

EMORY UNIVERSITY SCHOOL OF MEDICINE

Differences in Fear of Falling and Fall Risk Indicators Among White and Black VA Community Dwelling Older Adults

Allison A. Bay, MPH^a, Smrithi Ramachandran^b, Liang Ni, MPH^a, Todd Prusin MSLS^a, Madeleine E. Hackney, Ph.D., ^{a,c,d,e,f} ^aEmory University School of Medicine, Department of Medicine, Division of Geriatrics & Gerontology, ^bEmory University School of Nursing, ^dAtlanta VA Center for Visual & Neurocognitive Rehabilitation, ^eEmory University School of Medicine, Department of Rehabilitation Medicine, ^fBirmingham/Atlanta VA Geriatric Research Education and Clinical Center

Division of Geriatrics and Gerontology

| | In | troduction | Results | | | | | | Results | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------------|--------------------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------|-------------|--------------------|--------------------------------------------|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------|-------------|---------------|------------------------|------------------|
| | | | | | | | | | | | | | | | | | |
| Falling among older adults is common and can cause chronic health complications Fear of falling is strongly associated with falls and falls risk | | | | | Iable 2. Table 2: Multivariate Logistical Models^ for Factors Influencing ABC** Score ^a | | | | | | Table 3. Performance on Motor-Cognitive and Executive Function Tasks and SF-12 Surveys between Groups ¹ | | | | | | |
| • Although White older adults fall more, Black older adults have more fall risk factors | | | | | | OR | 95% CI | Coeff. | SD | t p-value | Fall Risk Factors | Group | N Mear | ı S | SD . | Tests Statistic | P-Value |
| • This study investigated factors that explain fear of falling and differences between | | | | | Full Model | | | | | | Number of Falls in Past Year ² | White | 35 | 0.54 | 1.01 | Z=0.501 | 0.617 |
| White and Black community-dwelling older adults in fear of falling and fall risk factors | | | | | Sex (M/F) | 1.06 | 0.52, 2.13 | 0.055 | 0.359 | 0.153 0.879 | | Black | 45 | 0.44 | 0.76 | 5 | |
| | | | Age (Years) | 0.97 | 0.9, 1.06 | -0.027 | 0.041 | -0.65 0.516 | | Overall | 80 | 0.49 | 0.87 | 7 | | | |
| | | Viethods | | Number of Falls in Past Year | 0.87 | 0.72, 1.01 | -0.139 | 0.081 | -1.72 0.086 | Number of Prescription Medications ² | White | 36 | 3.67 | 3.41 | Z=1.408 | 0.159 | |
| | | | | | Race (B/W) (Ref=W) | 0.33 | 0.11, 0.94 | -1.117 | 0.545 | -2.05 0.041* | | Black | 43 | 2.72 | 2.68 | 3 | |
| • This is a cross-sectional, retrospective design | | | | | MoCA ^b score (/30) | 1.1 | 0.95, 1.3 | 0.1 | 0.08 | 1.242 0.214 | | Overall | 79 | 3.15 | 3.05 | 5 | |
| • Statistical analyses included ordinal logistic regression model to examine which factors | | | | | Preferred Gait Speed (m/s) | 7.23 | 0.22, 245.43 | 3 1.978 | 1.756 | 1.127 0.26 | Use of Assistive Device ³ (Y/N) (Ref=Yes) | White | 37 | 0.30 | 0.66 | 5 W=904 | 0.669 |
| predicted tear of failing, one-way ANOVA for continuous variables, the Fisher exact test | | | | | Backward Gait Speed (m/s) | 2.59 | 0.2, 38.5 | 0.95 | 1.328 | 0.715 0.474 | | Black | 47 | 0.34 | 0.67 | 7 | |
| tor categorical variables, the Mann-Whitney-Wilcoxon test for ordinal variables | | | | | Fast Gait Speed (m/s) | 4.77 | 0.82, 30.39 | 1.563 | 0.907 | 1.723 0.085 | | Overall | 84 | 0.32 | 0.66 | 5 | |
| • Eighty-four diverse community-dwelling older adults (White, $n=3/$; Black, $n=4/$) | | | | | Number of Medications | 0.94 | 0.76, 1.16 | -0.061 | 0.108 | -0.56 0.575 | MoCA^ (/30) ¹ | White | 37 | 26.19 | 3.23 | 3 F=9.87 | 0.002* |
| participated | | | | | Number of Comorbidities | 0.93 | 0.71, 1.21 | -0.068 | 0.133 | -0.51 0.609 | | Black | 44 | 23.77 | 3.62 | 2 | |
| Table 1. Participant Characteristics | | | | | Use of Assistive Device (Y/N) (Ref:Y |) 1.59 | 0.31, 8.24 | 0.461 | 0.827 | 0.557 0.577 | _ | Overall | 81 | 24.88 | 3.63 | 3 | |
| | | | Years of Education | 1.02 | 0.81, 1.28 | 0.021 | 0.117 | 0.18 0.857 | Preferred Gait Speed (m/s) ¹ | White | 37 | 1.17 | 0.2 | 0F=3.62 | 0.06 | | |
| Variables | Sample (n=84) | Black (n=47, 56%) | White (n=37, 44%) | P-Value | Physical Component Score (PCS) | 1.06 | 1.0, 1.12 | 0.055 | 0.03 | 1.856 0.063 | | Black | 44 | 1.06 | 0.29 |) | |
| | $M \pm SD$ | $M \pm SD$ | $M \pm SD$ | | -Mental Component Score (MCS) | 1.05 | 0.99, 1.11 | 0.047 | 0.028 | 1.697 0.09 | _ | Overall | 81 | 1.11 | 0.26 | 5 | |
| Age (Years) | 69.0 ± 5.2 | <u>68.3 + 5.1</u> | 70.0 <u>+</u> 5.3 | 0.147 | Reduced Model | | | | | | Backward Gait Speed (m/s) ¹ | White | 37 | 0.83 | 0.24 | F=1.59 | 0.211 |
| Years of Education | | | 1 < 0 + 2 7 | 0.007* | Number of Falls in Past Year | 0.88 | 0.74, 1.01 | -0.132 | 0.073 | -1.8 0.071 | | Black | 44 | 0.75 | 0.30 | | |
| (Years) | 15.1 ± 2.7 | $ 14.4 \pm 2.5 $ | 16.0 ± 2.7 | 0.00/* | Race (B/W) (Ref=W) | 0.27 | 0.10, 0.67 | -1.308 | 0.474 | -2.76 0.006* | _ | Overall | 81 | 0.79 | 0.27 | 7 | |
| Comorbidities | 0 0 + 1 0 | 0 0 7 1 7 | | 0.000 | MoCA Score (/30) | 1.15 | 1.0, 1.32 | 0.136 | 0.07 | 1.953 0.051 | Fast Gait Speed (m/s) ¹ | White | 37 | 1.63 | 0.37 | 7 F=4.748 | 0.032* |
| (No.) | 2.8 ± 1.9 | $2.8/\pm 1.7$ | 2.8 ± 2.0 | 0.886 | Preferred Gait Speed (m/s) | 13.08 | 0.73, 254.84 | 4 2.571 | 1.475 | 1.743 0.081 | | Black | 44 | 1.44 | 0.40 |) | |
| Prescription | 2.15 + 2.05 | 272 , 2 (9) | 2 (7 (2 4 1)) | 0.150 | Fast Gait Speed (m/s) | 6.29 | 1.24, 36.4 | 1.839 | 0.851 | 2.16 0.031* | | Overall | 81 | 1.52 | 0.40 |) | |
| Medications (No.) | 3.15 ± 3.05 | 2.12 ± 2.68 | 3.67 ± 3.41 | 0.159 | Physical Component Score (PCS) | 1.06 | 1.01. 1.11 | 0.054 | 0.026 | 2.08 0.038* | SF12: Physical Composite Score ¹ | White | 36 | 47.37 | 12.48 | 8 F=0.992 | 0.322 |
| MoCA^ (/30) | 24.88 <u>+</u> 3.63 | 23.77 <u>+</u> 3.62 | 26.19 <u>+</u> 3.23 | 0.002* | | | | | | | | Black | 47 | 49.90 | 10.61 | | |
| | n (%) | n (%) | n (%) | | Mental Component Score (MCS) | 1.05 | 1.0, 1.1 | 0.049 | 0.025 | 1.991 0.046* | | Overall | 83 | 48.80 | 11.46 | 5 | |
| Sex (Male/Female) | 20 (64) | 11 (36) | 9 (28) | | | D • | • | | | | SF12: Mental Composite Score ¹ | White | 36 | 51.44 | 8.79 | 9 F=0.036 | 0.849 |
| Transportation ^a | | | | 0.216 | | Discu | SSION | | | | | Black | 47 | 51.82 | 9.14 | 1 | |
| Self | 65 (77.4%) | 34 (72.3%) | 32 (86.5%) | | | | | | | | | Overall | 83 | 51.66 | 8.94 | f | |
| Family | 7 (8.3%) | 7 (14.9%) | 1 (2.7%) | | • Predictive of fear of falling | in the reg | ression mo | odel, sugg | gesting | that these | Fear of Falling Factors | | | | | | |
| Service | 6 (7.1%) | 4 (8.5%) | 2 (5.4%) | | _ combined factors may intera | ict to prov | vide insigh | nt into fea | ar of fal | ling. | Activities Specific Balance Confidence (/100) | White | 36 | | 89. | 03 12.31 F=0. | 251 0.618 |
| Public | 7 (8.3%) | 4 (8.5%) | 3 (8.1%) | | Participants did not differ in | number o | of falls in | the past y | year, alt | hough | | Black | 40 | | 86. | 87 23.05 | |
| Type of Housing | | | | 0.342 | Black adults performed mor | e poorly o | on fall risk | x indicato | ors. | | | Overall | 76 | | 87. | 89 18.66 | |
| Own House | 58 (69.1%) | 30(63.8%) | 28(75.7%) | | • White participants were more | e worried | about fal | lling. Fall | risk in | dicators | Single Item Fear of Falling (/7) ^{3, 4} | White | 37 | | 2.4 | $\frac{41}{1.39} = 6$ | 61 0.043* |
| Senior Residence | 26 (54.2%) | 17 (36.2%) | 9 (24.3%) | | appear to impact the races d | ifferently | on fear of | f falling. | | | | Black | 47 | | 1.3 | 89 1.49 | |
| rear of railing | O(1.75) | 1(1,10) | 25(20) | | • Slower gait speed is associated | ted with f | ear of fall | ing and fa | all risk | in older | | Overall | 84 | | 2. | 12 1.46 | |
| Median (IQK) Econ of Folling Dot | $\frac{2(1.75)}{4 \log 2 m(0/2)}$ | | 2.5 (3.0) | | adult nonulations | | | | | | Table 3: Differences by Race in Fall Risk Factors and Fe | ear of Falling; results a | are presented by r | mean + sta | andard d | leviation, and sepa | arated by White, |
| $\begin{array}{c c c c c c c c c c c c c c c c c c c $ | | | | | | | | | | Black, and Overall (whole sample); ¹ One-way ANOVA analysis for normally distributed continuous variables was performed; ² One-way | | | | | | | |
| $\frac{1}{2} \qquad \qquad$ | 3(49.4) 3(1/10) | 9(173) | A (11 A) | | Rola | wanca (| of Findi | nac | | | ANOVA based on negative binomial regression analysis | for non-normal contin | nuous variables w | vas perfori | med; 3 M | Iann-Whitney Wil | coxon test for |
| $\frac{2}{25}$ 9 | (10.3) | 5 (9 6) | (11.4) | | | | | igs | | | ordinal variables was performed; ⁴ Higher=worse | | | | | | |
| $\frac{2.3}{3}$ | (10.3) (4.6) | 2(3.8) | 2(57) | | - The ANOVAs indicated t | hat Whit | o norticin | onto had | higher | voluce on | * Significant at the alpha=0.05 level; ^ Montreal Cogni | tive Assessment | | | | | |
| 4 1 ⁴ | (+.0) 5 (17 2) | <u>2 (3.6)</u> 5 (9.6) | 10(286) | | - The ANOVAS indicated t | | | | | | | Conclusi | ong | | | | |
| 5 2 | (2.3) | 0(0) | 2 (5.7) | | - the Fear of Falling Single | e Item, in | dicating g | greater su | abjectiv | ve FoF than | | Conclusi | UIIS | | | | |
| <u> </u> | (1.1) | 1 (1.9) | $\frac{1}{0}(0)$ | | Black participants (p=0.0 | 43) (Tab | le 3). | | | | The improved of we are alreaded by a warning of f | and an fam differen | | | | life malated | to food of |
| ABC^^ Average Se | core Quartiles. n (% | () | | | • The ANOVAs indicated that Black participants had slower fast gait | | | | | fast gait | The impact of race should be examined further for differences in perceptions and beliefs related to fear of | | | | | | |
| q1 20 (23) 10 (19.2) 10 (28. | | | 10 (28.6) | | speeds (p=0.032) and lower MoCA scores (p=0.002) than White | | | | | White | falling to facilitate the development of pa | atient-centered fa | lls preventio | n physic | cal the | erapy program | ns. |
| q2 23 | 3 (26.4) | 14 (26.9) | 9 (25.7) | | participants (Table 3) | | | `▲ | - | | | | | | | | |
| q3 2 | 1 (24.1) | 10 (19.2) | 11 (31.4) | | Rescond for racial difference | nces cha | uld he ev | aminod f | furthor i | in fear of | Acknowledgements: This project was supported | d by the Dept. of Ve | et. Affairs Care | er Devel | opmen | t (N0870W) sup | ported ME |
| q4 23 | 3 (26.4) | 18 (34.6) | 5 (14.3) | | folling and holomon aref: | donce to | $f_{0,0}:1:_{0,0}$ | $\frac{1}{1}$ | | nt of | Hackney. The Emory Center for Health in Agi | ng, the Undergradu | ate Research P | artners | Program | m at the Emory | U. College |
| Table 1. Values are press | sented as n (%) or media | n (IQR) as labeled; ^a People | e who selected multiple n | nodes were | ranning and balance confi | ience to | | me devel | iopmen | IL OI | of Arts and Sciences Funding came through | a Patient-Center | ed_Outcomes_F | Research. | Institu | ite_Award_(109 | 9-EU)_the |
| counted multiple times | ; * Significant at the alph | patient-centered falls pre- | patient-centered falls prevention physical therapy programs. | | | | | National Parkinson Foundation Community Cr | $rant (A_01)$ | | | | | | | | |
| Specific Balance Confid | ience: r-values were cal | culated with Uni-sollare tes |)l. | | 1 | | | | | | | | | | | | |



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