

## GP Fact Sheet: Recent Hospitalisation



### Practice guidelines and evidence

- A risk factor study showed recent hospitalisation increases fall risk by up to **three-fold** (Hill et. al. 2013).
- Home safety visits post-hospitalisation for older people who have a history of falls: ↓ falls up to **36%** (meta-analysis) (Clemson et. al. 2008).

### Key points

- Up to 40% of patients fall in the six months after discharge and up to 15% of unplanned hospital readmissions during this period are due to a fall.
- Specific risk factors for falls in post-discharge older patients include: requiring assistance with activities of daily living, depressed mood, using a gait aid, and changes in medications.
- Recently discharged patients with limitations in functional activities may need to be prescribed exercise programs and hence may benefit from individualised physiotherapy.
- Assistance with daily living and examination of home safety within six months of discharge (particularly if the patient had been hospitalised due to falls) have been shown to reduce risk of injurious falls.

### Patient resources

- For individual exercise prescription:
  - Australian Physiotherapy Association: [Find a physiotherapist](#) (treatment: gerontology or musculoskeletal).
  - Exercise & Sports Science Australia: [Find an exercise physiologist](#) (specialty: older adult).
- For home safety review: Occupational Therapy Australia: [Find an occupational therapist](#) (speciality: aged care).
- Patient education leaflet: [Discharge and falls](#) (click [here](#) for other patient flyers on the NSW Clinical Excellence Commission website).

### References

Hill, A. M., Hoffmann, T., & Haines, T. P. (2013). [Circumstances of falls and falls-related injuries in a cohort of older patients following hospital discharge](#). *Clinical Interventions in Aging*, 8, 765-774.

Clemson, L., Mackenzie, L., Ballinger, C., Close, J. C., & Cumming, R. G. (2008). [Environmental interventions to prevent falls in community-dwelling older people: a meta-analysis of randomized trials](#). *Journal of Aging and Health*, 20(8), 954-971.