# SYST'AM® P361CA / VISCOFLEX®+ CUSHION

ANATOMIC MOULDED CUSHION MADE OF VISCOELASTIC FOAM WITH MEMORY EFFECT AND AN ERGONOMIC INSERT

### MATERIALS



Visco foam



HR foam



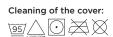
Removable POLYMAILLE® cover



Removable POLYMAILLE®**HD** cover



Foam maintenance:



Cleaning POLYMAILLE\* HD cover:



P361CA / VISCOFLEX\*+ cushion can be used, when:

- 1- already pressure ulcer (Stage I to III according EPUAP) is present. The patient can change seating position or the pressure points are relieved through nursing care. OR
- · 2- an increased to very high risk according evaluation scale (Braden, Norton, Waterlow, ...) is present. P361CA / VISCOFLEX\*+ cushion is suitable for patients: with past history of pressure ulcer on contact with seating area. and/or complete or incomplete paralysis of the trunk or lower limbs, and/or with impaired or absent sensation of the lower member, and/or with impaired frontal stability, and/or with light postural assymetries and/or with vascular amputation, and/or with bad general state.

The cushion can be used on different seating support without adjustment.



P361CA / VISCOFLEX\* cushion with POLYMAILLE\* cover.



P361CA / VISCOFLEX\*+ cushion with POLYMAILLE\**HD* cover (with welded seams).



P361CP / VISCOFLEX\*+ cushion with pommel with POLYMAILLE\* cover, for Patient with stablility deficit



View of structure inside the cushion.

AVAILABLE IN 16 DIFFERENT SIZES

P361CA / VISCOFLEX\*+ Bariatric cushion for Bariatric Patients

DESIGNATION	ITEM CODE	(W × L - cm / inches)	
P361CA / VISCOFLEX*+ cushion with POLYMAILLE* cover	P361CA32321HW	32 x 32 cm / 13 x 13"	15 - 50 kg / 33 - 110 lbs
	P361CA36361HW	36 x 36 cm / 14 x 14"	30 - 50 kg / 66 - 110 lbs
	P361CA38381HW	38 x 38 cm / 15 x 15"	30 - 90 kg / 66 - 198 lbs
	P361CA38431HW	38 x 43 cm / 15 x 17"	30 - 90 kg / 66 - 198 lbs
	P361CA40401HW	40 x 40 cm / 15,5 x 15,5"	40 - 100 kg / 88 - 220 lbs
	P361CA42421HW	42 x 42 cm / 16 x 16"	40 - 100 kg / 88 - 220 lbs
	P361CA42461HW	42 x 46 cm / 16 x 18"	40 - 110 kg / 88 - 242 lbs
	P361CA42501HW	42 x 50 cm / 16 x 19"	40 - 150 kg / 88 - 330 lbs
	P361CA45421HW	45 x 42 cm / 18 x 16"	40 - 110 kg / 88 - 242 lbs
	P361CA45461HW	45 x 46 cm / 18 x 18"	40 - 130 kg / 88 - 286 lbs
	P361CA45501HW	45 x 50 cm / 18 x 19"	40 - 150 kg / 88 - 330 lbs
	P361CA48431HW	48 x 43 cm / 19 x 17"	60 - 140 kg / 88 - 308 lbs
	P361CA51461HW	51 x 46 cm / 20 x 18"	60 - 150 kg / 132 - 330 lbs
	P361CA51501HW	51 x 50 cm / 20 x 20"	60 - 160 kg / 132 - 352 lbs
	P361CA56461HW	56 x 46 cm / 22 x 18"	60 - 230 kg / 132 - 507 lbs
	P361CA61501HW	61 x 50 cm / 24 x 20"	80 - 270 kg / 176 - 595 lbs
P361CP / VISCOFLEX*+ Cushion with pommel and POLYMAILLE* cover	P361CP42421HW	42 x 42 cm / 16 x 16"	40 - 100 kg / 88 - 220 lbs
	P361CP45421HW	45 x 42 cm / 18 x 16"	40 - 110 kg / 88 - 242 lbs
	P361CP45461HW	45 x 46 cm / 18 x 18"	40 - 130 kg / 88 - 286 lbs
P361CA / VISCOFLEX*+ cushion with POLYMAILLE* <i>HD</i> cover	P361CA40401HF	40 x 40 cm / 15,5 x 15,5"	40 - 100 kg / 88 - 220 lbs
	P361CA42421HF	42 x 42 cm / 16 x 16"	40 - 100 kg / 88 - 220 lbs
	P361CA42461HF	42 x 46 cm / 16 x 18"	40 - 110 kg / 88 - 242 lbs
	P361CA45421HF	45 x 42 cm / 18 x 16"	40 - 110 kg / 88 - 242 lbs
	P361CA45461HF	45 x 46 cm / 18 x 18''	40 - 130 kg / 88 - 286 lbs
	P361CA48431HF	48 x 43 cm / 19 x 17"	60 - 140 kg / 88 - 308 lbs
	P361CA51461HF	51 x 46 cm / 20 x 18"	60 - 150 kg / 132 - 330 lbs
	P361CA51501HF	51 x 50 cm / 20 x 20"	60 - 160 kg / 132 - 352 lbs
	P361CA56461HF	56 x 46 cm / 22 x 18"	60 - 230 kg / 132 - 507 lbs





# SYST'AM® P361CA / VISCOFLEX®+ CUSHION



MOULDED VISCOELASTIC FOAM WITH MEMORY EFFECT

- → Precise moulding of the body and increase of the body surface in contact with the cushion;
- → Better pressures distribution: reduction of transcutaneous pressures on areas at high risk and facilitated blood circulation;
- → Improved comfort and stability of the patient;

CUSHION DIMENSIONS AND INDICATIONS OF USE MOULDED IN THE FOAM BLOCK

- → Skin effect obtained through the moulding process: protection of the foam against external aggressions (tear, crumbling);
- $\rightarrow$  With a very high density to prevent deformation and sagging effects.

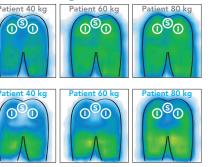
# ANATOMICAL SHAPE WITH RAISED LATERAL EDGES AND FRONT-BACK SLOPE

- ightarrow Improves the positioning, the stability and the comfort of the patient;
- → Increases the contact surface and therewith reduces the pressures.Increases the contact surface and therewith reduces the pressures.



WITH A VISCOELASTIC FOAM STANDARD CUSHION

> WITH VISCOFLEX\*+



THE INSERT: AN INNOVATIVE CONCEPT WITH ERGONOMICAL INSERT

- → Made of foam with high bearing capacity, it structures the cushion. It functions as skeleton of the cushion in order to set the weightbearing capacities on different areas;
- → It allows the optimal immersion of the bony protuberances (sacrum, ischias) in the material: this means a sufficient immersion of the area at risk, but also a controlled and stabilised immersion before reaching the bottoming limit.

MULTI-BEARING INSERT

→ Different bearing capacity in front-rear part of the insert in order to rebalance patients in a sitting position and thus to reduce the load at the ischial zone.



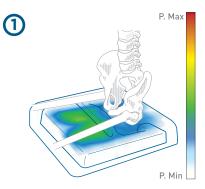
#### - HIGHLY BREATHABLE COVER

- $\rightarrow$  Adapted for incontinence
- → Reduces the maceration effects through easing the skin respiration.
- → Impermeable material

AN ANTI-SLIP BASE

→ Avoiding any sliding of the cushion from the support (POLYMAILLE® only).

SKIN EFFECT FROM MOULDING PROCESS → Protects the product against external aggressions.



REDUCE THE LOAD ON THE RISK ZONES

→ Protected risk zones (sacrum / ischia), (even in cases of pelvic retroversion), in order to provide partial relief of bony protuberances through immersion.

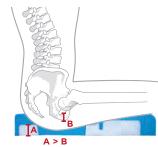
## (SECTION VIEW 1)

2

 $\bigcirc$ 

SIP

3



ANTI-PUNCHING SYSTEM

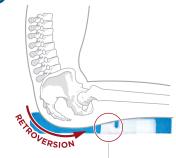
→ Specifically positioned in relation to the ischia (B).
→ Distributes the pressure to the buttock peripheral

zone, stabilizing pelvis immersion and preventing it from reaching the bottoming zone.

39

(SECTION VIEW 2)

→ Label with cushion dimensions and indications of use



PRE-ISCHIAL RIDGE →
→ Blocks the ischia, thus preventing forward sliding.

# FEATURES OF THE P361CP /VISCOFLEX\*+ WITH POMMEL

AN INNOVATIVE STABILISING POMMEL, THAT IS ADJUSTABLE AND COMPLETELY SEPARATE FROM THE CUSHION

- $\rightarrow$  Unlike other systems inserting the pommel inside the cushion's cover, the SYSTAM<sup>®</sup> stabilising pommel has its own cover attached on the cushion.  $\rightarrow$  Simplifies the setting and adjusting of the equipment under the patient by the
- nursing personnal. → Simplifies the transfer from the chair by allowing to remove instantaneously and
- easily the stabilisation's wedge.

### COMPLETELY COVERED POMMEL

- → Provides an impermeable barrier against urine.
- ightarrow Textile coated with flexible soft-to-the-touch polyurethane designed to reduce the effect of friction at high-risk points.

PREVENTION OF THE FORWARD SLIDING (SAGITTAL INSTABILITY)

→ Prevention against falls, and true alternative to retraints







### ANATOMICALLY SHAPED POMMEL

- $\rightarrow$  Respects the morphological curve of thighs.
- → Respects the natural opening angle of lower limbs (distal part slimmer than proximal part).
- → Deep, effort-free positioning of pommel for medical staff, while simultaneously offering maximum patient comfort thanks to the particularly slim sub-pubic tip.

#### CHAIR ATTACHMENT SYSTEM

maintaining the cushion in position, in spite of the pressure applied to the front part of the cushion.





#### ADJUSTABLE POMMEL DEPTH

- ightarrow Adjustable large-amplitude (more than 10 cm) pommel, ensuring maximum lifting. → Precise adjustment to all patient morphologies.
- ightarrow Pommel adjustment particularly easy for nursing staff thanks to the fact that the pommel is completely separate from the cushion.



AVAILABLE IN 3 SIZES





# POSITION AND FORWARD SLIPPING IN GERIATRICS

Forward sliding in the sitting position is a very frequent postural deficit in geriatrics. While sacro-coccygeal sores have long been attributed exclusively to the supine position, forward sliding in a sitting position is now recognised as a major risk factor for sacro-coccygeal pressure ulcers in geriatrics.

It is therefore essential to prescribe a support cushion as soon as forward sliding occurs.



### THE CAUSES OF FORWARD SLIDING

- $\rightarrow$  Forward sliding phenomena are caused by postural deficits that can be either hypertonic (retropulsion, pelvic tilt) or hypotonic (weak paravertebral muscles, accentuated kyphosis).
- → The usual causes of forward sliding tend to be psychomotor regression, a marked dorsal anatomy or a reaction to pain at pressure points.

### **RISKS LINKED TO FORWARD SLIDING**



#### Sacro-coccygeal sores, the result of forward sliding

- → The static position of the spinal column changes with age.
- ightarrow Many studies show that aging is accompanied by an increase in dorsal kyphosis and a loss of lumbar lordosis, with the pelvis tilting an average of 6° between the ages of 40 and 60.
- → In a sitting position, lumbar flattening and physiological tilting of the pelvis are thus more pronounced in elderly people
- $\rightarrow$  With forward sliding, pelvic retroversion is sufficiently marked to provoke considerable pressure of the sacro-coccygeal region in the sitting position.
- ightarrow Moreover, when the pelvis shifts forward in the sitting position, the weight of the upper part of the body generates shearing forces that favour the appearance of sores
- → Overall, forward sliding in a sitting position is a major risk factor for sacrococcygeal sores in geriatrics.

#### The influence of forward sliding on breathing:

ightarrow Forward sliding in a sitting position progressively increases the curvature of dorsal kyphosis, thus limiting rib cage amplification (rib cage expansion) and diaphragm mobility. The respiratory capacity is thus clearly diminished.

#### POSTURE AND SITTING POSITION

#### The effect of the positioning cushion on forward sliding

- → It is therefore essential for these elderly patients to maintain a stable posture in a raised sitting position in order to prevent the appearance of sacro-coccygeal pressure ulcers and increased retropulsion.
- $\rightarrow$  Forward sliding stabilised by a pelvic pommel thus blocks the pelvis on the sagittal plane.
- → This pommel must nevertheless be adjustable in depth over a large amplitude in order to promote stabilisation with a maximum raised position.
- $\rightarrow$  This is essential because any stabilisation that leaves even slight existing forward sliding runs the risk of causing sacro-coccygeal pressure.
- → The posterior part of the pommel is necessarily curved and tapered in order to match the anatomic form of the pelvis, thus avoiding increased pressure at the pubic symphysis.
- →A pelvic pommel that is easily removable without completely or partially removing the cushion cover greatly facilitates its removal for transfers.

#### The positioning cushion, a real alternative to restraints

- ightarrow In practice, the use of restraints is still largely practiced in geriatric care units in order to stabilise the sitting position.
- $\rightarrow$  There are various procedures: bonds, attachments, bracelets, jackets, harnesses, belts, safety bars, chair trays.
- $\rightarrow$  The A.N.A.E.S. (experts committee) report recommends using an alternative system to braces.
- $\rightarrow$  Restraints prove to cause increased agitation, abdominal pressure and discomfort for patients, and patients and their entourage see them as degrading.
- $\rightarrow$  An estimated 1/1000 deaths are considered to be linked to restraints, 58% used in chairs.
- $\rightarrow$  The posture support cushion provides a solution to forward sliding while promoting patient safety and preserving their dignity.

