Are Your Medicines Increasing Your Risk of a Fall or a Car Crash?

Older adults (65 years and older) are at a greater risk if they:

• Use any medicine with side effects that can cause problems with how they think and remember, and the way their bodies perform.

• Take multiple medicines daily with these side effects.

How can I reduce my risk of falling or having a car crash?

• Use the Personal Medicines List to make a list of the medicines you take. Include all prescription medicines, over-the-counter medicines (OTCs), dietary supplements, and herbal products.

• Use the Personal Action Plan to help guide your conversation with your doctor or pharmacist at least once a year, or when you change your medicines.

Ask your doctor or pharmacist these questions:

• What is this medicine used for?

• Does this medicine interact with others I am taking?

• Could this medicine have side effects that might change my ability to drive safely or increase my risk of falling?

• Is there another medicine or dose I should try?

• If I stop or change this medicine, what side effects should I expect?

Side effects of prescription medicines, over-the-counter medicines, dietary supplements, and herbal products may cause falls or car crashes.

Download the Fact Sheet, Personal Medicines List, and Personal Action Plan at www.cdc.gov/motorvehiclesafety/older_adult_drivers/meds_FS
As we age, our bodies process what we eat and drink—including medicines—differently. A medicine that worked well in the past could start causing side effects now or in the future.

What are some side effects to look out for?

- Changes in vision
- Changes in awareness
- Loss of balance
- Slower reaction time
- Fainting, or passing out
- Muscle weakness
- Lack of muscle coordination
- Tiredness
- Sleepiness
- A drop in blood pressure when you stand up from sitting or lying down—also known as postural hypotension—that causes dizziness, lightheadedness, or fainting.
- Lower alertness level or difficulty concentrating, leading to:
  - Lane weaving,
  - Increased risk of leaving roadway, or
  - Hesitant driving (second-guessing or over-correcting).

The medicine categories and examples listed below can contribute to falls or car crashes.

**Opioid or narcotic pain medicines:**
- Oxycodone (e.g., OxyContin, Roxicodone)
- Hydrocodone (e.g., Lortab, Vicodin)

**Anti-depression or mood medicines:**
- Fluoxetine (e.g., Prozac)
- Amitriptyline (e.g., Elavil)

**Anti-anxiety medicines:**
- Diazepam (e.g., Valium)
- Alprazolam (e.g., Xanax)

**Prescription and OTC sleep aids:**
- Zolpidem (e.g., Ambien)
- Diphenhydramine (e.g., Benadryl)

**High blood pressure/heart medicines:**
- Metoprolol (e.g., Toprol, Lopressor)
- Amlodipine (e.g., Norvasc)
- Furosemide (e.g., Lasix)

**Muscle relaxing medicines:**
- Carisoprodol (e.g., Soma)
- Cyclobenzaprine (e.g., Flexeril)

**Anti-psychosis or mood stabilizing medicines:**
- Risperidone (e.g., Risperdal)
- Quetiapine (e.g., Seroquel)

Note: This is not a complete list of all medicines or potential side effects. The examples provided are some of the most frequently used medicines in each category.

For more information visit:
www.cdc.gov/motorvehiclesafety/older_adult_drivers/mymobility