



Effectiveness of the Dolphin Bed[®] as a Tool to Improve Tissue Perfusion in Points of Compression

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Background

- Pressure ulcers plague bed-bound patients
- High incidence** of pressure ulcers: 23% of long-term care facilities residents
- Expensive**: \$1.3 billion in costs annually
- Air-flow mattresses, Air-fluidized beds, and auto turning beds have improved care
- Is there a place for an even better "smart computerized, adaptable mattress?"

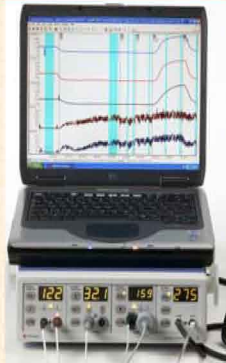
Objective

- Evaluate improvement of tissue perfusion by "Dolphin Bed"[®] (v. standard O.R. bed/gurney)

Dolphin Bed[®]



- Dolphin Bed[®] developed for dolphin transport (more susceptible to ulcers), works through a series of air-filled cylindrical pads
- Portable – unlike standard fluidized beds
- Uses a micro-processor driven air delivery system
- Analyzes weight distribution upon the bed
- Gives feedback to the bed pads to self adjust accordingly



Materials/Methods

- "Dolphin bed"[®] (Manufactured by Biologics)
- 10 volunteers
- Perimed electronics tissue sensor system (for pressure and perfusion assessment):
 - transcutaneous o₂/co₂ sensor
 - laser flow Doppler
- Sensors on bilateral scapula of volunteers
- measurements (in 10 minute increments)
 - Baseline upright
 - Supine on standard OR bed/gurney
 - Sitting up again (recovery to new baseline)
 - Supine on the dolphin bed

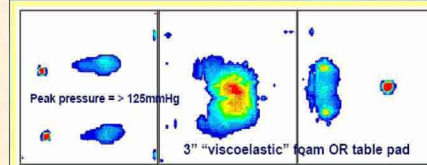
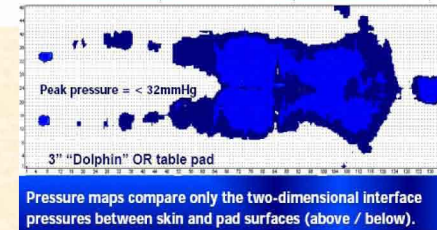
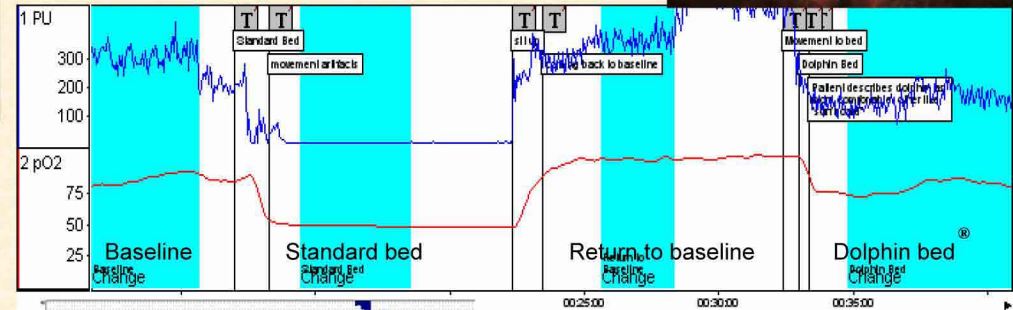
- Percent reduction from baseline calculated
- Mean values compared by Wilcoxon and paired t-test

Results

- Mean values: **87%** retention of perfusion on the dolphin bed[®] vs. **16%** of baseline perfusion for the standard bed
- All volunteers had significantly improved blood flow using the dolphin bed[®] vs. standard bed (p<0.0001)



Could the "Dolphin Bed"[®] prevent this?



Conclusions

- Statistically significant improvement of tissue blood flow while on the "Dolphin Bed"[®] relative to the standard bed and gurney
- Results warrant further study of the "Dolphin Bed's"[®] potential and clinical efficacy as a tool improving outcomes of pressure sore prophylaxis and treatment