

Diabetes and your risk of falling

Philips Lifeline helps you live safely and more independently

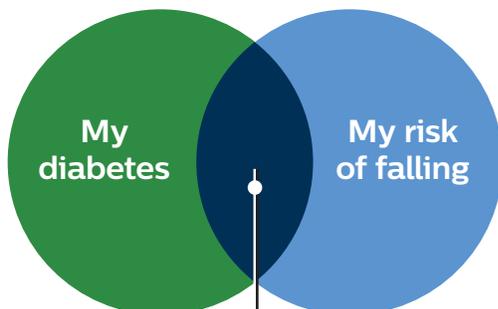
- Our **Lifeline with AutoAlert*** service offers an added layer of protection: it is the FIRST pendant-style Help Button that automatically places a call for help if a fall is detected and you are unable to press your button.
- And now **GoSafe** — our most advanced medical alert service — can provide access to help both at home and on the go.



Two health concerns that coincide

Did you know that older adults with diabetes have a higher risk of falling and fall more often than their peers who do not have diabetes? They are also more likely to be injured as a result of the fall. One study found that older adults with diabetes are more than twice as likely to break a hip.¹

If you have diabetes, the message is clear: Your diabetes and your risk of falling are overlapping issues – when you think about one, keep the other one in mind.



40% of older diabetics report falling each year²

Why diabetes increases fall risk³

Foot problems are common for people with diabetes. Damage to the nerves, called “diabetic neuropathy,” reduces the signals to your brain that keep you steady while standing or walking. Nerve damage related to diabetes interferes with good balance and causes slower reaction times.

Vision problems are another concern if you have diabetes, making it difficult to see things clearly and interfering with depth perception. Diabetes may also affect a person’s ability to judge objects and distances based on color and brightness.

Medications that help manage diabetes may, if not taken as prescribed, have side effects that increase the risk of falls. For example, not taking insulin as prescribed may result in low blood sugar, which can cause dizziness and/or fainting.

*AutoAlert option is locally available at participating Lifeline programs. AutoAlert does not detect 100% of falls. If able, you should always press your button when you need help. * Certain limitations subject to third party cellular provider availability and coverage. Signal range may vary. **[1]** Mayne, D. et al., Diabetes, falls and fractures, Age and Ageing (2010) 39 (5): 522-25. <http://ageing.oxfordjournals.org/content/39/5/522.full>. **[2]** ibid **[3]** ibid

Fall prevention checklist for older adults with diabetes

As an older adult with diabetes, are you doing everything you can to reduce your risk of falling? Consider these nine important questions and discuss any areas of concern with your healthcare provider.

Am I following my healthcare professional's recommendations for managing my diabetes?

Yes No

Am I following my "prescription" for staying physically active that my healthcare professional has given me?

Yes No

Do I follow my healthcare professional's advice on the importance of eating a healthy, balanced diet to help control my blood sugar levels and weight?

Yes No

Have I asked my doctor, pharmacist, or other healthcare professional to review my medications for possible fall-risk side effects, such as dizziness, fainting, impaired vision, or slowed reaction time?

Yes No

If I've already experienced a fall – or if I am concerned about possible balance problems – have I asked my healthcare professional for recommendations on how to lower my risk?

Yes No

If I have experienced pain, tingling, numbness, or loss of sensory perception in my feet, have I discussed that with my healthcare professional?

Yes No

Do I inspect my feet daily?

Do I wear shoes and socks that fit properly and provide good support?

Yes No

Have I had my vision and hearing checked within the past year?

Yes No

Do I take extra time and care in moving about in unfamiliar surroundings?

Yes No

For older adults living with diabetes, these questions are a great way to begin taking action to reduce your risk of falls. Use them as a guide for discussion with your doctor, pharmacist, or other healthcare provider.

Call Lifeline today at
1-800-LIFELINE (543-3546)
www.lifeline.ca

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