Towards the Development of an Alternating Pressure Overlay for the Treatment of Pressure Ulcers Using Miniaturized Air Cells

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PRESSURE ULCERS?





- Skin Deformity
- Application of prolonged pressure on the skin which compresses the blood vessels that supply oxygen and vital nutrients to the skin.
- More prominent in **bony areas**

GLOBAL IMPACT

- Annual total treatment cost of pressure ulcers
 - UK is £1.4–2.1 billion (which is around 4% of

total NHS expenditure)

- US is **\$18.5 billion** to the health system
- Death of 60,000 persons in the US (2019)

IF NOT TREATED PROPERLY....

STAGE 1



STAGE 2



• Skin discoloration

- ≻ Red
- > Blue
- ➢ Purple
- Black

- Some skin loss or damage involving the top-most skin layers
- Necrosis (death) or damage to the skin

STAGE 3

STAGE 3

• Limited to the skin layers

STAGE 4



- The necrosis of the skin goes down towards the deep layers which might even lead up to the bone through the tendon and joints
- Lead to amputations(42%) and then even to death

CURRENT TREATMENT METHODS

SUPPORT SURFACES –

• Functions -

Reducing or Redistribution of Pressure Reduce friction and shear forces

• Factors selecting a support surface -

Stage of the pressure ulcer Cost of the device (\$100 - \$40,000) Patient's Comfort

Durability

DRESSINGS(ALGENATE AND HYDROCOLLOID) AND TOPICAL AGENTS

CARE GIVING

• D. Stannard, "Support Surfaces for Pressure Ulcer Prevention," J. Perianesthesia Nurs., vol. 27, no. 5, pp. 341–342, 2012, doi: 10.1016/j.jopan.2012.07.007.

• J. S. Mervis and T. J. Phillips, "Pressure ulcers: Prevention and management," J. Am. Acad. Dermatol., vol. 81, no. 4, pp. 893–902, 2019, doi: 10.1016/j.jaad.2018.12.068.







SUPPORT SURFACES

□ REACTIVE SUPPORT SURFACES

- Reduction of pressure
- Foam mattress, Water mattress, Gel mattress
- Immersion or Envelopment of the body –
 Body weight distributed over a larger surface area
- Reduction of pressure –

Not sufficient to stop the blockage of blood circulation









□ACTIVE (ALTERNATING PRESSURE) SUPPORT SURFACES

• Pressure Redistribution -

Areas of the body experience zero pressure in different cycle times

- Usually cycle time 4 to 6 times an hour
- Added advantages –

Tissue perfusion and removal of toxic metabolites Increased Lymphatic Drainage Prevention of the patient being slipped down

• European Pressure Ulcer Advisory Panel

Recommend to patients who cannot reposition regularly

• According WHO

Reduce risk of pressure ulcers specially of high risk patients

- Better pay back in comparison with standard hospital beds
- T. H. Care, "The Role of Support Surfaces in Pressure Ulcer Prevention and Treatment A Clinical Resource," Talley, pp. 1–27, 2017.
- The Prevention and Management of Pressure Ulcers in Primary and Secondary Care. Apr. 2014, NICE Clinical Guidelines, No. 179. National Clinical Guideline Centre(UK)
- National Pressure Ulcer Advisory Panel and European Pressure Ulcer Advisory Panel. Prevention and treatment of pressure ulcers: a clinical practice guideline. 2009. NPUAP Washington DC





AIM AND OBJECTIVES

• AIM

To develop a control system to achieve high resolution, self-controlling, mobile support surface for the treatment of pressure ulcers

- Objectives
 - ✓ To develop the effective alternating pressure formulation method for pressure ulcer treatment
 - ✓ To design a control system for regulating the pressure of the support surface, providing selfcontrollability

METHOD

• Proposed system consist with two parts



Control system of the pressure alternation

- Control the stifness of the overlay
- Identify the localized high pressure zones
- Initiate alternating pressure patterns



METHOD







RESULTS AND DISCUSSION

Basic over view of the control system



Pressure Pattern



- Randomised air cell array
- Higher pressure localized zones will be actuated
- 1-in -4 cycle
- 75% of patient's body to be comfortably support on inflated air cells
- Cycle time: 10, 15, 20 min

• Inflated air cells



Pneumatic Diagram Of The Control System



a. - Pump

b.

C.

d.

f.

g.

- Air Filter
- Variable pressure control valve
- Non-return valve
- e. Static cell group
 - CPR valve
 - Exhaust-silencer
- $h_1-h_{4.-}$ Individual deflatable set of bladders in zone 1
- j_1/j_2 . N/C Solenoid operated 3/3 valve
- k. Solenoid operated variable pressure relief valve
- s₁-s₄.- Back pressure sensors

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CONCLUSION

- Ongoing research of designing and development of a pressure alternating overlay
- Cell-on-cell deign to avoid bottoming out while providing a high-resolution pressure pattern
- Three modes of actuation: Sleep mode, Alternating mode, Auto-firm mode
- Flexibility to adapt the stiffness of the overlay with patient's body weight
- Real-time localized high pressure zone identification by monitoring back pressure
- 1-in-4 alternating cycle for comfortable weight distribution on inflated air cells





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THANK YOU