



Service Priorities and Programmes
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Preventing second fragility fracture through restoring physical activity capacity

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Introduction

Previous fracture and resulting disabilities were risks factors for subsequent fall and fracture. Second fragility fracture rate accounts about 8% in recent literature. Second fracture and post fracture care yield additional health resources, thus burdening health economics. Regaining balance ability and physical activity capacity after fragility fracture are known to reduce injurious fall.

Objectives

A Fragility Fracture and Fall Prevention (FFFP) Program was developed, aiming at modifying fall risk factors and preventing subsequent injurious fall incident in patients with fragility fractures.

Methodology

Cases with Fragility fracture as defined by WHO and rehabilitating in Alice Ho Miu Ling Nethersole Hospital (AHNH) Comprehensive Day Rehabilitation Centre (CDRC) were recruited in FFFP. Patients received multidisciplinary care, targeting to restore optimal balance ability and physical activities capacity. They were also given self-management education on fall prevention.

Result

82 cases (6 males and 76 females) aged 72 ± 8 finished rehabilitation and had follow-up six months after discharge. Upon discharge, they achieved Berg Balance Scale above cut-off score for fall (49 ± 8). Most of the cases (94%) restored capacity for outdoor activities and 60% of them regained walking tolerance greater than 30 minutes. Their physical activity capacities were maintained at six months follow-up. Fall incidence rate were reduced to 4% and none of the cases had recurrent fracture.