



BALANCE AND FALLS:

JOINING THE PUZZLE PIECES

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WHY IS BALANCE SO IMPORTANT?



- 60% of PwP fall with 39% of these falls being recurrent (1)
- Higher likelihood of falls in PD (2, 3)
- Falls may result in hospitalization (4), reduced mobility (5), reduced quality of life (6), fear of falling (7), caregiver stress (8,9), fractures and subsequently, reduced life expectancy (10)
- PD expected to double 2005–2030 (11) -falls is a big problem!







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- Postural instability (13)
- Freezing of gait (14-16)
- Leg muscle weakness (14, 17)
- Poor mobility (14, 17)
- Cognitive impairment (14,-16)
- Fear of falling (18-20)

- Disease severity (12 14, 21)
- Longer disease duration (22-24)
- Increased Levodopa dosage, DBS, polypharmacy* (14,20,25,26)
 *NOT causation!
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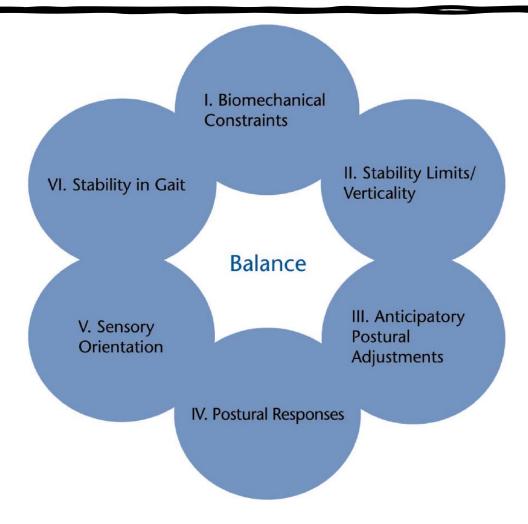
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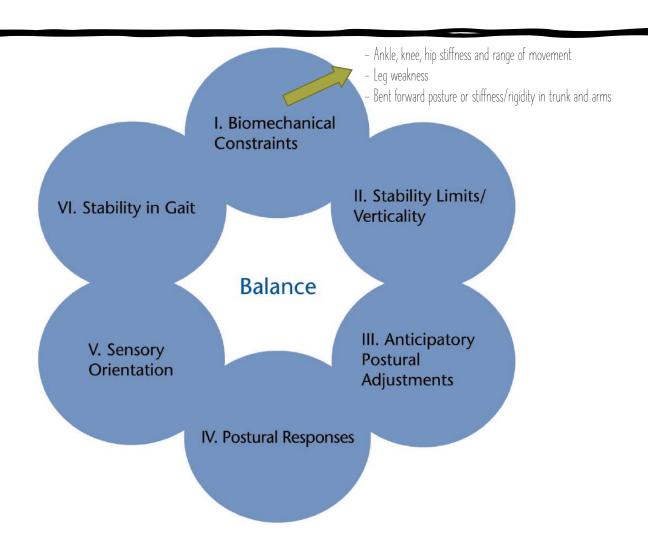
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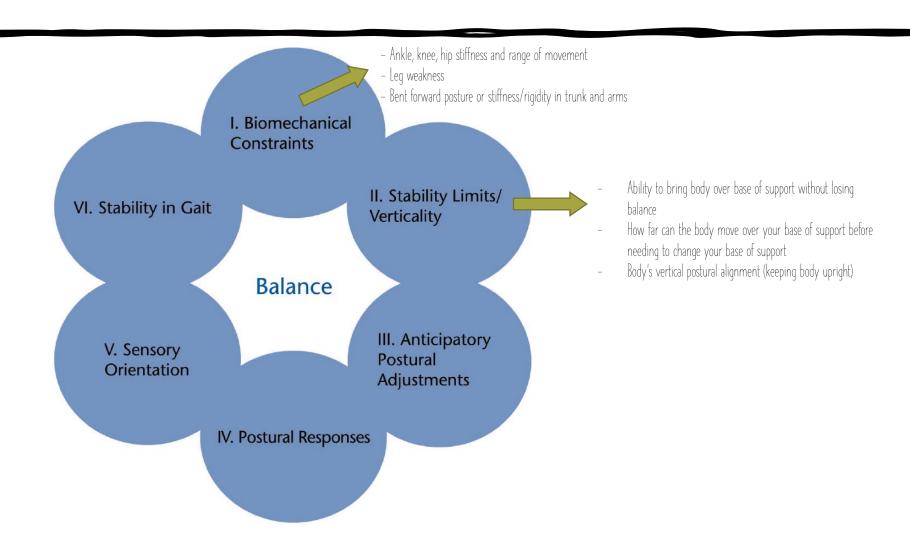


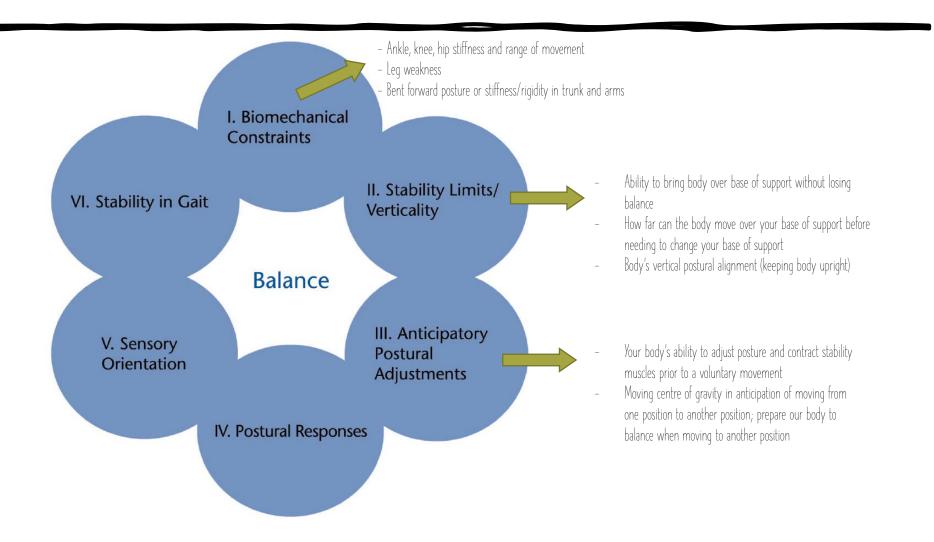
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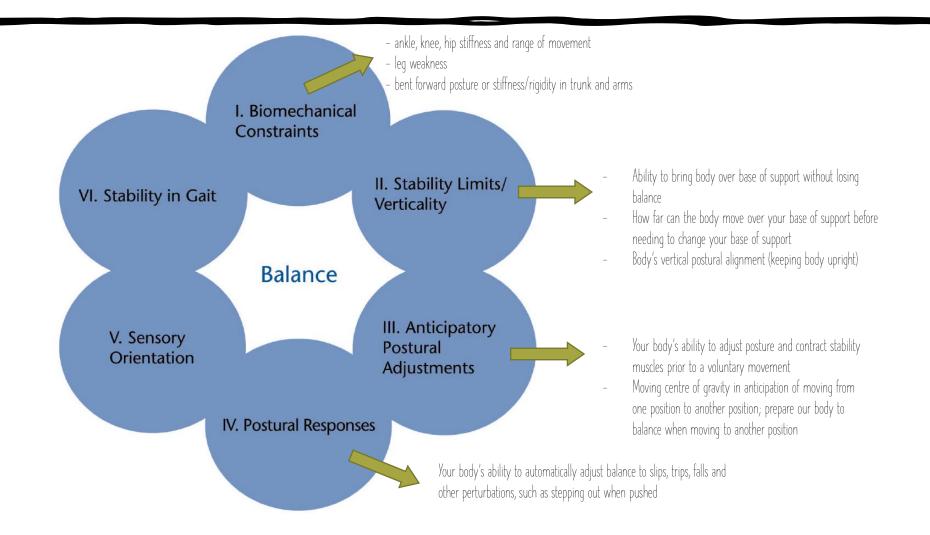
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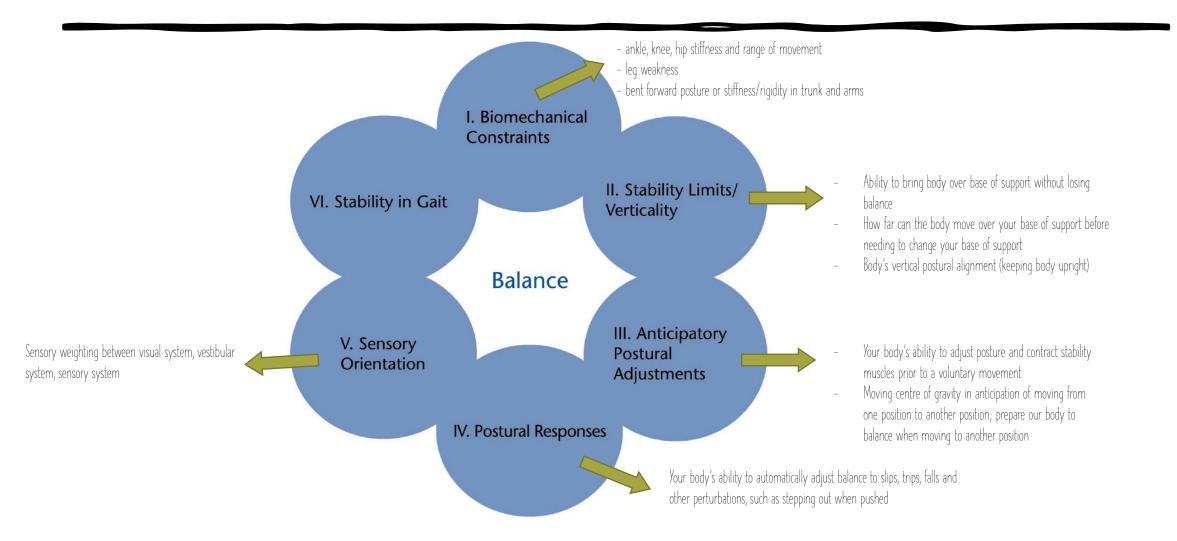


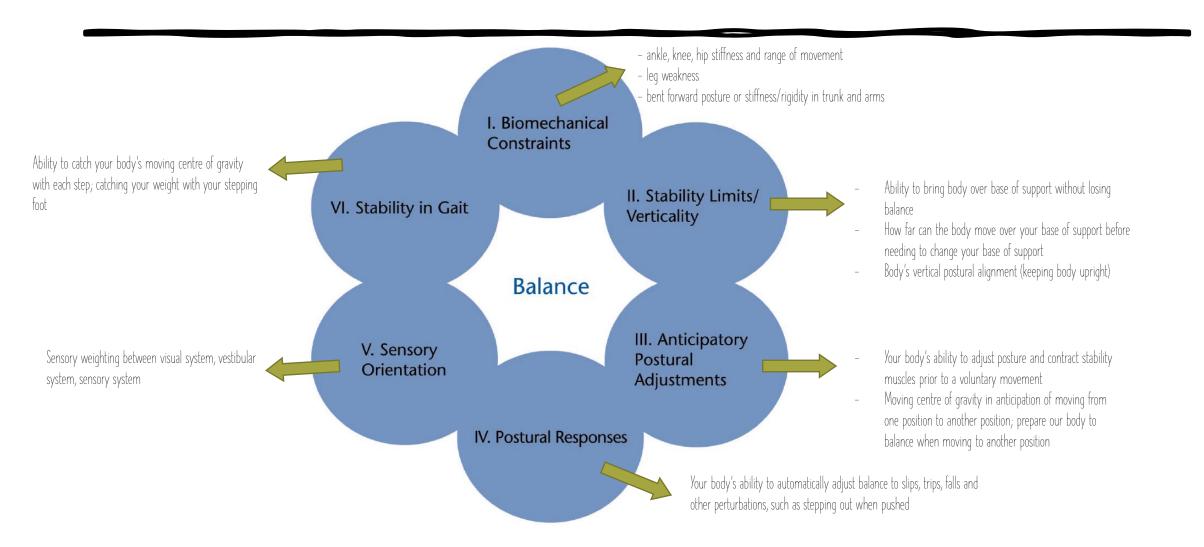




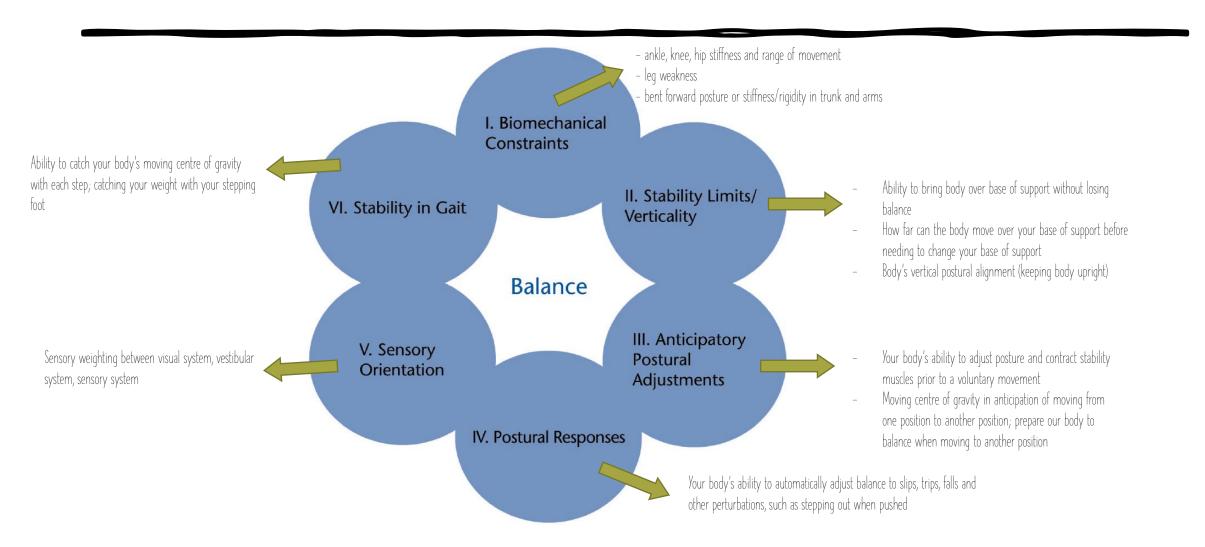






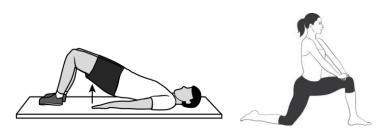


POSSIBLE SOLUTIONS?



1. BIOMECHANICAL SYSTEM

- Ankle, knee, hip, trunk, hand, elbow, shoulder, neck mobility/range of movement exercises
- Leg strengthening exercises
- Trunk strengthening exercises
- Hip and trunk stretches





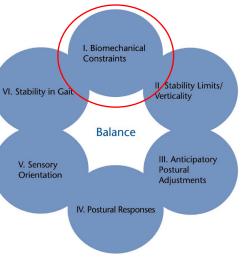
















2. LIMITS OF STABILITY/ VERTICALITY

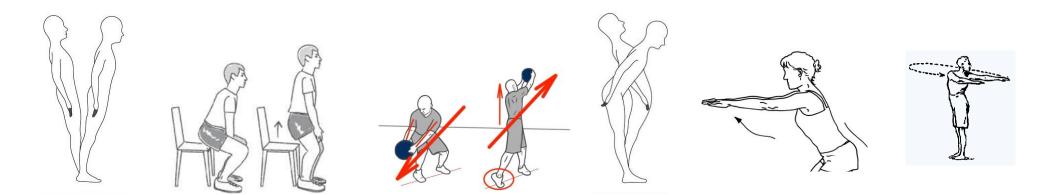
- I. Biomechanical
 Constraints

 II. Stability Limits/
 Verticality

 Balance

 V. Sensory
 Orientation

 IV. Postural Responses
- Postural exercises (axial extension, keep body in perceived vertical, standing upright against gravity etc.)
- Reaching exercises
- Swaying exercises



3. ANTICIPATORY POSTURAL ADJUSTMENTS

I. Biomechanical
Constraints

II. Stability Limits/
Verticality

Balance

V. Sensory
Orientation

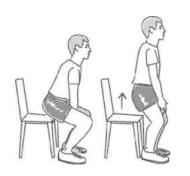
III. Anticipatory
Postural
Adjustments

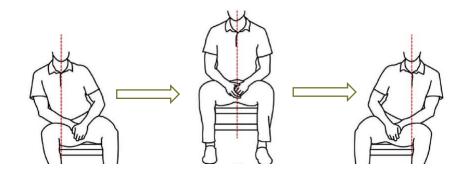
IV. Postural Responses

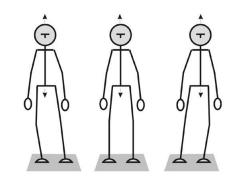
- Weight shifting (in preparation for movement) exercises
- Trunk control exercises
- Limb dissociation exercises







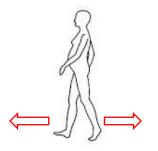






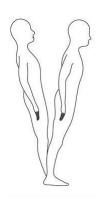
4. REACTIVE POSTURAL RESPONSES

- Stepping exercises (forward stepping, side stepping, backward stepping)
- Weight shifting exercises

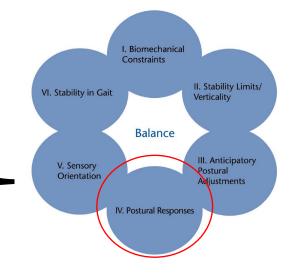






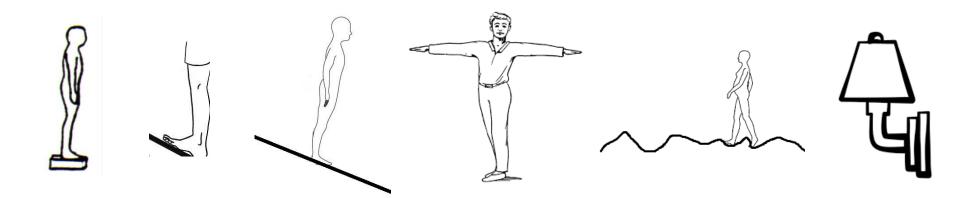


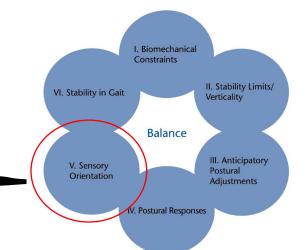




5. SENSORY ORIENTATION AND REWEIGHTING

- Practice between switching from relying on vision to relying on sensation from feet
- Strategies to maintain safety i.e. night light for nighttime toileting, removing trip hazards if sensory reweighting difficult





6. DYNAMIC GAIT STABILITY

VI. Stability in Gait

Balance

V. Sensory
Orientation

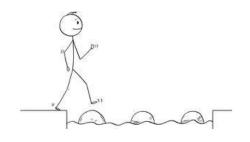
III. Stability Limits/
Verticality

Balance

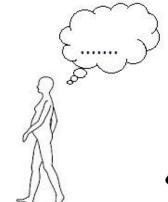
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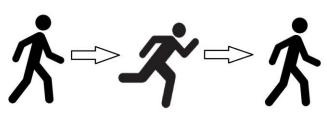
I. Biomechanical

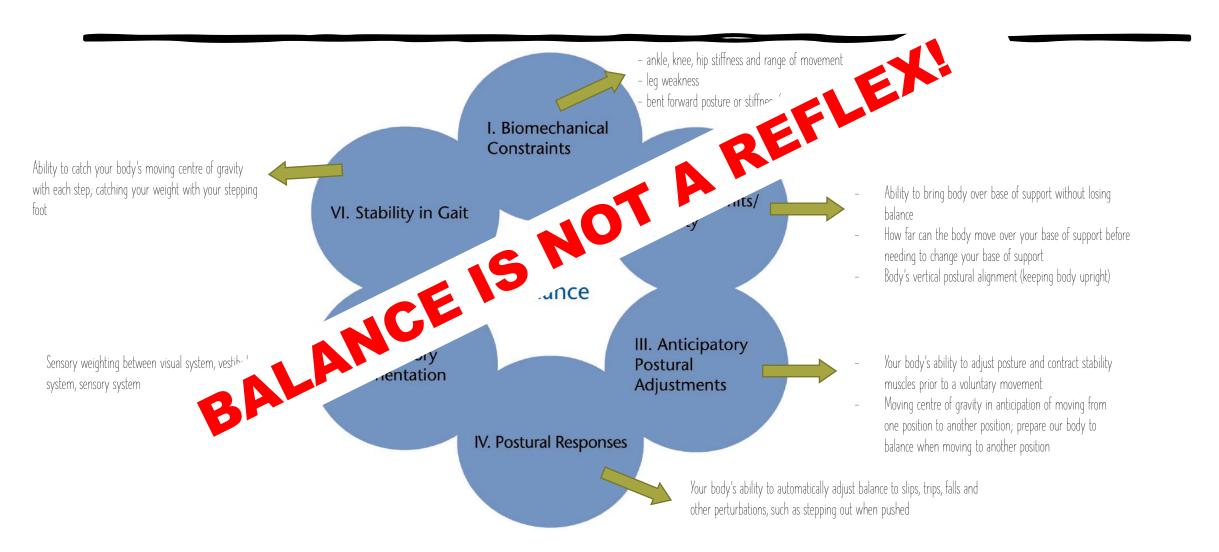
- Changing walking speed
- Walking while turning head
- Stepping over/ navigating obstacles
- Turning
- Add in dual-task components













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SUMMARY



- There are many reasons why we fall. Although balance is a contributing factor, it is not the only reason we fall!
- Although not all falls risk factors are modifiable, we can try to reduce and modify as many risk factors as possible.
 You can't 100% prevent falls, but you can reduce the risks associated with falls.
- Some falls are unpredictable and inevitable, and can happen to anyone regardless of how physically fit you are



QUESTIONS??

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