

# PRESCRIPTION

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## FALL PREVENTION BY COMMUNITY PHARMACISTS:

**Gaps, Opportunities, and the Way Forward**

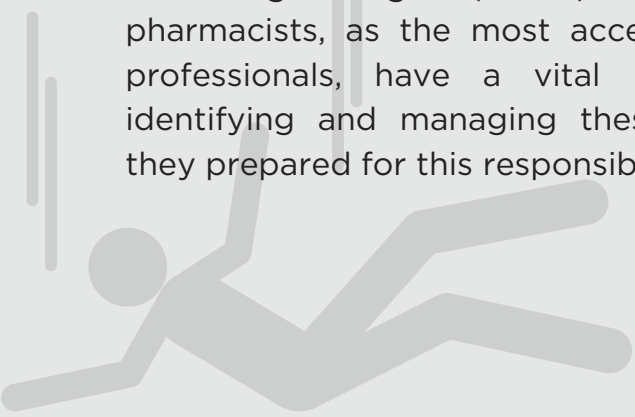
By: Assoc. Prof. Dr. Mohd Shahezwan Abd Wahab

### **An Overlooked Cause of Falls**

Falls are a major public health issue among older adults, often leading to serious injuries, hospitalisation, or even premature institutionalisation [1]. While environmental hazards and physical decline are well-known contributors, one critical but frequently overlooked factor is medication. A wide range of commonly used drugs—including sedatives, antiepileptics, antihypertensives, and medications for incontinence—are known as fall-risk increasing drugs (FRIDs) [2]. Community pharmacists, as the most accessible healthcare professionals, have a vital role to play in identifying and managing these risks. But are they prepared for this responsibility?

### **IN THIS ISSUE**

- Fall Prevention by Community Pharmacists: Gaps, Opportunities, and the Way Forward
- A Community Pharmacy-based Fall Prevention Framework Across Continuums of Care
- Strengthening Industry-academia Collaboration: UiTM Welcomes CEOs Through the CEO@Faculty Programme
- Webinar Highlights: Neuro- and Liver Protective Effects of Palm Vitamin E Tocotrienols
- Webinar Highlights: Transforming Pharmacy Education Through Experiential Learning
- Faculty of Pharmacy Ignites Aspirations at Ekspo Selangkah ke UiTM (ESKU) 2025
- Camp of Administering Committee and Programme Handling (COACH) 2025
- From Brain Scans to Blood Drops: FDA Approves First-Ever Blood Test for Alzheimer's Detection" 2025
- Aicardi Syndrome
- Empowering Patients Through Medication Price Transparency



## **What Pharmacists Know—And Don't Know**

Our research team recently published a study in the *International Journal of Pharmacy Practice* investigating this issue in detail. Titled “Community Pharmacists’ Knowledge, Confidence, and Perceived Need for Training on Fall-Risk Increasing Drugs and Fall Prevention: A Cross-Sectional Study in Selangor, Malaysia,” the research surveyed 295 community pharmacists and uncovered critical gaps in their knowledge, confidence, and training related to FRIDs and fall prevention [3]. Although most respondents recognised that medications like benzodiazepines and opioids could contribute to falls, less than 60% were aware of the risks associated with other drug classes, including antiepileptics and diuretics. This lack of awareness could hinder pharmacists from identifying and intervening effectively when fall risks are medication-related.

## **Tools Exist—But Few Know Them**

The study also found that only a minority of pharmacists were familiar with key reference tools, such as the Beers Criteria, the CDC’s Stopping Elderly Accidents, Deaths & Injuries (STEADI) initiative, and the Screening Tool of Older Persons Prescriptions in older adults with high fall risk (STOPPFall) tool—resources specifically designed to help healthcare professionals identify and manage high-risk medications among older adults. Equally concerning, pharmacists expressed limited confidence in recommending deprescribing of FRIDs to doctors. While almost 90% felt confident conducting medication reviews, just about 30% were comfortable initiating discussions about stopping medications that could cause harm.

## **Training: The Missing Piece**

Perhaps most revealing was the near-universal acknowledgment of inadequate training. Over 90% of pharmacists reported that their undergraduate education or professional development had not prepared them to handle fall prevention or FRID-related issues. Despite this, an overwhelming majority expressed strong interest in attending specialised training programs. Those working in chain pharmacies tended to show slightly higher confidence in certain areas, suggesting that structured institutional support might influence preparedness.

## **Turning Knowledge into Action**

The findings align with international research showing that training significantly improves pharmacists’ knowledge and practice in fall prevention. Studies from Australia and the Netherlands have demonstrated that post-training, pharmacists not only feel more capable but also begin to actively implement fall prevention services in their practices [4, 5]. This indicates that education is not just a theoretical exercise—it translates into tangible public health benefits.

## A Call for Empowerment

In Malaysia, where the population is rapidly ageing, these insights are especially urgent. Equipping community pharmacists with the right tools, knowledge, and confidence can make a significant difference in preventing falls and improving quality of life among older adults. The study underscores the need for targeted educational interventions, interprofessional collaboration, and stronger policies that support pharmacists in their evolving roles.

The full article is available in the International Journal of Pharmacy Practice (2025, Vol. 33, pp. 222-231) and can be accessed at: <https://doi.org/10.1093/ijpp/riaf015>



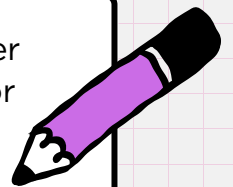
## FAST FACTS



### What are Fall-Risk Increasing Drugs (FRIDs)?



FRIDs are medications that can increase the likelihood of falls in older adults due to side effects such as dizziness, sedation, hypotension, or impaired balance. Common FRIDs include benzodiazepines, opioids, antiepileptics, antihypertensives, and medications for urinary incontinence. Recognising and managing these drugs is crucial in fall prevention efforts, especially for older individuals with multiple chronic conditions.

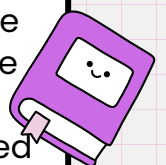


### Why are community pharmacists important in fall prevention?

Community pharmacists are highly accessible healthcare professionals who often interact with older adults during medication dispensing and counseling. Their role includes reviewing medications, educating patients on side effects, and collaborating with doctors to reduce or deprescribe high-risk medications. With the right training, pharmacists can become frontline agents in reducing fall risks among elderly populations.

### What did the study in Selangor reveal about Malaysian pharmacists?

The study found that while many pharmacists were confident in general medication review, significant knowledge gaps exist regarding specific FRIDs, deprescribing practices, and the use of evidence-based tools like the Beers Criteria or STOPPFall. Over 90% of pharmacists reported inadequate formal training in fall prevention, yet the majority were keen to attend future educational programs to close these gaps.



## References:

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## About the author



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