Monitoring National Health Priority Areas in WA — Falls

- For people aged 25 years and older, the odds of reporting a fall injury in the previous 12 months increased by 29 per cent with each chronic health condition that was reported. For example, the odds of reporting a fall were 58 per cent higher for people with two chronic health conditions compared with people who did not report having any conditions.
- The odds of reporting a fall injury increased by one per cent with each one year increase in age.

Trends over time

The WA Health and Wellbeing Surveillance System has been continuously collecting information on falls for people aged 65 years and older which required treatment by a health professional since 2002. Table 5 shows how trends have changed within that time.

Table 5 Changes in indicator trends over time, 2002 to 20057

| | Favourable trend | Little/no change | Unfavourable trend |
|--|---------------------|---------------------|--------------------|
| Prevalence of fall injuries for males 65 years and older | | ~ | |
| Prevalence of fall injuries for females 65 years and older | | V | |

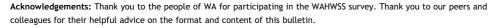
■ The proportion of males and females aged 65 years and older that reported having a fall injury has not changed significantly since 2002.

End Notes and References

- 1. High threat-to-life-injuries have been defined as injuries with a 6 per cent or higher chance of a fatal outcome in hospital. Australian Institute of Health and Welfare 2006. Australia's Health 2006. AIHW Cat. No. AUS 73: Canberra: AIHW.
- 2. Australian Institute of Health and Welfare 2006. Australia's Health 2006. AIHW Cat. No. AUS 73. Canberra: AIHW.
- 3. Epidemiology Branch Analysis of ABS Mortality Data and Hospital Morbidity Data, Department of Health WA.
- 4. For more information on the WA Health and Wellbeing Surveillance System contact the Epidemiology Branch or visit the Epidemiology website: http://intranet.health.wa.gov.au/hic/epidemiology/new_epi/publications/index.asp
- 5. Based on the 2004 estimated residential population for WA.
- 6. Total number of national health priority area chronic conditions: arthritis, heart disease, diabetes, symptoms of or treatment for asthma in the previous 12 months and being diagnosed with a mental health problem in the previous 12 months.
- 7. Changes over time were assessed using SPSS V14.0 Time Series and Linear Regression.

Citation: Crouchley K and Daly A (2006). WA Health and Wellbeing Surveillance System: Monitoring Health Priorities in WA

— Falls. Bulletin 6. September. Perth: Epidemiology Branch. Department of Health WA.





Monitoring National Health Priority Areas in WA — Falls

WA Health and Wellbeing Surveillance System Epidemiology Branch

Key Implications from this bulletin

The results in this bulletin suggest that there is a need to continue to focus on developing strategies to:

- reduce the prevalence of fall injuries in men aged 16 to 24 years
- reduce the prevalence of fall injuries in women aged 65 years and older.

The results also suggest there be increased awareness of:

- the association between the total number of chronic health conditions and risk of fall injuries for people aged 25 years and older
- the association between increased age and risk of fall injuries for people aged 25 years and older.

Bulletin No.6



Some facts about falls

Falls are the most common cause of hospitalisation resulting from an injury in Australia, and more than half of all people hospitalised with falls are considered to be high threat-to-life¹ patients. The risk of having a fall injury increases with age. Falls that occur in older people often result in more serious types of injuries, with associated complications that can be fatal or result in persisting health problems.²

In WA, falls accounted for 3.5 deaths per 100,000 persons for people aged 20 years and older in 2004; no deaths were reported for people less than 20 years. There were 1,476 hospitalisations associated with falls for children aged up to 15 years and a further 6,231 hospitalisations for people aged 15 years and older for the period 2005–06.³

The WA Health and Wellbeing
Surveillance System annually
surveys over 6500 Western
Australians of all ages. Information
is collected on a wide range of
health and wellbeing issues, health
conditions, lifestyle risk factors,
protective factors and sociodemographics.

This bulletin supplements information provided in Bulletin 5 in this series, Monitoring National Health Priority Areas in WA - Injury and poisoning. The bulletin will focus on:

- reported prevalence of falls for children and adults
- reported health service use for people with fall injuries
- characteristics of people who report fall injuries
- trends for the reported prevalence of fall injuries from 2002 to 2005.

The WA Health and Wellbeing Surveillance System collects this information on an ongoing basis.⁴

Self-reported prevalence of falls

Table 1 shows the prevalence of fall injuries in the previous 12 months that required treatment by a health professional, by sex and age group, and the estimated numbers of people⁵ affected by fall injuries.

- Overall, 5.5 per cent of females and 6.5 per cent of males reported having at least one fall injury that required treatment by a health professional in the previous 12 months.
- The prevalence of falls was two times higher for males compared with females aged 0 to 24 years.
- Adults aged 25 to 64 years had a lower prevalence of falls compared with younger adults aged 16 to 24 years, and older people aged 65 years and older.

Table 1 Self-reported prevalence of falls, by sex and age group, WA, 2005

| Indicator | Males % | Females % | Estimated no. of people |
|------------------------------------|---------|-----------|-------------------------|
| Children aged 0 to 15 years | 7.5 | 3.6 | 23,944 |
| Young adults aged 16 to 24 years | 11.5 | 5.7 | 22,352 |
| Adults aged 25 to 44 years | 4.7 | 5.1 | 27,319 |
| Adults aged 45 to 64 years | 4.0 | 6.3 | 24,836 |
| Older adults aged 65 years & older | 7.0 | 10.4 | 20,392 |

The term prevalence is equal to the percentage or proportion of the population who have a condition.

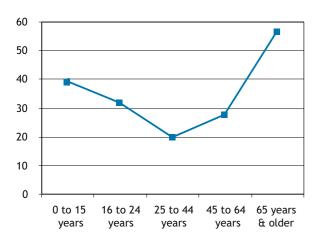
Table 2 shows the prevalence of fall injuries in the previous 12 months by area of residence, and the estimated numbers of people affected by fall injuries.

Table 2 Self-reported prevalence of falls, by sex and area or residence, WA, 2005

| Area of residence | Prevalence % | Estimated no. people |
|-------------------|--------------|----------------------|
| Metropolitan area | 5.9 | 90,622 |
| Rural | 5.9 | 18,503 |
| Remote | 7.0 | 9,718 |

The prevalence of fall injuries did not differ significantly by area of residence.

Figure 1 Self-reported prevalence of falls, among people who reported having an injury in the last 12 months, WA, 2005



- One in five people aged 25 to 44 years who reported having at least one injury also reported having at least one fall injury in the previous 12 months.
- For people aged 65 years and older, three in five people who reported having at least one injury also reported having at least one fall injury in the previous 12 months.

Health Service Use

Table 3 shows the prevalence of using primary health, hospital-based and allied health services within the previous 12 months for children and adults with and without self-reported fall injuries.

Table 3 Prevalence of health service use in the previous 12 months, persons with and without reported fall injuries, WA, 2005

| | Primary % | Hospital- based % | Allied health % |
|--|-----------|----------------------|--------------------|
| Child who did not report having a fall injury | 81.1 | 21.6 | 22.4 |
| Child who reported having a fall injury | 93.9 | 71.2 | 26.6 |
| People aged 16 to 24 years who did not report having a fall injury | 86.2 | 20.2 | 34.7 |
| People aged 16 to 24 years who reported having a fall injury | 99.1 | 49.4 | 66.2 |
| People aged 25 to 64 years who did not report having a fall injury | 87.9 | 21.1 | 45.9 |
| People aged 25 to 64 years who reported having a fall injury | 96.6 | 57.4 | 62.4 |
| People aged 65 years and older who did not report having a fall injury | 97.7 | 26.4 | 58.7 |
| People aged 65 years and older who reported having a fall injury | 100 | 52.9 | 74.8 |

- For children, the prevalence of hospital-based service use was higher for those who reported having a fall injury compared with children without fall injuries.
- For adults aged 16 to 64 years, the prevalence of primary, hospital-based and allied health service use was higher for people who reported having fall injuries compared with people without fall injuries.
- For adults aged 65 years and older, the prevalence of hospital-based and allied health service use was higher for people who reported having a fall injury compared with people without fall injuries.

Associates of injury

People within the community share characteristics. For example, a person can be female, middle aged, a non-drinker and live in a socially disadvantaged area.

The 'Odds Ratio' reported in Table 4 indicates how much more (or less) likely a person was to have reported having a fall injury. Odds ratios greater than one indicate an increased likelihood of reporting a fall injury. Two characteristics were associated with increased odds of having a fall: the total number of health conditions reported and increased age.

Table 4 Personal characteristics associated with reporting a fall injury, persons aged 25 years and older, WA, 2005

| Characteristics | Odds Ratio |
|---|------------|
| Total number of chronic health conditions | 1.29 |
| Age | 1.01 |