



# SYST'AM® P361CA / VISCOFLEX®+ CUSHION

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

## MATERIALS

80  
kg/m<sup>3</sup>



Visco foam

40  
kg/m<sup>3</sup>



HR foam



Removable  
POLYMAILLE®  
cover



Removable  
POLYMAILLE® HD  
cover



NF EN ISO 597 - 1 & 2

### Foam maintenance:



### Cleaning of the cover:



### Cleaning POLYMAILLE® HD cover:



## INDICATIONS

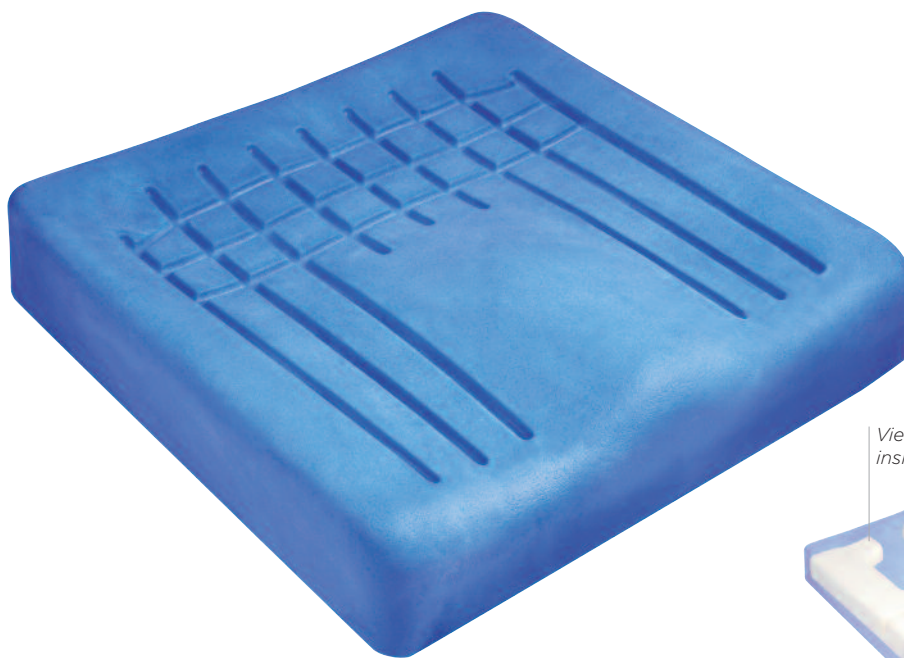
### Risk



P361CA / VISCOFLEX®+ cushion can be used, when:

- 1- already pressure sore (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 sore 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 asymmetries and/or with vascular amputation, and/or with bad general state.

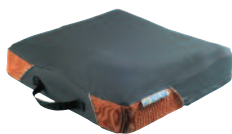
The cushion can be used on different seating support without adjustment.



View of structure  
inside the cushion.



## AVAILABLE VERSIONS



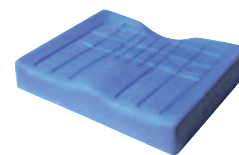
**P361CA / VISCOFLEX®+ cushion with POLYMAILLE® cover.**



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



**P361CP / VISCOFLEX®+ cushion with pommel with POLYMAILLE® cover, for Patient with stability deficit**



**P361CA / VISCOFLEX®+ Bariatric cushion for Bariatric Patients**

DESIGNATION	ITEM CODE	 (W x L - cm / inches)	 (kg / lbs)
<b>P361CA / VISCOFLEX®+ cushion with POLYMAILLE® cover</b>	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"	40 - 100 kg / 88 - 220 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
	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
	P361CA48431HW	48 x 43 cm / 19 x 17"	40 - 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
<b>P361CP / VISCOFLEX®+ Cushion with pommel and POLYMAILLE® cover</b>	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
<b>P361CA / VISCOFLEX®+ cushion with POLYMAILLE® HD cover</b>	P361CA42421HF	42 x 42 cm / 16 x 16"	40 - 100 kg / 88 - 220 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"	40 - 140 kg / 88 - 308 lbs
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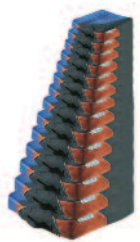
WARRANTY



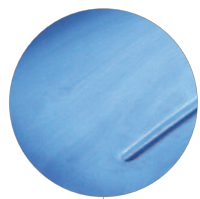


#### MOULDED VISCOELASTIC FOAM WITH MEMORY EFFECT

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



AVAILABLE IN  
14 DIFFERENTS SIZES

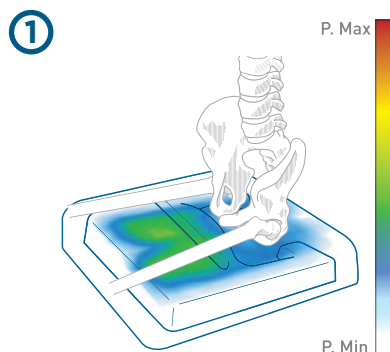


#### SKIN EFFECT FROM MOULDING PROCESS

- Protects the product against external aggressions.

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

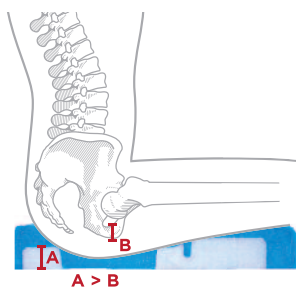
- Improves the positioning, the stability and the comfort of the patient;
- Increases the contact surface and therewith reduces the pressures. Increases the contact surface and therewith reduces the pressures.



#### 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.

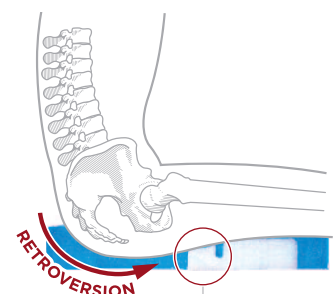
#### ② (SECTION VIEW 1)



#### 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.

#### ③ (SECTION VIEW 2)



#### PRE-ISCIAL RIDGE

- Blocks the ischia, thus preventing forward sliding.

#### 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

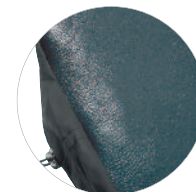
- Different bearing capacity in front-rear part of the insert in order to rebalance patients in a sitting position and thus to reduce the load at the ischial zone.



ULTRA-LIGHT

#### HIGHLY BREATHABLE COVER

- 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).



## FEATURES OF THE P361CP /VISCOFLEX®+ WITH POMMEL

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

- Unlike other systems inserting the pommel inside the cushion's cover, the SYSTAM® stabilising pommel has its own cover attached on the cushion.
- Simplifies the setting and adjusting of the equipment under the patient by the nursing personnel.
- 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.
- 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 restraints



### ANATOMICALLY SHAPED POMMEL

- 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.

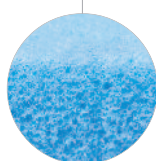
### CHAIR ATTACHMENT SYSTEM

- Reassures patients subject to forward sliding or falling from the chair by maintaining the cushion in position, in spite of the pressure applied to the front part of the cushion.



### ADJUSTABLE POMMEL DEPTH

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



### MOULDED STABILISING POMMEL

- No sharp ridges, thus reducing shearing zones and resulting discomfort.
- High-resiliency foam for optimal comfort at pressure zones.



AVAILABLE IN 3 SIZES





## LEARN MORE



### POSITION AND FORWARD SLIPPING IN GERIATRICS

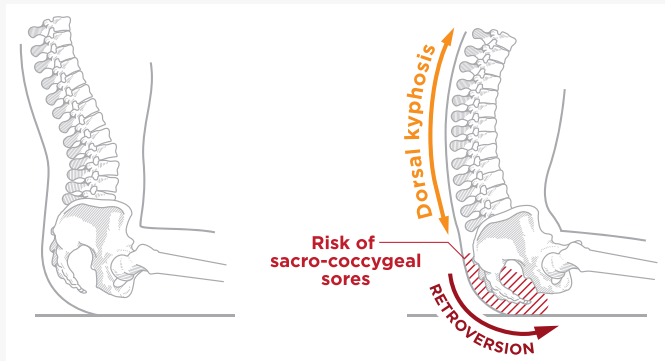
Forward sliding in the sitting position is a very frequent postural deficit in geriatrics. While sacro-coccygeal sores have long been attributed exclusively to the supine position, forward sliding in a sitting position is now recognised as a major risk factor for sacro-coccygeal pressure sores in geriatrics.

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

#### THE CAUSES OF FORWARD SLIDING

- 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.
- 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.
- With forward sliding, pelvic retroversion is sufficiently marked to provoke considerable pressure of the sacro-coccygeal region in the sitting position.
- 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 sacro-coccygeal sores in geriatrics.

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

- 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.



**BAD POSITION**  
(Risk of sacral sores)



**GOOD POSITION**

#### 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 sores and increased retropulsion.
- 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.
- 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

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