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• 英文關鍵字	Elderly; Fall; Hip fracture; Risk factor; Fear of falling

• 中文摘要

本計劃第二年已完成個案對照研究，瞭解老人跌倒髖部骨折的危險因子；第二年並開始追蹤個案對照研究的研究對象，瞭解跌倒髖部骨折者與非髖部骨折者六個月後存活情形以及害怕再跌倒心理傷害之變化。研究樣本是收集中部三家醫院因跌倒在急診室就醫的老人，到九十六年四月底共收集 238 位髖部骨折者及 393 位無髖部骨折者。邏輯式迴歸模式分析結果顯示：老人跌倒後發生髖部骨折與年齡較高、視力模糊、骨礦密度疏鬆、四個慢性疾病數或以上、服用降血糖藥物、跌倒種類、左右方向跌倒、跌倒在走廊/玄關及騎樓/庭院、跌倒後起身時間長於三十分鐘有統計的顯著相關；身體質量指數大於二十五及過去一年跌倒二次或以上則較不會發生髖部骨折。另外，比例式危險模式分析結果顯示：老人跌倒後六個月內死亡危險性與視力很模糊、身體質量指數小於十八點五、向前跌倒、以及傷害嚴重度有統計的顯著相關。最後，比例式勝算模式分析結果顯示：老人跌倒後六個月內的心理害怕增加與骨礦密度疏鬆及多個慢性疾病數或以上有統計的顯著相關。大部分的髖部骨折危險因子與國外報告相同，另有些則需瞭解是否是地區或種族的差異；跌倒後六個月內死亡以及心理害怕增加的結果需更多的樣本驗證參數估計的穩定性。

• 英文摘要

In the second year of this project, a case-control study was completed to determine risk factors for hip fractures in elderly people. In addition, mortality and fear of falling among elderly fallers over a 6-month period were also ascertained and assessed in this year. From the emergency rooms of three hospitals in Taichung area, persons aged 65 or older who fell and sustained a hip fracture as cases and those who fell and had an injury other than hip fractures as controls were recruited for this study. In the end of April, 2007, there were 238 cases and 393 controls. The result of the logistic regression model analysis shows that the risk of occurring a hip fracture during a falling event to the elderly was significantly associated with older ages, poorer vision, lower body mass index, use of medication for lowing blood sugar levels, fall types such as sinking and step-down, falling to the side and the backward, falls in hallway, stairways, and yards, and long lie after a fall. On the other hand, the risk of death among elderly fallers over a 6-month follow-up period was significantly associated with poorer vision, lower body mass index, and falling to the forward. Furthermore, the risk of increasing fear of falling was significantly associated with osteoporosis and comorbid conditions. Most of risk factors identified in the study are consistent to those reported in previous studies; however, some are in conflict possibly due to environmental or racial differences. Factors such as poorer vision, lower body mass index, use of medication, and fall direction can be modified or trained in order for reducing the occurrence of hip fractures during a fall in the elderly. More subjects need to be accrued for accurately identifying these risk factors for death and increasing fear of falling among elderly fallers.