

## It happens every day ...

The risk of falling increases with age. 30 to 40 percent of healthy older people suffer from falls too. Every third person over 65 years of age falls at least on an annual basis. Bone fractures are a frequent result of this. Fractures in the hip and thigh regions have particularly serious consequences.



## You are at particular risk of a hip fracture if you

- suffer from osteoporosis
- are afraid because you have already had a number of falls
- have never played much sport and are generally sedentary
- suffer from muscular weakness, balance disturbances and vertigo
- perform household chores and face trip hazards from carpets, steps and wet floors
- take medication, particularly tranquilisers and sleeping tablets, or drugs which lower blood pressure and blood sugar
- suffer from impaired hearing and vision

## Prevent the fracture and remain independent

Every year several thousands of people will suffer a hip fracture. The consequences are painful lengthy treatment, as well as a need for nursing care, which is often a threat to independence and impairs the quality of life. Approx. 50% of all hip fracture patients have to go into a nursing home afterwards.

## Mobility before and 6 months after a hip fracture (n=120)<sup>1</sup>

Person's ability to...	Prior to fracture	After 6 months
Dress themselves	86 %	49 %
Get out of bed	90 %	32 %
Walk on their own	75 %	15 %
Walk with assistance	95 %	74 %
Walk on stairs	63 %	8 %
Walk 900 m	41 %	6 %

## How can falls and their consequences be prevented?

To many people it is very important to maintain personal mobility and independence. In this respect, prevention is better than cure. What can you do to prevent a fall or a hip fracture?

### Reducing the risk of falls

- Strengthening muscles by daily exercises and movement
- Balance and coordination training
- Removal of sources of risk in the household
- Abstaining from alcohol

### Reducing the negative consequences of falls

Not all risks of falls can be controlled or eliminated. An active prevention is important. Hip protectors can effectively and inexpensively prevent hip fractures.

<sup>1</sup> Martholi et al: Decline in physical function following hip fracture. JAGS 1992; 40:861-866

## SAFEHIP® – the hip protector

According to current research, there is scientific proof of the effectiveness of hip protectors for nursing home and rest home residents<sup>2</sup>.

Hip protectors play a decisive role in preventing fractures near the hip joint - efficiently and cost-effectively. This has been proven in several studies.

## SAFEHIP® – the patent

In 1993, SAFEHIP was the first hip protector launched on the market – an innovation in fall prevention.

Since 2006, SAFEHIP has been available with patented horseshoe technology. The horseshoe-shaped protectors support the body's natural function as they not only reduce the energy of the fall, but also dissipate it to the surrounding soft parts.

Since 2008 this patented hip protector has been available in 100% textile AirX material.



## SAFEHIP® – clinically proven

The effectiveness of SAFEHIP has been proven worldwide in studies with 7,000 patients<sup>3</sup>. It can reduce fractures of the femur neck by up to 64%<sup>4</sup>. This makes SAFEHIP one of the best clinically proven hip protector in the world. Also the latest biomechanical tests have proven the high efficiency of the SAFEHIP AirX.



<sup>2</sup> Expert standard fall prophylaxis in a care environment 2006. Deutsches Netzwerk für Qualitätsentwicklung in der Pflege (DNQP), S. 86

<sup>3</sup> For further information on studies, visit [www.safehip.com](http://www.safehip.com)

<sup>4</sup> Users compared to non-users in a clinical study conducted in Norwegian care homes - Bentzen H, Bergland A, Forsén L; "Risk of hip fractures in slightly protected, heavily protected and unprotected cases"; Inj. Prev. 2008; 14; 306-310.