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# EAHAD 2016 - Abstract Submission

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## EXPLORING THE SIGNIFICANCE OF FALLS IN THE EVERYDAY LIVES OF THE OLDER PERSON WITH HAEMOPHILIA

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**Has this abstract already been published or presented before?:** No

**Preferred presentation method:** Oral or Poster Presentation

**Introduction:** People with haemophilia (PWH) are increasingly enjoying older age, but are known to show signs of haemophilic arthropathy from young adulthood. It has been suggested that they may be at greater risk of falls, at an earlier age, than people within the general population. A review, in 2013, of the orthopaedic co-morbidities in the older haemophilic population revealed there have been few published studies which have investigated the risk of falls in PWH. There is a lack of information on the effects of falling on balance, self-confidence and perceptions of the need for modified behaviour.

**Methods:** In this pilot study, we used grounded theory methods to explore the significance of falls in the everyday lives of adults with haemophilia. Semi-structured interviews were conducted with ten participants with severe haemophilia (Haemophilia Joint Health Score (HJHS): median 34; IQR 17-49) aged 36-82 years (median 56; IQR 49-66). We utilised the Falls Efficacy Scale, Berg Balance Scale and Timed-Up-And-Go to ascertain if these standardised falls risk measures were able to identify those at risk of falling. Due to the exploratory nature of this pilot study, a narrative and descriptive analysis was performed.

**Results:** Eight participants had experienced at least one fall in the previous year and all were fearful of falling in the future. A theme of "slipping away" emerged which was underpinned by 3 core categories; inevitability, avoidance and behaviour change, and exclusion. The fallers along with the non-fallers were categorised as more than fairly confident in performance of everyday activities (Falls Efficacy Scale) and a low risk for falling (Berg Balance Scale). However, all measures (HJHS, Falls Efficacy Scale, Berg Balance Scale and Timed-Up-And-Go) were worse in the fallers when compared to the non-fallers.

**Discussion/Conclusion:** Older PWH are concerned about falling however using standardised measures they are classed as more than fairly confident and at low risk for falling. The findings of this pilot study suggest they see falling as inevitable and as a result avoid activities and modify their behaviour to minimise their fall risk. This subsequently leads to a feeling of social exclusion from friends and family activities. Adjustment of risk cut-off levels in current measures or alternative methods of identifying those at risk together with early intervention to prevent social exclusion are needed.

**The presenting author fulfills the above conditions and wants to apply for a travel award:** No

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