## **PREVENTING FALLS**

By Judith S. Parnes LCSW, CMC Executive Director



Most of us maintain our posture and body alignment without a thought. Alzheimer's patients, however, often have difficulty with positioning and spatial concepts. They may feel perfectly balanced when standing or sitting, yet be entirely off balance or crooked. Caregivers for patients with Alzheimer's should give cues for correct posture and alignment. Incorrect posture and alignment may lead to falls, poor muscle tone and permanent decreases in mobility. Consultation with a physical or occupational therapist needs to be included in your care plans.

A frequent posture hazard for an individual with dementia is a tendency to lean forward especially with the upper body and head. This is often correctable by having the patient's back up to the wall or if there is no vision problem, by having them look at themselves in a full-length mirror.

It is especially important to cue proper posture and balance before allowing walking. Be sure that the patient's feet are far enough apart to ensure balance. Shoulder-width distance between the feet will broaden the base and promote better balance. When standing or walking, the side view should show a vertical line extending from ear to shoulder to hipbone to anklebone. When the head or abdomen is too far forward, or the buttocks too far backward, the center of gravity is changed, increasing the chances of a fall.

Continual cueing may be necessary. Whenever the caregiver sees the patient off balance or out of alignment, whether walking, sitting or lying in bed, it is important to cue them to become straight. Constant sitting at a tilt or lying crooked in bed will lead, over time, to tremendous mobility difficulties. For example, someone who consistently tilts his or her head to the same side will have trouble straightening the head, thus, making it difficult to swallow and eventually, making it difficult to even breathe. They must always be cued to sit with their buttocks against the chair back.

For someone who is unsteady or having difficulty getting out of a chair, the best kind of chair is one with a fairly firm seat and with arms that go to the front edge of the seat. The chair back should be fairly straight or slanted only slightly and should be flat. The height of the seat should allow feet to be flat on the floor with knees approximately one inch above the hipbone.

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