

Cardiovascular Medications and Fall Risk



A new analysis indicates an association between use of certain cardiovascular medications and fall risk. Researchers found that older adults who take non-selective beta-blockers may be at an increased of falling compared with those taking selective beta-blockers. The findings are published in the British Journal of Clinical Pharmacology.

According to researchers, these types of drugs differ by their receptor binding properties and their systemic effects on the body. They analysed data from two prospective studies involving more than 10,000 individuals, all aged 55 years or older. Their analysis revealed that use of a selective beta-blocker was not associated with fall risk, but use of a non-selective beta-blocker was associated with a 22 percent increased risk. Overall, 2,917 participants encountered a fall during follow-up.

Based on the results, researchers say that fall risk should be considered when weighing the pros and cons of prescribing different beta-blocker classes for older individuals.

"Drug-related falls remain under-recognised, leading to preventable falls and related injury. Precise prediction of drug-related fall risk is of major importance for clinical decision-making," notes senior author Dr. Nathalie van der Velde, from the Department of Internal Medicine, Erasmus MC, University Medical Centre Rotterdam, CA, Rotterdam, the Netherlands. "Knowledge of type-specific effects such as selectivity in beta-blockers can be expected to improve decision-making."

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