Launch of a 2022–2024 National Plan Against Falls in Older Persons in France

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Dear Editor,

s in older industrialized countries, around 30% of persons aged 65 years or older experience at least one fall every year in France. The annual 2 million falls in this population lead to more than 136,000 hospitalizations and 10,000 deaths, with an estimated cost of care at 1.5 billion euros, excluding those linked to secondary falls-related dependency..

Faced with this major and growing public health challenge, a 3-year national falls prevention plan in older persons was launched in France on February 21, 2022 (1, 2).

This plan aims within the next 3 years to reduce by 20% the number of falls-related deaths and hospitalizations among those aged 65 or older, i.e., an expected reduction of 27,000 hospital stays and 2,000 deaths per year. This hypothesis is based on a report by the National Account Court of Accounts (Cour des Comptes) which estimates that 15-30% of falls could be avoided by preventive measures (Prevention of the loss of autonomy of the elderly, Public thematic report, November 2021) (3). The 6 pillars of the plan (Figure 1) are in agreement with the main World guidelines for falls prevention and management for older adults that were published in 2022 (4, 5).

The first pillar of the plan aims to better identify and care for persons 65 years and older who are at potential risk of falling. Older persons, caregivers, and care professionals will be informed about the need to assess the risk of falling at least once a year in persons 65 years and older or in the case of any health deterioration issues.

This opportunistic case finding comprises the following question: "Have you fallen in the past 12 months?". Falls can be repeated falls (2 or more falls), severe falls (at least one fall that requires consultation with a physician, or with incapacity to get up without human help, or unexplained fall with suspected syncope), or falls within a context of general frailty (muscle weakness, gait disturbance, or fatigue, reducing the ability to perform physical activity and everyday activities).

In non-fallers, the feeling of unsteadiness when standing

or walking, low gait speed (covering 4 meters at their usual walking pace in more than 5 seconds), or low mobility (performing the Timed Up and Go test in more than 15 seconds: time taken to stand up, walk a distance of 3 meters (10 feet) turn, walk back, and sit down again) are all risk factors of falls in the next 12 months.

According to the World guidelines for falls prevention and management for older adults (3), people at high risk of falling are those who, in the past 12 months, have had at least 2 falls or at least one severe fall or one fall within a context of frailty. The greater the number and severity of the falls, the higher the risk of a severe fall.

People at low risk of falling are those who have experienced no more than one fall in the past 12 months and with no feeling of unsteadiness when standing or walking, and with normal gait speed and mobility.

Other people are at intermediate risk of falling. The greater the feeling of unsteadiness when standing/walking or the lower the gait speed or mobility, and thus the greater the risk of falling.

Pillar 2 plans to reduce hazards in the home by (i) providing home adaptation to older persons and their caregivers in order to improve home safety and change behaviors that increase the risk of falling in all persons, and (ii) reimbursing occupational therapist home visits in order to optimize the management of hazards in persons at high risk of falling, especially when having fallen at home.

Pillar 3 aims at a better use of assistive devices to prevent falls by disseminating educational tools for older persons, their caregivers, and for health professionals. The involvement of physiotherapists, occupational therapists, and other specialists would also optimize their use among persons at high or moderate risk of falling. Reducing the costs for prescribed appropriate assistive devices would also make them more accessible.

Pillar 4. In high older persons with significant balance, gait, and mobility disturbances, tailored exercise programs challenging balance and including resistance training will be offered for free. Some regions in France will experiment on

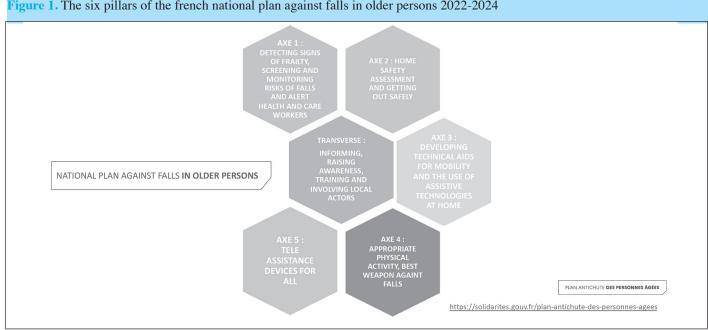


Figure 1. The six pillars of the french national plan against falls in older persons 2022-2024

the prescription and reimbursement of group activity programs delivered by specialists in physical activity in persons at moderate risk or even at low risk of falling.

Pillar 5 will promote teleassistance devices for all older persons, especially for people at high risk of falling.

In a more cross-cutting manner, the plan aims to raise collective awareness around falls as an important public health problem in older persons (only 17% of French persons aged 65 or older know that a fall is the leading cause of accidental death in their age group) (6). A national and local communication campaign would inform older people, as could caregivers and healthcare professionals.

In conclusion, the French national falls prevention and management plan launched in 2022 is the first on a national scale to propose measures aimed at drastically reducing (by 20%) the incidence of falls-related hospital admissions and deaths. This plan aims to make the prevention of falls a national Public Health priority in France. It is based on the scientific literature and the World guidelines for falls prevention and management for older adults. Regional Health Agencies will be responsible for the French national deployment plan in the community and in nursing homes by promoting local initiatives according to available resources. Results, in terms of fallsrelated hospital admissions and death, will be analyzed region by region. This will offer a unique opportunity to assess, at a large scale and for 3 years, the most cost-effective strategies to achieve the planned objectives, but also the barriers encountered by the deployment plan. This information may be useful for other countries or regions wishing to implement a falls prevention plan on their territory.

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