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CASE STUDY 6 ALAN

Background

- 41-year-old.
- 650 pounds/294 kg/46.5 stone.
- Bariatric.
- Unable to sit unaided.
- Low blood oxygen saturation.
- Respiratory infections.

Problems With Old Chair

- Alan did not have a chair that met his seating and postural needs and accommodated his weight.

Caregiver Issues

Alan's caregivers reported that Alan spent most of his day in bed because he was too weak to transfer and there was a high risk to staff and patients both during transfers as no suitable chairs were available.

When Alan sat in a more upright position in bed, he fatigued easily due to lack of postural support and couldn't tolerate this position for very long. Due to his minimal position changes from day to day, he was developing red areas on his skin. He repeatedly showed low blood oxygen saturation.

Alan had also contacted multiple respiratory infections due to his inactivity and inability to sit upright for prolonged periods of time.

Postural Issues

- Alan fatigued easily and couldn't tolerate an upright position for very long.
- The reclined position in bed caused recurrent chest infections and contractures of the lower limbs were beginning to emerge.



BEFORE

Alan Sitting In A Bariatric Sorrento™



AFTER

BARIATRIC SORRENTO™

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Intervention

During the assessment, it was decided that Alan would trial the **Bariatric Sorrento™**. The removable arms made it possible to complete a safe transfer with Alan, after which the chair was adjusted to a tilted position. The initial position was familiar as it was close to the position Alan maintained in bed.

The Sorrento™ chair has a waterfall back with three back cushions. The third lumbar cushion on the **Bariatric Sorrento™** was removed to allow Alan to sit right back into the chair and gain support for his upper back. This was a challenge before due to a pronounced gluteal shelf.

Qualitative Client Feedback

Alan was pleased to be able to sit out securely. The special features of the **Bariatric Sorrento™** meant that his back, feet and legs were properly supported increasing Alan's comfort and security in the chair.

Sitting out improved Alan's breathing and he felt his quality of life and his mood improved when he was able to get out of bed and interact with others from a seated position. The motorised feature of the chair gave Alan some control over his own position. This was very important to him.

Postural Changes

- Alan sat more erect but had the ability using the handset to readjust his position to increase his comfort as his posture was accommodated.
- The special feature of removing the third lumbar cushion meant Alan's back was fully supported and this increased his comfort and ability to sit out for extended periods of time.
- Alan's feet were securely loaded on the footplate reducing the risk of sliding into a Posterior Pelvic Tilt.

Caregiver, Family Feedback

Caregivers were pleased with his progress and were happy with the reduction in moving and handling risk with transferring Alan each day. Alan's posture, core strength and mobility began to steadily improve.

Functional Changes

After a few weeks, the caregivers attempted standing transfers. This was significantly aided by the negative angle leg rest, helping him to get his feet into a position that would give him a safe, stable base when he reached the standing position. The caregivers were then able to use the anterior tilt to assist Alan to standing.

After progression, Alan was then able to perform a standing transfer when returning to bed with the assistance of caregivers. However, significantly reduced assistance to prior to using the **Bariatric Sorrento™**.

Impact on Skin

- The redness on Alan's skin disappeared due to better redistribution of pressure and frequent changes in position using the tilt in space feature on the chair.

Social Interaction

Alan reported feeling stronger as he was able to for up to 7 or 8 hours per day comfortably in conjunction with regular position changes and weight shifts. Due to being able to sit out he was able to join in any common areas.