



SYST'AM® P361CA / VISCOFLEX®+ CUSHION

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

MATERIALS



Foam maintenance:



Cleaning of the cover:



Cleaning POLYMAILLE® HD cover:



INDICATIONS



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)	 min - MAX (kg / lbs)
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"	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
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® HD cover	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
	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	





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

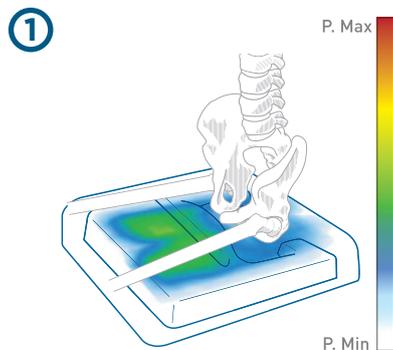


SKIN EFFECT FROM MOULDING PROCESS

- Protects the product against external aggressions.

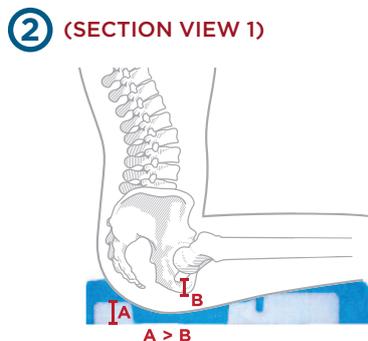
ANATOMICAL SHAPE WITH RAISED LATERAL EDGES AND FRONT-BACK SLOPE

- 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.



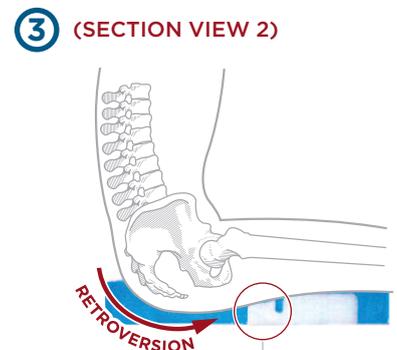
REDUCE THE LOAD ON THE RISK ZONES

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



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.



PRE-ISCHIAL RIDGE

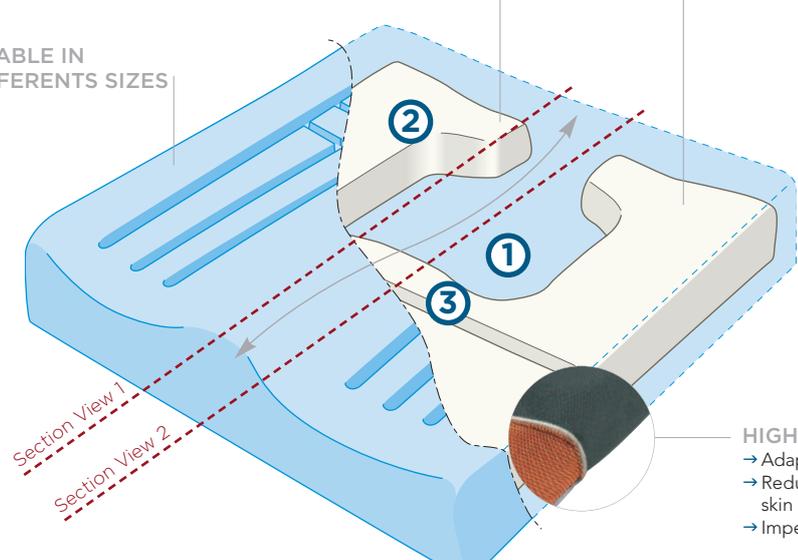
- Blocks the ischia, thus preventing forward sliding.

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

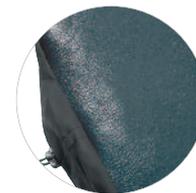
- Different bearing capacity in front-rear part of the insert in order to rebalance patients in a sitting position and thus to reduce the load at the ischial zone.



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 personal.
- 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

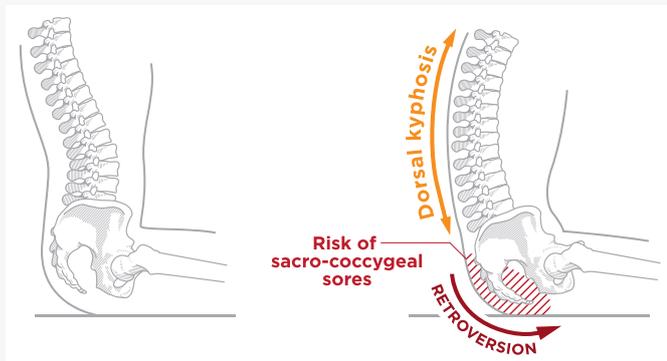
Forward sliding in the sitting position is a very frequent postural deficit in geriatrics. While sacro-coccygeal sores have long been attributed exclusively to the supine position, forward sliding in a sitting position is now recognised as a major risk factor for sacro-coccygeal pressure sores in geriatrics.

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.



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.