



**PATIENT OVERVIEW**

Adult female with Spina bifida, Lymphoedema and mental health issues.

**BACKGROUND**

Mrs M was a 49 year old lady with a history of spina bifida, lymphoedema and mental health issues. She normally mobilises in a motorised wheelchair.

**INTRODUCTION**

Since the development of category 4 pressure ulcers to her left ischial tuberosity and vulval region and a moisture lesion to the natal cleft across the left buttock, due to unusual posture related to spina bifida, it had been recommended that she remain on bed rest to allow the wounds to heal.

Mrs M was reluctant to stay in bed as it severely affected her quality of life, resulting in depression and anxiety.

Based on an assessment of pressure ulcer and falls risk, in line with the local pressure management pathway, she had previously been supplied with an alternating cell, dynamic cushion. Unfortunately, it appeared that the information given to her on the appropriate use of the cushion had not been correct as she had been told it could only be used whilst plugged in to the main electricity – thus considerably limiting the range of her movement in her home. She was also concerned about the cost of the additional electricity that the cushion was using.

**CASE STUDY**

Although her pressure ulcers were progressing it was clear that the equipment provided was not being correctly used, with her stating that she sometimes switched the pump off as soon as her carers left and on other occasions carried the pump around with her. Of additional concern was that the cushion was not used during her frequent hospital visit meaning that she would have nothing more than a foam cushion for up to 7 hours.

A secondary risk assessment carried out by the tissue viability team led to discussion with the GP around the appropriateness of the equipment, with concern expressed about the risk of falls and potential deterioration in skin condition when the cushion was not powered. Following discussion with the equipment provider an alternative non-powered solution was proposed.

**CLINICAL OUTCOMES**

The Intelligent Air cushion does not require a power source but works using air displacement technology, with a series of technical pressure relief valves ensuring the patient is effectively floated using a thin layer of air, increasing the surface area and therefore reducing the



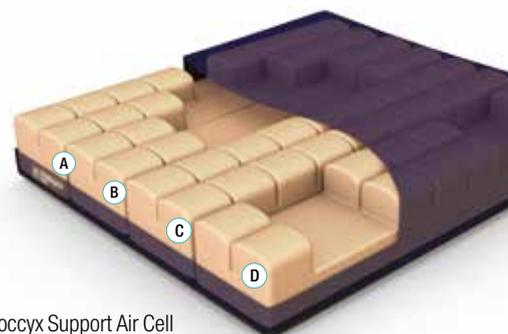
pressure. In addition to this, it provides much needed postural repositioning by increasing or decreasing air throughout the cells, allowing the air displacement to keep the patient in the optimal seating position.

Following careful explanation of how to use the cushion with the patient an initial trial period of 8 weeks was agreed. The patient was reviewed regularly by the tissue viability team. The patient was happy with the cushion as she felt it did not restrict her life in the same way as the power option had and the pressure ulcers continued to improve.

It has also greatly assisted in her mental stability through allowing the patient to mobilise in her chair. This patient had spent a long time placed within their home unable to leave unless a hospital appointment had been necessary due to not having support of correct equipment.

**SUMMARY**

In conclusion, the patient's life has now positively changed through this new cushion which allows her to move freely throughout their home and even venture outside with their chair knowing that at all times they are receiving the best and most suitable therapy.



- Ⓐ Coccyx Support Air Cell
- Ⓑ Ischial Support Air Cell
- Ⓒ Rear Thigh Support Air Cell
- Ⓓ Front Thigh Support Air Cell

Luxmi Mohamud  
Tissue Viability Nurse  
Community



**PRODUCT DETAILS**

**DYNA-TEK INTELLIGENT AIR Code: CUS0810001**

✔ Risk Category: Very High Risk    ⚖ Weight Limit: 24st / 153kg

➦ Dimensions: 46cm x46cm x 7.5cm (18" x 18" x 3") Variable Size Available Upon Request