Remember: You can live well with osteoporosis!

Elder Proofing to Reduce Preventable Crisis: BUILD A SAFETY NET

A fall is a very common but potentially serious emergency for seniors. One-third of seniors over 65 and one-half of those over 80 will fall in any given year. Falls are the leading cause of injury-related hospitalization for seniors in Canada and a leading cause of fracture. Nine-tenths of hip fractures in seniors are caused by falls. For those with osteoporosis, falls are of particular concern because of the likelihood of breaking a bone. Even if an injury does not occur, many seniors cannot get up once they have fallen. The following is an excerpt from the book Doris Inc., by Shirley Roberts. The information and technology recommended in the excerpt will be of interest to many seniors as well as their loved ones and caregivers who are concerned about falls.

Elder Proofing to Reduce Preventable Crisis: BUILD A SAFETY NET

What would happen if your aging parent fell down a flight of stairs and was knocked unconscious, or had a stroke when they were alone in their house? How would your mother or father get emergency help? How would you feel if you couldn't reach your parent several times on a day when you expected them to be home? Where would you turn for help to determine if they were in danger?

Having a safety net in place for seniors before a life-threatening emergency occurs ensures that they have immediate access to medical attention, which can prevent catastrophes, such as a person not being found for days. A safety net reduces complications by getting them the help they need quickly, while at the same time providing peace of mind to all family members.

Seniors also need ready access to assistance when they have questions or concerns, or are unable to handle a problem on their own. Finding a neighbour to do odd jobs around the house, such as replacing a light bulb in a ceiling light fixture, can prevent a fall and injury, which is especially important when a senior lives alone.

For Christmas one year, I bought my parents a phone specially designed for declining vision and hearing abilities: it had big numbers, a memory of the most important phone numbers, a loud ringer, a volume amplifier that would make a caller's voice louder, and a light that would flash when the phone rang. I entered the phone numbers of key people who would be part of my parents'

In this issue

- **Elder Proofing to** Reduce **Preventable Crisis**
- **Funny Bone**
- Virtual Education **Forums**

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Event calendar ==



Brains and Bones Lindsay, Ontario 26-Apr-2012

Niagara Brunch Niagara, Ontario 29-Apr-2012

Free Public Lecture "Prevent Falls - Stay On Your Feet Vancouver, BC 08-May-2012

> **Building Bones** London, Ontario 26-May-2012

Osteo.....what? Mississauga, Ontario 30-May-2012

2nd Annual National Capital Bone and Joint **Health Day** Ottawa, Ontario 01-Jun-2012

View Calendar

safety net into the phone memory including me, my brother, their neighbour across the street, and Mom's friend Sue, who would come if either of them didn't feel well. My parents could then just press a button rather than dial a phone number to reach one of us. Mom and Dad also had a cordless phone that they could take outside while they were gardening so they wouldn't feel they had to run for the phone in the house for fear of missing an important call.

I also compiled a phone directory with large type on my computer that I printed and put in a bright green binder so my parents had easy access to all the important people and organizations in their lives, arranged under the following headings: emergencies, medical specialists, relatives, friends and neighbours, and businesses. David and I had a copy of the phone directory too, so we had access to neighbours whom we could call if we couldn't reach Mom and Dad.

My parents had already given David and me keys to their house many years earlier, but in their 70s they decided to give copies to a few trusted neighbours as well. That way, in an emergency a neighbour could easily get into the house.

A MedicAlert bracelet is another good safety-net initiative that can save lives, if a senior has allergies or a medical condition that puts them at risk in an emergency. For a small annual fee, people can wear a MedicAlert bracelet bearing an identification number that emergency medical personnel use when they call the organization's 24-hour emergency hotline, to find out the person's pre-existing medical problems.

After my father died, I encouraged my mother to let me install a 24-hour-a-day personal emergency-response system in her home. I searched "personal medical alert" on the Internet and found several well-established companies. Mom and I chose one that would install the equipment free of charge in the Cobourg area. The company charged a small monthly fee and the service could be cancelled at any time.

The medical alert system works this way: A help button is embedded in a waterproof bracelet, pendant, or belt clip that is worn by a person around their home at all times. If he or she needs medical assistance, they push the button and it connects wirelessly to a two-way voice communicator unit, which is installed beside a phone in a central location of the home. A medical alert signal is sent to the monitoring centre of the emergency response company. Using the two-way communicator, an operator immediately tries to speak to the person and ask him or her if they are all right. If the person needs medical assistance or if they can't speak, the operator dispatches an ambulance and notifies a designated neighbour, friend, or family member so they can open the door for the ambulance drivers.

One night, Mom unintentionally tested her new personal emergency-response system. She was sleeping very soundly, when suddenly she felt a hand gently nudging her shoulder. In total shock and disbelief, she saw her neighbour standing over her and two young ambulance drivers at the foot of her bed staring down at her. She had accidentally knocked the pendant off her night table, and when it hit the hardwood floor the help button was activated. She always removed her two hearing aids when she slept so she couldn't hear the operator's voice from the living room phone. If nothing else, we certainly found out just how valuable and reliable this type of service can be in a real emergency, and we had a few laughs when we recounted the story.

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FUNNY BONE:

A positive attitude may not solve all your problems, but it will annoy enough people to make it worth the effort - Herm Albright

UPCOMING VIRTUAL EDUCATION FORUM: Cracking the code: Using food labels to improve your bone health Thursday, May 17, 2012



On Thursday, May 17, 2012, Michelle Ellis, RD will be presenting on the topic of nutrition. The virtual forum titled *Cracking the code: Using food labels to improve your bone health* will discuss nutritional requirements of calcium and vitamin D for bone health, provide a review of nutrition labels including nutrition claims, ingredient lists and the nutrition facts table. The presentation will also provide practical examples of how nutrition labels can help us improve the quality of the food we eat. Join us through the comfort of your own computer and log in on the day of the event and have your questions answered in real time. **Read more.**

Do you have the system requirements? Test your system by clicking on: http://webcast.otn.ca/support.html
For more information please contact: or 1-800-463-6842 ext. 224

ARCHIVED VIRTUAL EDUCATION FORUM

On Thursday, March 22, 2012, Janet Barnes and Sarah Nixon-Jackle focused on the topic of falls prevention. The presentation began with a discussion on what a fall is and the reasons why falls occur. The presenters talked about the relationship between osteoporosis, falls and fractures and explored the preventive strategies individuals can use to reduce their risk of falling.

Did you miss the presentation? Click <u>here</u> to view the archived version of Janet and Sarah's presentation <u>Prevent the Fall, Prevent the Fracture.</u>



COPING brings you the very latest information on osteoporosis every two weeks. For a *free* subscription go to our website or call 1-800-463-6842