

Defining Dignity for Plus-Sized Patients

A Proactive Approach: Enabling Independence for a Patient in their Own Home

Increased patient's independence
Fast discharge from hospital
Improved mobilisation

Introduction

Simon^{*} (age 49) was admitted to the hospital for suspected gastritis. He was put on bed rest until the pain had reduced. Simon weighed 233kg when admitted, and had following comorbidities:

- Mild learning disabilities
- Kyphosis
- Foot drop from previous stroke

Prior to admission, Simon was semi-mobile and could walk with his frame around the downstairs of his property. At home, it was noted that Simon struggled with transfer from his sofa to a standing position and on investigation, it was due to his positioning and the sofa being too low.

*Simon is not the patient's real name

Clinical Challenges

Simon developed foot drop which was caused by a previous stroke. This affected his mobilisation as his muscles on the front part of his foot have weakened, making it difficult for him to stand up. After admission, Simon unfortunately became immobile due to the acute onset of gastritis. Due to the pain Simon was in, he was nursed in bed for two months which was a compromising factor to the mobilisation challenges that occurred. During this time, staff did not have access to a suitable chair that would accommodate for Simon's morphology, which again hindered his mobilisation.

Upon admission, Simon's feet were in poor condition, especially on his heels which had existing damage.

Patient objectives

- Recover from infection to enable discharge
- Discharge without the help of carers at home
- Retain Simon's independence



Introduction of Medstrom's Bariatric Equipment Package

When Simon was admitted to hospital, he was put on a standard hospital bed and foam mattress. After being assessed by physiotherapists when discharge was being facilitated, it was suggested for Simon to go home with a package of care to avoid complications at home. This news was not expected by Simon and he became very discouraged as he yearned for independence. Due to this situation, a relative got in contact with Medstrom's Clinical Advisor to ask for advice and if they could provide Simon the right equipment, which allowed him to be self-efficient.

Medstrom's Clinical Advisor recommended Simon's relative to approach social services for an assessment of care for him. After a couple of days, the local CCG contacted the Clinical Advisor discussing suitable equipment for the patient, and how it could be supplied.

It was concluded that Medstrom's Bariatric Riser-Recliner was appropriate. With the help from Medstrom's Clinical Advisor, this was delivered to his home, prior to his discharge.

Bariatric Rise Recliner Chair: This chair comes in various widths from 28" (71cm), 32" (81cm) and 34" (86cm). For Simon, the 32" (81cm) Riser Recliner was selected as this was most compatible with his morphology. The chair has a waterfall backrest which conformed to Simon to support pressure redistribution. Individual parts of the backrest could also be taken out to further accommodate his kyphosis. In addition, when the chair was articulated, shear and frictional forces are minimised, reducing further skin damage.

The Riser-Recliner also has an intuitive one-button chair function which enabled Simon to transition from a sitting to a standing position. This assisted him to mobilise easier and safer than the sofa he was previously mobilising from at home.



The sturdy arm rest provided Simon a stable surface for him to use as support when standing up or sitting down. Additionally, the leg rest button gave Simon the option to elevate and rest his legs, allowing him to off-load his heels to prevent further skin breakdown. This was a stark improvement compared to the coffee table that Simon was previously using as support.

With the help of Medstrom's Clinical Advisor, Simon was discharged and was sent home without the need of carers as he had been provided with the Riser-Recliner.





Development of mobilisation



No further skin breakdown

Summary

The Riser-Recliner provided great assistance to Simon when he was discharged by allowing him to mobilise independently and safely at home, without the need for a caregiver's help. The sit and stand mechanism further aided him to regain his strength in his muscle, which had weakened when he sat down for a longer period.

Medstrom's Clinical Advisor commented:

"Simon's relative had contacted me to request equipment which could assist him at home, without the help of carers as he was extremely disheartened and wanted to remain independent. Myself and the local CCG discussed equipment options which considered all of Simon's needs. I suggested the Riser-Recliner as this would give Simon the **support he needed clinically**, whilst still allowing him to **retain independence**. We arranged for the chair to be in situ before he was discharged, meaning he could **start his rehabilitation as soon as he got home.** Since Simon's been at home, we've had feedback that he has **progressed really well** using the chair and he's now strengthened his muscles with the support of the rise function."

This case study illustrates how Medstrom can assist with a proactive approach in the community to enable equipment to be readily available for immediate use in a patient's home, prior to discharge. By ensuring equipment was readily available in his home, it provided Simon with the package of care he needed, resulting in a faster discharge from hospital.





To discover more about Medstrom's range of solutions for dignified plus-size patient care and enhanced support for caregivers, contact Medstrom's Bariatric Product Specialists 24/7/365 on:

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