



Situational Safety: Orthostatic Hypotension

Patients on warfarin are cautioned to avoid falls and protect themselves from bumps and bruises. Certain situations and health conditions put many older patients at high risk for falling. One of these conditions is orthostatic hypotension.

Orthostatic refers to a body in an upright position; and hypotension refers to low blood pressure. Thus, orthostatic hypotension is a sudden drop in blood pressure when a person gets up from lying down or a seated position after a period of rest. It is not a disease, but a temporary decrease in blood supply to the upper part of the body that can cause dizziness or even fainting.¹

Orthostatic hypotension has many causes. Some medications can contribute to this condition, such as diuretics that reduce blood volume and blood pressure medications. Patients who already have low blood pressure, or who have lost water due to vomiting, diarrhea, excessive sweating, or poorly managed diabetes, are also at increased risk.¹

The best way to avoid falls due to orthostatic hypotension is to recognize the conditions that increase the risk. Rising too quickly to answer the telephone or a knock at the door may cause rapid dizziness. Patients could consider counting to ten before sitting or standing up. This simple step might allow the body to regulate its blood pressure and reduce the risk of the dangerous falls caused by dizziness.

Patients taking warfarin are at increased risk for internal bleeding after a fall. Patients should therefore report any dizziness to their doctor, regardless of the cause, and always use handrails and/or walkers where possible.

Patients should also post phone numbers for their doctor's office and a local ambulance service on or near their telephone. The effects of a fall, such as internal bleeding, may not appear immediately (or at all) after the fall. All falls, no matter how minor, should be reported immediately to a healthcare professional.

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1 Berkow, R. (1997). *The Merck Manual of Information*. New York: Simon & Schuster, Inc. p.118-119.