

AHRQ Issues 2006 Report on Fall-Related Injuries for the Elderly

The Agency for Healthcare Research and Quality (AHRQ) has issued a [report](#) on hospital emergency department visits for fall-related injuries in 2006. Each year, approximately one-third of elderly adults experience a fall. Falls are the most common cause of fatal injuries among elderly adults age 65 years and older, as well as the most common cause of nonfatal injuries in this population. The direct medical cost for fall-related injuries among the elderly is about \$20 billion annually and is expected to increase substantially over the next decade as the population ages. Those elderly seen for injurious falls in the emergency department and then admitted to the hospital were more than twice as likely (65.7% to 28.4%) to be discharged to long-term care than patients admitted to the hospital from the emergency room with other conditions, the study found. Highlights of the AHRQ report follow:

- Elderly adults had over 2.1 million ED visits for injurious falls in 2006, accounting for 1 in 10 ED visits among patients aged 65 years and older.
- The cost of hospital care following an ED visit for an injurious fall among the elderly totaled \$6.8 billion in 2006.
- In 2006, nearly 1 in 7 women and 1 in 10 men aged 85 years and older had an ED visit for an injurious fall.
- The most common reasons for injurious fall-related ED visits among the elderly were fractures (41.0 percent), followed by superficial/contusion injuries (22.6 percent) and open wounds (21.4 percent).
- Hip fractures accounted for about 1 in 8 injurious fall-related ED visits among the elderly.
- Among the elderly, patients seen in the ED for injurious falls and subsequently admitted to the hospital were more likely to be discharged to LTC than ED patients admitted to the hospital with other conditions (65.7 percent versus 28.4 percent).
- Fall-related ED visits associated with fractures and internal organ injuries resulted in hospitalization (51.3 percent and 62.7 percent, respectively) and discharge to LTC (40.9 percent and 33.2 percent, respectively) more frequently than fall-related ED visits associated with other injuries.

Source: AHRQ