

INJURY AND VIOLENCE SURVEILLANCE UNIT • SEPTEMBER 2024

What We Know About Unintentional Fall-Related Injury in Connecticut:

Unintentional fall-related injury is the leading cause of nonfatal injury in Connecticut, affecting people of all ages. High-risk populations include children under 5 years of age, adult minorities, and older adults (people over 65 years of age).

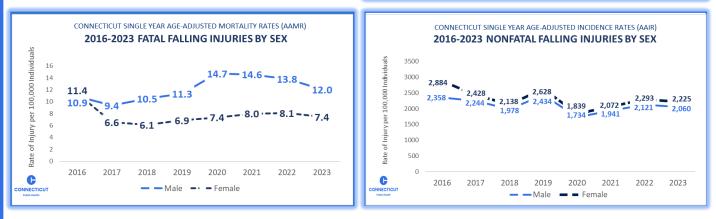
Falls often occur with serious complications such as traumatic brain injuries and bone fractures that cause incapacitation, requiring intensive care and prolonged recovery time.



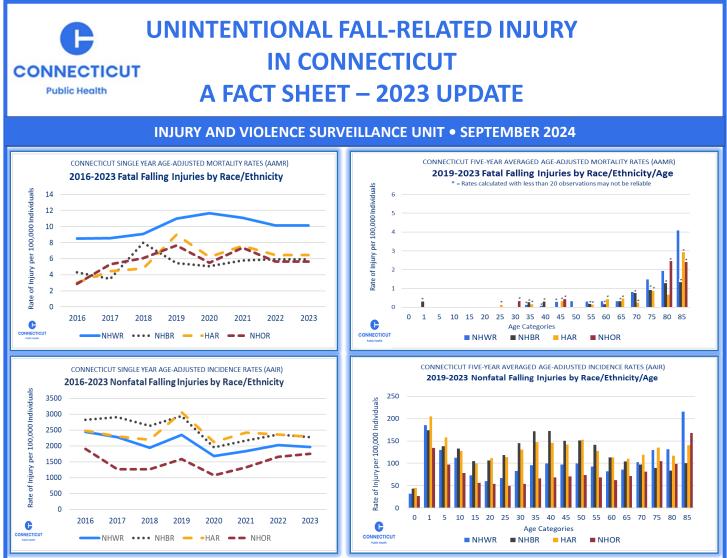
Surviving a fall can create fear of falling again. This fear can limit a person's willingness to engage in physical activity, predisposing them to loss of balance. Loss of balance increases the risk of another fall-related injury¹.

Key Points:

- Unintentional falls in Connecticut during 2023 was the leading cause of nonfatal injury in most age categories, only exceeded by motor vehicle crashes in the 20-24 year and 25-34 year age groups. The 2023 age-adjusted incidence rate for nonfatal falls in Connecticut was 2,155.6 per 100,000 individuals.
- Unintentional falls were also the leading cause of death in the Connecticut population of those 75 years and older.
- In 2023, 80,951 Connecticut residents were treated in the emergency department for head injuries, another 4,878 were admitted to the hospital for care, and an additional 244 died from a head injury².
- In 2023, Connecticut hospitals billed \$808.9 million to care for people injured by a fall; \$273.8 million for hospital admissions care, and \$535.1 million for emergency department treat and release visits.
- Excluding the very young (under 5) and those over 65, the non-Hispanic Black Race (NHBR) and Hispanics of All Races (HAR) carry the highest burden of risk for nonfatal, unintentional fall-related injury.
- Falls are a leading cause of traumatic injury to the head. In 2023, nearly half of all emergency room visits for a head injury were fall-related (n=14,766) and an additional 28% (n=757) were admitted for extended care. Nearly one third of fatal head injuries were fallrelated.



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Data Sources: Fatalities reported from CT Vital Records data and Nonfatalities reported from Connecticut Hospital Discharge data NWHR=non-Hispanic White Race, NHBR=non-Hispanic Black Race, HAR=Hispanic All Races, NHOR=non-Hispanic Other Races

What You Can Do to Prevent Falls

- Make your home safer by reducing tripping hazards, using safety gates on stairways, putting anti-slip mats in bathtubs and showers, buying non-slip carpets or mats, installing handrails or grab bars, and by providing adequate lighting in dark places.
- Get regular exercise to improve muscle strength and balance.
- Wear proper footwear.
- Contact your local Area Agency on Aging, Senior Center, YMCA, Visiting Nurse Association, or the Connecticut Health Living Collective to locate a falls prevention program near you.
- Get your vision and hearing checked at least once a year.
- Ask your doctor or healthcare provider to evaluate your risk for falling and to review your medicines for those that can make you drowsy.

References

1 MacKay S, Ebert P, Harbidge C, Hogan DB. Fear of Falling in Older Adults: A Scoping Review of Recent Literature. Can Geriatr J. 2021 Dec 1;24(4):379-394. doi: 10.5770/cgj.24.521. PMID: 34912493; PMCID: PMC8629501.

2 Death data from the Connecticut State Vital Records Office and Hospital Discharge data from the Connecticut Hospital Association

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