 420 per 100,000 in the population. The rate jumped dramatically to 5,321 per 100,000 among those 85 years and older.

Gender and Hospitalized Fall Injuries

Older women in California had a higher rate of hospitalized fall injuries than older men (see Figure 4).

Fall injury rates increased by age for both men and women, but rose more rapidly among women (see Figure 5).

Race/Ethnicity and Hospitalized Fall Injuries

In California, older whites had the highest rate of hospitalized fall injuries (1,546 per 100,000 in the population). Older Hispanics had the next highest rate of hospitalized fall injuries (see Figure 6.)

Place of Fall

More than 60% of hospitalized fall injuries took place in the home, and 14% took place in a residential institution (see Figure 7).

Length of Stay and Cost

Eighty percent of older Californians with a hospitalized fall injury stayed in the hospital for 7 days or less. Another 14% remained in the hospital for up to 2 weeks. The mean cost for all hospital stays was $40,482 in 2004. Not surprisingly, costs increased dramatically by length of stay (see Figure 8).
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Trends in Hospitalized Fall Injuries

Falls are a major public health problem for the elderly. The number of fall injuries has steadily increased from 2000 to 2004 (see Figure 1).

Although the rates of hospitalized fall injuries per 100,000 in the population have hovered around 1,600 from 2000-2004 (see Figure 2), the aging of the population will increase overall numbers dramatically.

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In Figure 9, the percentage of those discharged at discharge is shown by age group. The graph indicates that hospital discharge rates to long-term care increase with age, while discharge rates to home decrease with age.