White Matter Lesions Predispose to Falls in Older People

To the Editor:

We read with interest the study by Srikanth et al.1 Their findings agree with the findings of our cross-sectional study of 40 subjects.2

In our study, we found measurements of balance to correlate more tightly with white matter lesion load (Spearman $r=0.43$) than gait measurements ($r=0.37$, $P<0.01$). We would be interested in knowing whether, in addition to gait, balance was evaluated in their large sample and what was the impact of white matter lesion load on balance.

As with Srikanth et al.,1 we also found a threshold effect. Two independent observers (agreement: $r=0.94$, $P<0.001$) grouped the scans into 8 levels of white matter damage, with level 8 being the most affected. Levels 7 and 8 were only represented among the fallers. In addition to supporting causality, this finding may have prognostic and therapeutic implications. As Srikanth et al indicate,1 the prevention of additional white matter damage by careful control of cerebrovascular risk factors may yield a decrease in falls, one of the most pernicious plagues afflicting older persons.

Disclosures

None.

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