BALANCE AND FALLSFact Sheet For Consumers

Cancer Survivors Have a Higher Risk of Falling

The Center for Disease Control reports that falls are the leading cause of fatal and nonfatal injuries among older adults. If you have been diagnosed with cancer you are even more likely to experience a fall because of the cancer diagnosis itself and the treatments that are used to cure the condition. Treatment such as chemotherapy can affect your balance by affecting your nervous system and your body's ability to feel, such as causing numbness in your feet. Fatigue that you may experience can also cause a lack of awareness or your environment. You may have generalized weakness or changes in your vision. There are many more factors. If you had cancer many years ago, concerns may still be present. Therefore, it is important to see a healthcare professional about problems with your ability to balance, difficulty walking or if you have fallen.

How do I know if I have a higher risk of falling?

Having a fear of falling or <u>lacking confidence in your ability to not fall</u> is a red flag. Although there are many factors that can predispose you to a fall, any of the following places you at a higher risk of falling:

- A fall in the last year
- Difficulty walking or maintaining balance, i.e. using your hands while walking to hold onto walls or furniture or feeling like you are going to fall when you close your eyes in the shower
- Requiring help with activities of daily living, i.e. bathing or preparing meals
- Abnormal sensation in your hands or feet, i.e. pins and needles, numbness, tingling
- Urinary Incontinence, i.e. having to rush to the restroom

What can I do?

Seek advice from a licensed professional. It is believed that survivors who have someone who has encouraged them to get medical services have a lower risk of falls. If you keep a daily log, write down if you have tripped or have fallen. Is it happening more at the end of the day or since you received new prescription eye glasses? Consider keeping a daily log, it will help determine concerns and issues.

How can physical therapy help me?

A physical therapist will ask about your overall health and activities you'd like to be able to do, and perform various assessments. A therapist may test your strength, flexibility, sensation and balance with tasks that simulate what you do daily. Some tasks may be slightly more challenging than walking.



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Physical therapists use assessments to determine why you are having difficulties, rate your improvement and plan the treatment. Treatments could include but are not limited to:

- Postural Education
- Somatosensory Training (learning how to use your body better)
- Conditioning and Strengthening
- Vestibular Rehabilitation (training your inner ear to work better)
- Education to improve your home to reduce the risk of falling

How do I find a Physical Therapist?

If you think you may benefit from physical therapy, the American Physical Therapy Association (APTA) offers a "Find A PT" database at www.choosept.com that can help you find a physical therapist who specializes in oncology rehabilitation. Insert "cancer" in the Practice Focus area.

You can also visit APTA Oncology's consumer resources page at www.oncologypt.org.

Questions to Ask Your Physical Therapist

1) Do you typically work with those diagnosed with cancer?

There is no correct answer for this question except that they should have a couple of examples of how or when they have recently worked with patients with cancer.

2) Would you be able to provide me with resources in the community that can help maintain the improvements I gain here?

Recommending you continue with a community-based balance exercise program may be appropriate. The Otago Exercise and A Matter of Balance program are examples of programs that scientists have proven to be beneficial. For information: www.ncoa.org

Created by: Earllaine Croarkin PT, NCS 5/2018. Disclaimer: This 'Balance and Falls Fact Sheet' is a public service from APTA Oncology. It is not intended to be a comprehensive overview of the subject

