



# Wheelchair Cushion Interface Pressure Characteristics Final Report

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# Vicair Cushion Testing Report

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# Vicair Cushion Testing Report

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## **BACKGROUND**

This study measured the interface pressure characteristics of seven commercially available wheelchair seat cushions. The objective of this study was to determine if there was a measurable difference in interface pressure readings between cushions using different material and construction types.

### **History of Pressure Ulcers**

Skin ulcers in the buttocks area are prevalent among wheelchair users that have limited mobility, decreased sensation or both. Many wheelchair users tend to sit on their cushions for extended periods of time. Previously, high pressures have been identified as one of the principle contributing factors in causing skin ulcers. As a result, cushion selection criteria continues to focus on decreasing overall and peak pressures during sitting.

This study is designed to establish the characteristics of pressure distribution while using cushions from the Vicair line of products and to compare their cushions with commercially available cushions commonly used in clinical practice.

### **Test Procedures**

Five pressure zones on the buttocks (left and right trochanters, left and right ischial tuberosities and sacrum) were examined during this study. The analysis is based on previous buttocks to cushion interface pressure studies (Siekman, 2002).

## **RESEARCH QUESTIONS / OBJECTIVES**

This research sought to answer the following question: Do different cushion types affect the buttocks to seat cushion interface pressures during sitting?

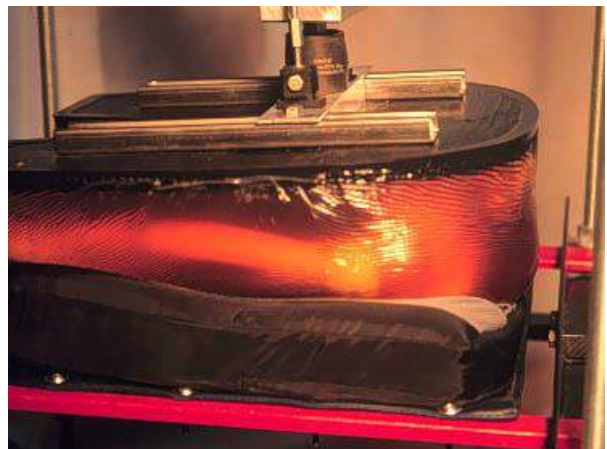
The objectives of this research were to determine if there is a measurable difference in interface pressure readings between different cushions.

## **METHOD**

### **Test Dummy**

In an effort to eliminate uncontrolled variability of human test subjects, a surrogate test fixture was used to apply load to the test cushions. The surrogate indenter consists of the pelvis and femur sections of a skeleton model that is molded into a gel polymer in the shape of a human buttocks and thighs. This adult male test dummy, Skeletal Embedded Loading Indentor (SKELI), was developed by the International Organization for Standardization (ISO) and is currently used by laboratories in the US and other countries as a research tool. Use of the SKELI assures consistency between tests with accurate and repeatable loads on all cushions tested (Figure 1). The SKELI used for testing represents the 50th percentile adult male for weight (174 pounds), thus matching normal load supported by cushions during sitting (approximately 65% of the body weight is supported by the buttocks and thigh (Kroemer, 1997)).

By using the fixture and indenter, it is possible to expose all of the test cushions to the same load, shape and location. This procedure assures consistency at a much higher level than can be achieved using human subjects and is repeatable over time. The use of human test subjects for pressure mapping research can provide inconsistent data due to subtle changes in posture and movement. It is difficult to assure that the human test subjects are placed in exactly the same position between pressure readings.



**Figure 1. Surrogate Test Fixture (SKELI)**

### **Test Equipment / Test Fixture / Seat Cushion**

Interface pressure measurements were made using an FSA pressure measurement system using an ultra-thin sensor mat and type IV data interface. The FSA system was calibrated prior to testing following the manufacturer's instructions (FSA Force Sensitive Applications, Winnipeg, Canada). The accuracy of the FSA system is reported to be within 10%.

Load was applied to the test cushion using a Load Deflection Test Fixture as described in ISO 16840-2. Test trials consisted of seven wheelchair cushions (see Table 1).

**Table 1. Wheelchair Cushions**

<b>Cushion #</b>	<b>Manufacturer /Model</b>	<b>Size</b>
1	Vicair - Adjuster 10	16x18
2	Vicair - Adjuster 6	16x18
3	Vicair - Vector	16x18
4	Crown Therapeutics - ROHO High Profile Quadro Select	16x18
5	Sunrise Medical - Jay 2 Deep Contour	16x18
6	Sunrise Medical - Jay 2	16x18
7	Cascade Designs - Varilite Evolution	16x18

## Test Procedure / Protocol

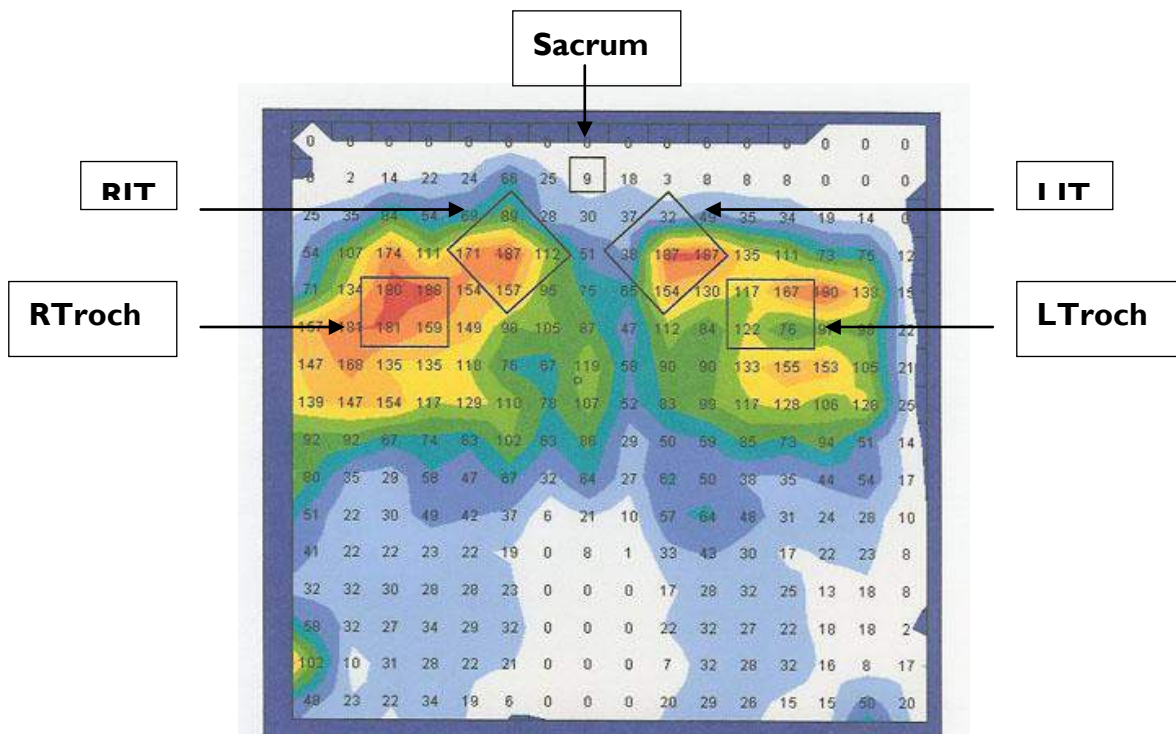
The test cushions were placed on the load deflection test fixture in a position that would allow alignment of the cushion support to the appropriate section of the surrogate soft tissue indenter.

The SKELI was positioned onto the pressure-sensing mat that was placed on top of each cushion. A 500 N (112 pound) load was applied to each cushion for 120 seconds and then pressure readings were recorded. For cushions requiring a longer time to allow for adjustment and stabilization, load was applied without the pressure mat for 10 minutes and then the load was removed and reapplied with the pressure map in place. For each cushion, three trials were recorded. The load was completely removed for a minimum of 120 seconds between each trial. Cushion test order was randomized.

All cushions were kept in a temperature and humidity controlled environment (72° F (+/-2°), 50% (+/-5%) RH) for a minimum of 12 hours prior to testing. All cushions were adjusted to manufactures specifications at test load prior to testing.

## Data Analysis

The interface pressure distribution characteristics of each cushion were calculated and compared. For each trial, zones were identified based upon peak pressure readings and anatomical dimensions. The five zones were: the right and left ischial tuberosities (RIT and LIT; 5 readings each), the right and left greater trochanters (RTroch and LTroch; 4 readings each), and the sacrum (1-2 readings). For each cushion, the average pressure reading for each zone across the three trials was calculated (Figure 2).



**Figure 2. Sample Interface Pressure Reading Zones.**

Readings within 10mm Hg were considered within the measurement tolerance of the equipment and therefore set as the standard for measurements that are considered comparable. Measurement differences higher than 10mm Hg were considered significant differences.

## RESULTS

Data demonstrated that pressure readings averaged across all five zones compared to the Jay 2 were lower using the Vector (90%) and Adjuster 10 (74%) (Table 1).

**Table 1. Differences between cushion pressures (bold equals significant difference).**

		ROHO Quadro	Jay 2 Deep	Jay 2	Varilite Evolution
	<b>mmHg</b>	<b>29.5</b>	<b>47.0</b>	<b>42.3</b>	<b>43.2</b>
<b>Vector</b>	<b>22.2</b>	-7.3	<b>-24.7</b>	<b>-20.1</b>	<b>-20.9</b>
<b>Adjuster 10</b>	<b>24.3</b>	-5.2	<b>-22.6</b>	<b>-17.9</b>	<b>-18.8</b>
<b>Adjuster 6</b>	<b>35.1</b>	5.6	<b>-11.8</b>	-7.2	-8.1

\*Note that all numbers are rounded to the tenths place; therefore differences may not be exactly as calculated from the table.

Pressures compared to the Jay 2 Deep were lower using the Vector (111%), Adjuster 6 (34%), and Adjuster 10 (93%). Pressures compared to the Varilite were lower using the Vector (94%) and Adjuster 10 (77%). Comparable pressures were obtained using the Adjuster 6 compared to the Jay 2 and Varilite Evolution. In addition, the Vector, Adjuster 6 and Adjuster 10 all had comparable pressures compared to the ROHO Quadro.

Lower or comparable pressures were obtained using the Vector compared to the ROHO Quadtro, Jay 2 Deep, Jay 2 and Varilite Evolution for the Right Troch, RIT, Sacrum, LIT, and Left Troch (Figure 3). Lower pressures were obtained using the Vector compared to the Jay 2 Deep, Jay 2 and Varilite for the ITs. Lower pressures were obtained using the Vector compared to the ROHO, Jay 2 Deep, and Jay 2 for the Left and Right Trochs and Sacrum.

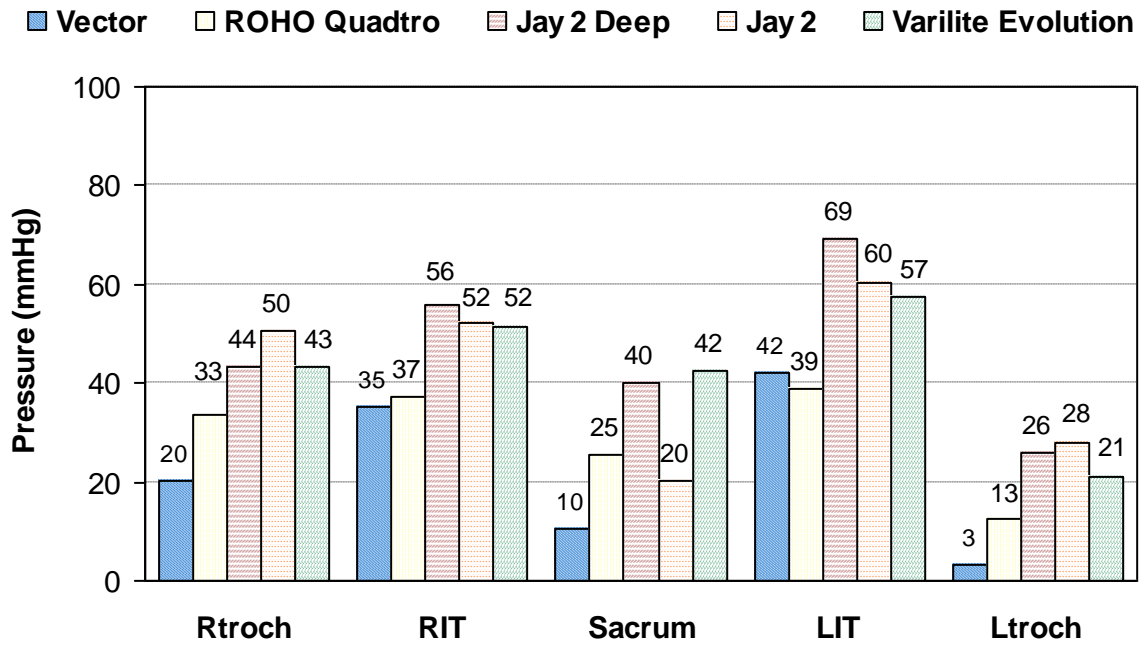


Figure 3. Vector- Average Interface Pressure Readings.



Lower or comparable pressures were obtained using the Adjuster 10 compared to the ROHO Quadtro, Jay 2 Deep, Jay 2 and Varilite Evolution for the Right Troch, RIT, Sacrum, LIT, and Left Troch (Figure 4). Lower pressures were obtained using the Adjuster 10 compared to the Jay 2 Deep, Jay 2 and Varilite for the Left and Right ITs and the Left and Right Trochs. Lower pressures were obtained using the Adjuster 10 compared to the Jay 2 Deep and Varilite for the Sacrum.

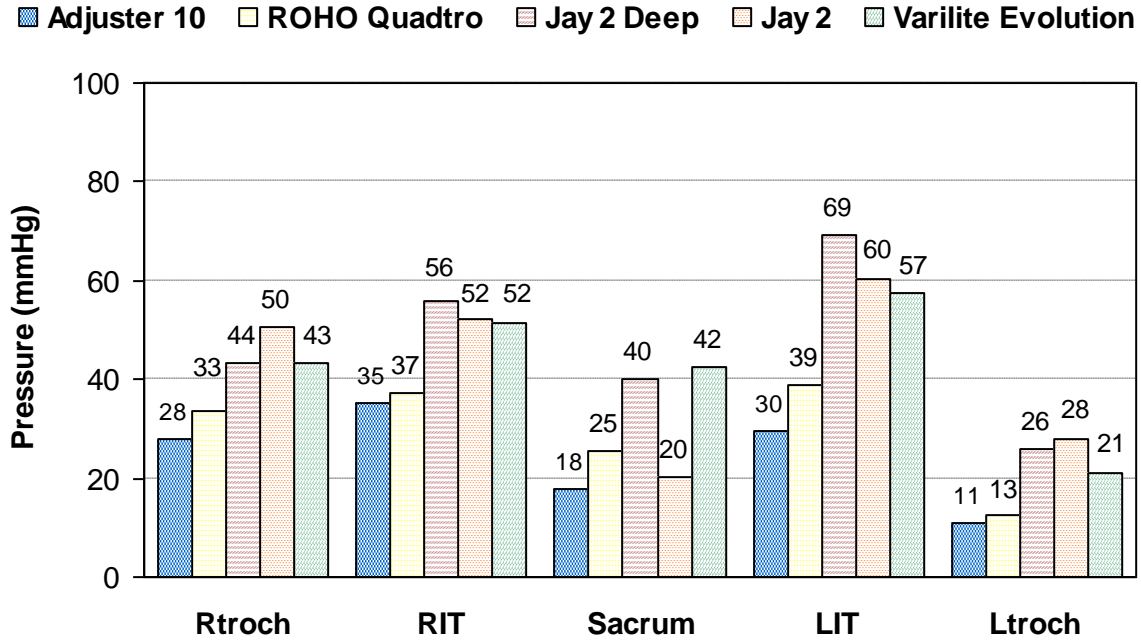


Figure 4. Adjuster 10- Average Interface Pressure Readings.

Lower pressures were obtained using the Adjuster 6 compared to the Jay 2 Deep, Jay 2 and Varilite Evolution for the Left and Right Trochs (Figure 5). Comparable pressures were obtained using the Adjuster 6 compared ROHO Quadro for the Left and Right Trochs and Sacrum. Lower or comparable pressures were obtained using the Adjuster 6 compared to the Jay 2 Deep, Jay 2 and Varilite for the Left and Right ITs. Lower pressures were obtained using the Adjuster 6 compared to the Jay 2 Deep and Varilite for the Sacrum.

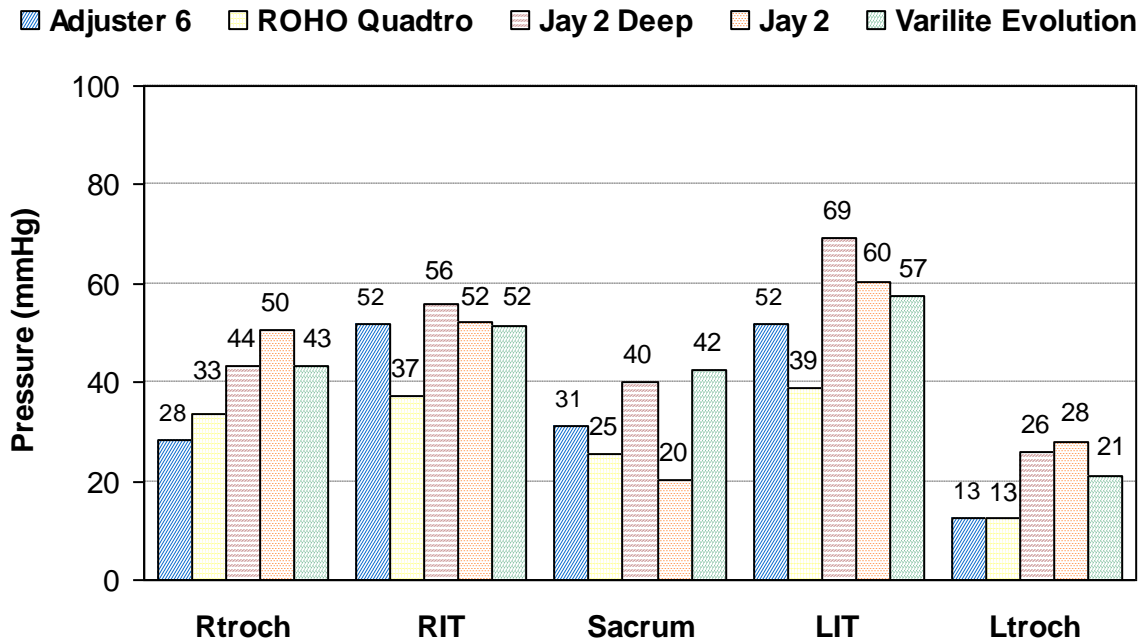


Figure 5. Adjuster 6- Average Interface Pressure Readings.

### **DISCUSSION**

Preliminary data suggests that the Vector performed better for pressure relief or was comparable to the ROHO Quadro, Jay 2, Jay 2 Deep and Varilite across all 5 zones. In addition, the Adjuster 6 and Adjuster 10 performed better or were comparable to the ROHO Quadro, Jay 2, Jay 2 Deep and Varilite for both the Right and Left Trochanters. The Adjuster 10 performed better or was comparable to the Jay 2, Jay 2 Deep and Varilite for both the Right and Left Ischial Tuberosities.

### **CONCLUSIONS**

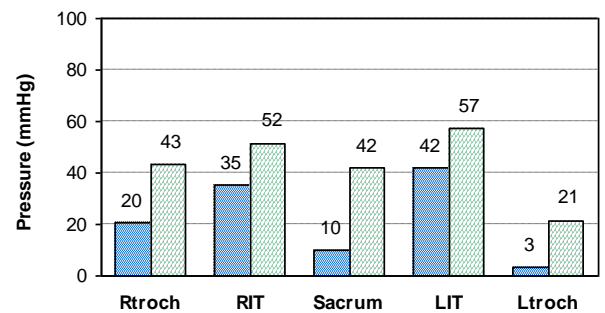
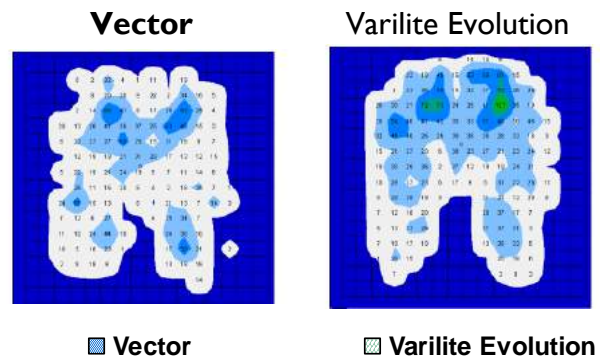
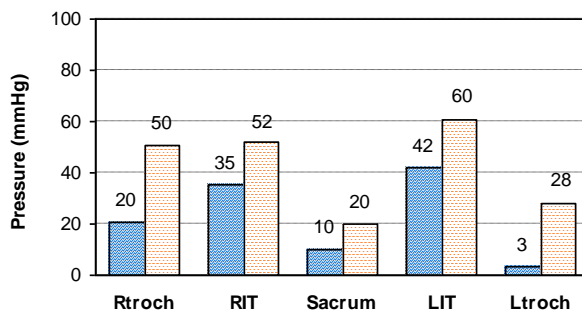
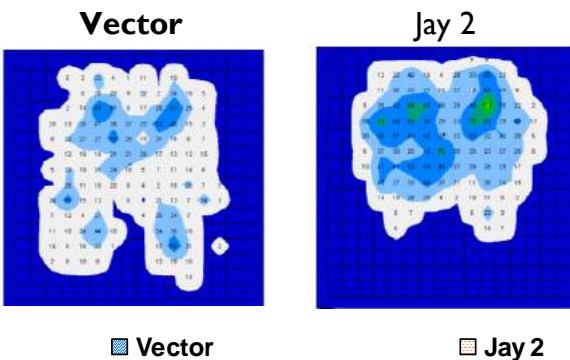
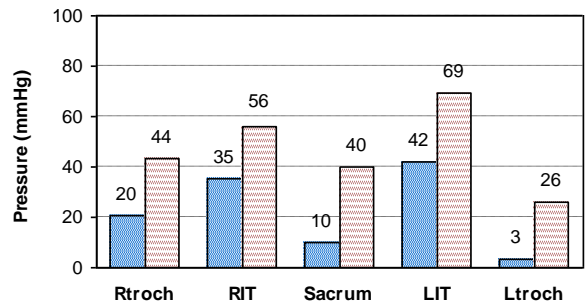
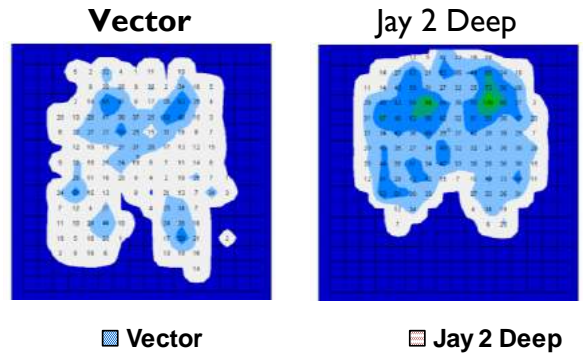
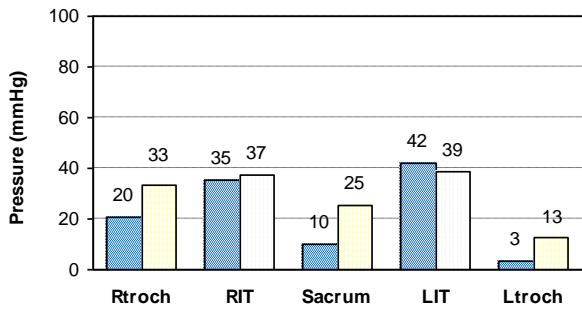
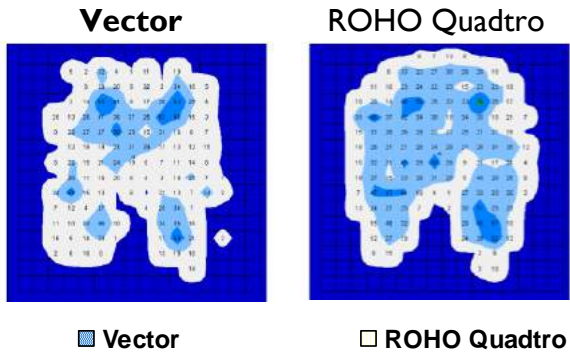
This study demonstrated that the Vector, Adjuster 6 and Adjuster 10 are a comparable option for pressure management compared to other commercially available “high-end” cushions commonly used in clinical practice. In fact, the data shows that in some cases the Vector, Adjuster 6 and Adjuster 10 perform better than the other tested cushions. These data suggest that the best cushion for pressure relief varies across zones and the Vector, Adjuster 6 and Adjuster 10 cushions are viable options for pressure management. The pressure distribution characteristics of the Vector, Adjuster 6 and Adjuster 10 cushions make them an excellent candidate for people that are at high risk of skin ulcers.

### **REFERENCES**

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- Kroemer, K. H. E., Kroemer, H.J. & Kroemer-Elbert, K. E. (1997). *Engineering Physiology: Bases of Human Factors/Ergonomics* (pg158). Hoboken: Wiley and Sons.

# Appendix A: Sample Pressure Graphs

## Vector

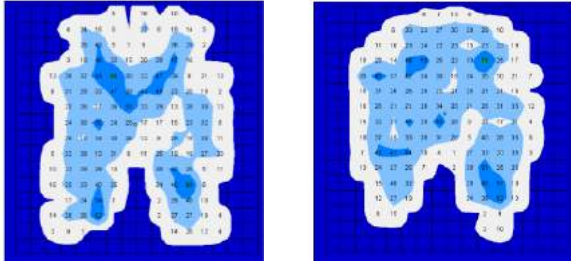


# Appendix A: Sample Pressure Graphs

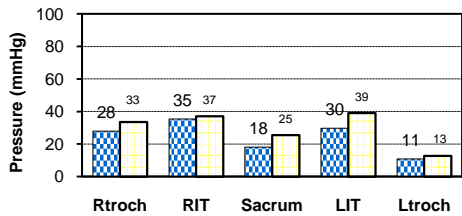
## Adjuster 10 (4'')

Adjuster 10

ROHO Quadtro

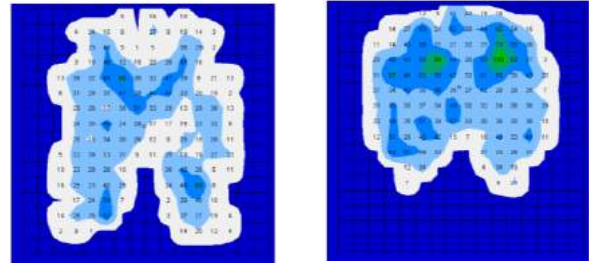


Adjuster 10 ROHO Quadtro

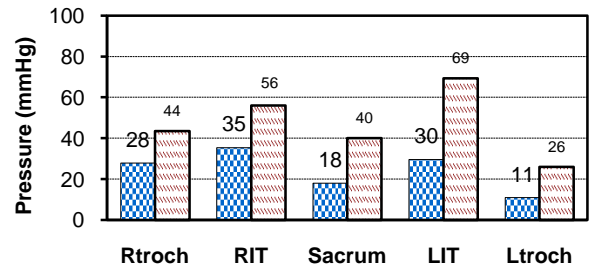


Adjuster 10

Jay 2 Deep

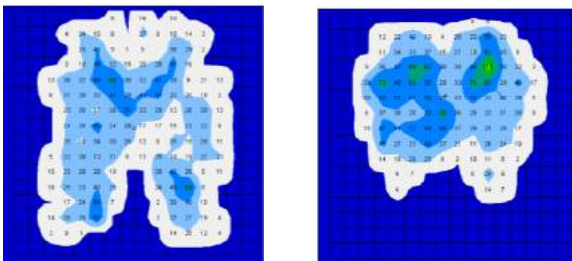


Adjuster 10 Jay 2 Deep

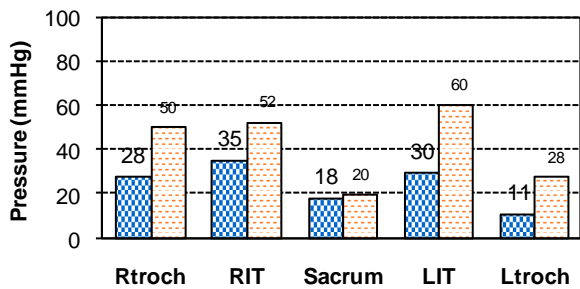


Adjuster 10

Jay 2

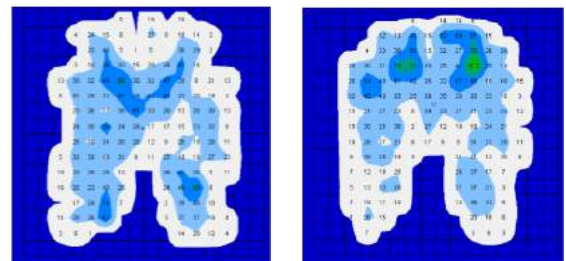


Adjuster 10 Jay 2

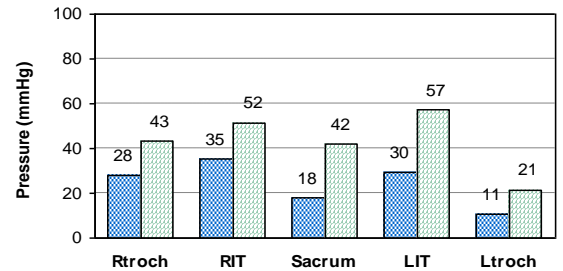


Adjuster 10

Varilite Evolution



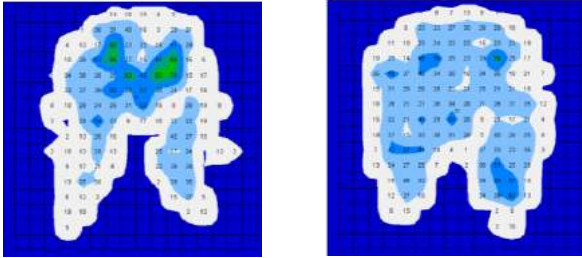
Adjuster 10 Varilite Evolution



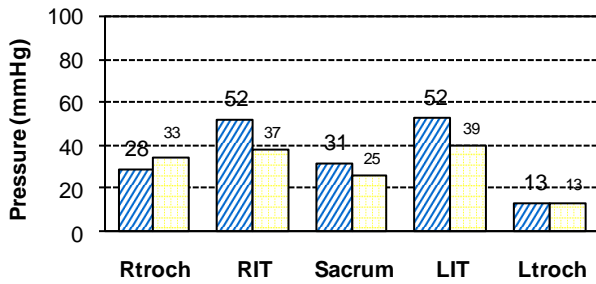
# Adjuster 6 (2'')

Adjuster 6

ROHO Quadro

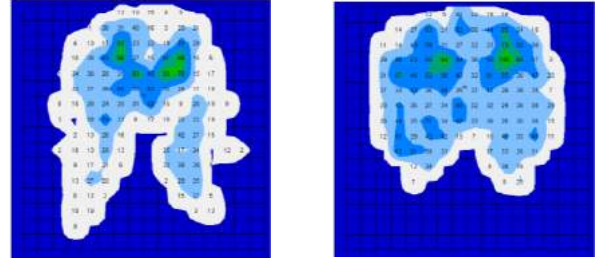


Adjuster 6 ROHO Quadro

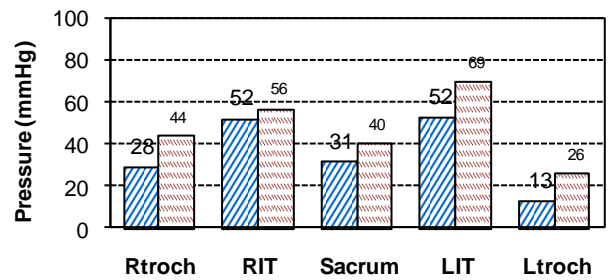


Adjuster 6

Jay 2 Deep

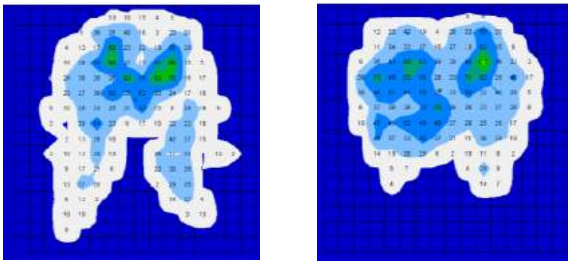


Adjuster 6 Jay 2 Deep

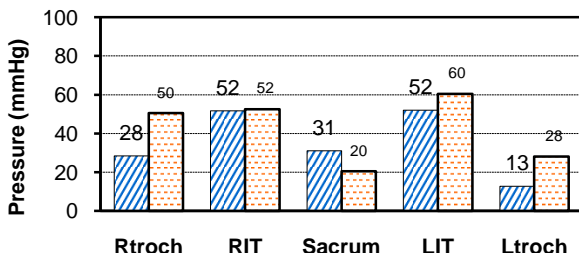


Adjuster 6

Jay 2

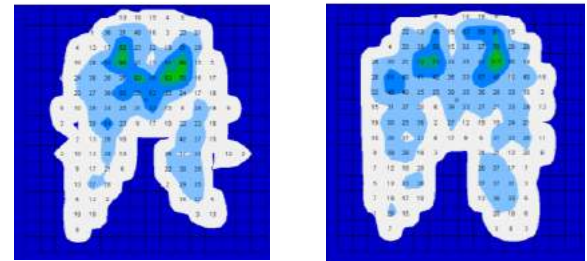


Adjuster 6 Jay 2



Adjuster 6

Varilite Evolution



Adjuster 6 Varilite Evolution

