LIVING WELL

A Safer Home Starts With the Path You Walk

A useful home-safety check looks beyond loose hazards to the medicines, vision and strength that change how you move through familiar rooms.

The house has not changed, but you have

You know where every stair begins. You could cross the living room without thinking. That familiarity feels protective, until a change in balance, vision, muscle strength or reflexes turns an ordinary route into a harder one. A safer home is not an admission that you can no longer manage. It is a way of making the place you know fit the way you move now.

Falls can be especially serious for older adults. They are more likely to fall and more likely to break a bone when they do, particularly if they have osteoporosis. A hip fracture may lead to disability and loss of independence. That is why the useful question is not whether your home looks tidy. It is whether you can move through it without having to recover from a slip, catch your balance or negotiate an avoidable obstacle.

The encouraging part is that some risks can be changed. Tripping hazards can be removed, and stairs and baths can be fitted with rails. Regular eye examinations may identify vision problems, while exercise may lower fall risk by strengthening muscles, improving balance and helping to keep bones strong. The home matters, but it is only one part of the route beneath your feet.

Start with the near misses

A fall may look sudden, but the ingredients can accumulate: weaker leg muscles, slower reflexes, poorer vision, a balance problem or loss of traction. Certain illnesses, including low blood pressure, diabetes and neuropathy, can also contribute. Alcohol can affect balance and reflexes. None of these automatically means you will fall. Together, however, they can make a familiar obstacle less forgiving.

Notice the moments when your home asks more of you than it used to. Perhaps getting out of a chair has become difficult, or keeping your balance on an uneven surface takes more concentration. Muscle weakness in the legs can make both harder. These moments deserve attention even if you have not hit the floor. They show where your movement and your surroundings are no longer working easily together.

This is also where home improvement stops being only a household project. If you have fallen, or you are experiencing balance, vision or muscle problems, raise it with a health care professional. Regular eye examinations are part of reducing fall risk, and health conditions may need attention of their own. A rail can remove one hazard. It cannot explain dizziness, confusion or a new difficulty staying balanced.

A supplement bottle should not distract you from tripping hazards, missing rails, medicine effects, vision or balance.

Your medicine cabinet is part of the floor plan

Some medicines can make you dizzy, confused or slow. That matters because avoiding a fall depends partly on noticing a hazard, keeping your balance and moving out of its way. A home can be cleared of obvious obstacles and still feel unsafe if a medicine is affecting how steadily or quickly you move. Do not respond by stopping a prescription on your own; bring the concern to the person who prescribes it.

A 2025 systematic review of 46 studies found potentially inappropriate prescribing in an estimated 68.6% of people who had experienced a fall. Among studies that counted prescriptions, participants had an average of 2.21 potentially inappropriate prescriptions. Common falls-risk-increasing medicines included sedatives or sleeping medicines, opioids, diuretics and antidepressants. The studies do not prove that every listed prescription caused a fall, but they reveal substantial room to review medicines after one.

Opioids deserve particular care because they can cause drowsiness and mental fog, as well as nausea and constipation. They can also slow breathing. Follow the prescriber's instructions, never share them and contact the prescriber if you have concerns. Very small pupils, loss of consciousness, slow or shallow breathing, choking or gurgling sounds, vomiting, a limp body or pale, blue or cold skin can signal an overdose and require an immediate emergency call.

Supplements are not a substitute for safer footing

It is tempting to approach falls through bone health alone: if stronger bones might reduce the damage, perhaps calcium or vitamin D supplements are the answer. General health advice has long emphasized getting enough calcium and vitamin D to reduce the chance of breaking a bone after a fall. But that is not the same question as whether taking supplements prevents falls or fractures for most adults.

A 2026 systematic review and meta-analysis examined 69 randomized trials involving

153,902 adults who were not taking osteoporosis medicines. Calcium alone, vitamin D alone and the two combined produced little to no benefit for preventing fractures and falls. Most participants lived in the community, and most were not at high risk, so evidence remained limited for some people at high risk or living in residential care.

That distinction matters. The newer trial evidence should carry more weight than broad advice when the specific claim is that supplements prevent falls or fractures. It does not establish meaningful benefit for most adults in the trials. It also does not tell you to ignore an individual recommendation from a health care professional. What it does say is simpler: a supplement bottle should not distract you from tripping hazards, missing rails, medicine effects, vision or balance.

Make one route safer on Monday

Do not begin by trying to redesign the whole house. Choose one route you use every day and follow it from beginning to end. Look specifically for anything that could cost you your footing or traction. The aim is not to make the room look sparse. It is to remove a tripping hazard before you have to test whether your balance and reflexes can recover from it.

Then pay attention to the places where the route changes level or footing: the stairs and the bath. These are places where a rail gives you something stable to use. If either area lacks one, make that the concrete home project rather than a vague promise to "be more careful." Being careful still relies on your vision, balance, strength and reflexes working at the necessary moment.

On Monday, clear one daily path and choose one unsupported stair or bath area to address. That takes a stair rail or a bath rail. If a recent fall, dizziness, confusion, vision change or balance problem prompted the check, also arrange a conversation with a health care professional and include your medicines. The object you can hold is the rail; the independence it helps protect is the reason to install it.

Where this comes from

- Falls

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/falls.html
- Opioids and Opioid Use Disorder (OUD)

  MedlinePlus, U.S. National Library of Medicine · https://medlineplus.gov/opioidsandopioidusedisorderoud.html

- Potentially inappropriate prescribing and falls-risk increasing drugs in people who have experienced a fall: a systematic review and meta-analysis.

  Age and ageing, 2025 · https://pubmed.ncbi.nlm.nih.gov/41118395/
- Calcium, vitamin D, or combined supplementation to prevent fractures and falls: systematic review and meta-analysis.

  BMJ (Clinical research ed.), 2026 · https://pubmed.ncbi.nlm.nih.gov/42161415/