Authors’ Response to Letter to the Editor

FALL-RELATED HIP FRACTURES

Drs Formiga and Lopez-Soto and their colleagues have helpfully drawn our attention to their research on hip fracture risk factors (1,2) in which they report an association between polypharmacy and psychotropic drug use and risk of fall-related hip fractures. As these and other authors have indicated, studies of the association between psychotropic drug use and fractures or other injuries have produced somewhat conflicting results (3,4), in part due to methodological challenges (4). Further research in this area is therefore welcome, and we hope that Drs Formiga and Lopez-Soto and their colleagues, as well as other researchers, will continue this line of investigation. We intend to explore the role of polypharmacy and psychotropic drug use as risk factors for hip fracture in our future research. In our previous study (5), we examined home care clients’ risk factors based on their admission characteristics, with a view to identifying characteristics that could be used to target clients warranting further investigation and preventive strategies. In considering the impact of drug use–related variables, it would be important for the analyses to reflect that drug use is likely to change over time and should therefore be considered as a time-dependent covariate in survival analyses. We also suggest that it would be useful (but challenging) to consider all classes of medication use, including prescription drugs, over-the-counter medications, and herbal remedies, all of which have the potential for clinical effects (6,7) that may increase the risk of fall-related injuries. These data are available in the RAI-HC database, which we use in our analyses.

Although the reports of Drs Formiga and Lopez-Soto and their colleagues are in some ways complementary to our research, in that they considered an additional set of hip fracture risk factors, we would caution against direct comparison of our studies. We investigated hip fracture risk among home care clients, a group that has received relatively little attention in epidemiological research. Drs Formiga and Lopez-Soto have examined hip fracture risk in a population for whom home care use is infrequent. Also, all the participants in their study were patients who had experienced a fall-related fracture, and so a non–hip fracture group was unavailable for comparison. Furthermore, although we also found falls to be an important risk factor (5), we note that risk factors for fractures are not necessarily the same as risk factors for falls (8).

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