Falls and fall-related injuries account for more than 20 percent of all unintentional (accidental) deaths to Idaho residents. Between 2004 and 2006, an average of 10 Idaho residents died per month as the result of a fall or fall-related injury. In 2005, the National Safety Council reported 8 million people were treated in emergency rooms across the country for fall-related injuries; making falls the leading cause of non-fatal injuries for all age groups except those aged 15-24. Falls account for 1.3 percent of all deaths to Idaho residents. Between 2004 and 2006, a total of 356 Idahoans died as the result of an unintentional fall – 301 of those individuals were over the age of 64.

In Idaho, falls represent the greatest risk of unintentional death for people aged 65 and older. Between 2004 and 2006, an average of 113 individuals died per year as the result of a fall or fall-related injury; 100 of those deaths occurred to individuals aged 65 and older.

Between 2004 and 2006, 85 percent of all unintentional deaths by fall occurred to individuals aged 65 and older. The average age of death by fall for Idaho residents was 79.

An estimated one-third of individuals aged 65 and older fall once during a year. The likelihood of a severe or life-threatening injury increases significantly with age. In addition, it is estimated that two-thirds of older adults who fall will fall again within the next 6 months.

In Idaho, the three-year aggregate age and sex-specific death rates indicate that within specific age groups men are more likely to die from a fall than women. However, when taken as a whole, women aged 65 and older have a 7 percent increased risk over men for dying from a fall (63.1 and 58.9 per 100,000, respectively). In comparison, national rates are not consistent with Idaho rates. In 2005 (latest national rates available from the Centers for Disease Control and Prevention), the national rates for unintentional injury deaths due to falls were 50.4 and 34.7 per 100,000 population, respectively, for men and women.
Idahoans are more likely to die from a fall within their own home than any other location. Eighty-six percent (307 deaths) of all fall-related deaths between 2004 and 2006 occurred within the home, an assisted living center, or another residential type of institution. Outdoor accidents were the most prevalent location for non-residential fall-related death, accounting for a 3.9 percent (14) of deaths during this time period.

Unintentional fall deaths in assisted living centers, nursing homes, and other residential institutions accounted for 25 percent of all fall deaths to Idaho residents. It is estimated that 60 percent of nursing home residents fall each year in the United States.6

A total of 48 (16 percent) in-home accidental fall deaths between 2004 and 2006 were caused by slipping, tripping, stumbling or some other noted loss of balance. Fourteen percent (43 individuals) involved falling out of or off of a bed, wheelchair, or some other kind of furniture. Eight percent of in-home fall deaths involved stairs.

Across Idaho, Districts 4 and 7 were the only districts whose rate varied significantly from Idaho’s. District 4 had the lowest rate of fall deaths (5.9 per 100,000 population) - significantly lower than the total for the state of Idaho. District 7 reported a rate of 11.7 deaths per 100,000 – a rate significantly higher than the state death rate (8.3 per 100,000).
In Idaho, falls are the second leading cause of accidental death for all age groups, and the leading cause of accidental death for individuals aged 65 and older. Falls and fall-related injuries account for more deaths in this age group than motor vehicle accidents, choking, poisoning, exposure to fire, and drowning combined.

The majority of fall-related deaths were caused by head trauma (35 percent) and hip fractures (33 percent).

Of injuries sustained in a fall, head trauma and hip fractures are particularly dangerous, proving nationally to be a serious threat to individual independence and quality of life.5

Half of unintentional fall deaths and 8 percent of hospitalizations for non-fatal falls are the result of a traumatic brain injury.8 These injuries often result in long-term cognitive, emotional, and functional impairments.8

Across the country, more than 90 percent of hip fractures among adults aged 65 and older are caused by falls.7 The CDC estimates of those older adults living independently before their hip fracture, only half were able to live independently a year later.5

The National Safety Council estimates that in 2005 there were 41.9 million visits to hospitals across the country as a result of accidental injuries.1 Of those, approximately 21 percent were the result of a fall. From 1985 to 2006, the rate of fall-related death increased 76.9 percent in the U.S. In Idaho, the rate increased 92.0 percent over the same time period.
2005 data from the Behavior Risk Factor Surveillance System (BRFSS) showed that Idahoans diagnosed with a stroke, heart attack, heart disease, diabetes, or arthritis were significantly more likely to have experienced an injury from a fall in the past 12 months than those who did not have these conditions.

The strongest correlation was found between the use of special equipment (wheelchair, cane, special bed, or special telephone) and the likelihood of having experienced a fall. Individuals who regularly use special equipment are more than twice as likely to experience a fall (43.9 percent versus 17.3 percent) and more than three times as likely to experience an injury due to a fall than those who do not use special equipment (24.7 percent and 7.6 percent, respectively). It is important to note that correlation between falls and the use of special equipment does not necessarily imply causation.

Overweight defined as those individuals with a Body Mass Index (BMI) greater than or equal to 25. Obese defined as those individuals with a BMI greater than or equal to 30. * Percent is significantly higher for adults with condition than adults without the condition at the 95% confidence interval.