

Decubitus Ulcer Management: There is No Substitution for the Clinitron Bed

Decubitus ulcer patients require absolute and reliable pressure relief that can only be provided by a bed that utilizes air-fluidized therapy.

SANTA BARBARA, CA, UNITED STATES, February 8, 2023 /EINPresswire.com/ -- "The Clinitron bed is the only reliable surface to allow for pressure relief for patients with pressure ulcers, burns, and medically frail patients who cannot be repositioned because of pain or other medical conditions. Unfortunately, most hospital and nursing home administrators say no because of the cost, and the result of that is disastrous," states Greg Vigna, MD, JD, national malpractice attorney and wound care expert.

Patients at high risk of catastrophic decubitus ulcers and those who have already suffered decubitus ulcers require absolute and reliable pressure relief that can only be provided by a bed that utilizes air-fluidized therapy. The prototype air-fluidized therapy bed is the Clinitron bed and it represents the ideal surface over the conventional solid support as its 'mattress' utilizes compressed air that pushes silicon coated ceramic beads vertically underneath a polyester sheet that provides absolute and reliable pressure relief for patients with decubitus ulcers or patients who are at high risk for developing decubitus ulcers. The Clinitron bed prevents capillary closure caused by pressure that occurs when lying on a conventional bed which allows for ongoing blood flow with its nutrient and oxygen supply to wounds and to at-risk tissues that otherwise would be compromised by air mattresses or conventional bed mattresses.



Dr. Greg Vigna

Dr. Greg Vigna, national malpractice attorney, states, "The best time to use a Clinitron bed is before deep tissue injury occurs. Nurses and doctors at bedside know which patients are vulnerable to pressure sores because repositioning is often impossible because of catastrophic orthopedic and spinal cord injuries where complete repositioning is impossible. In addition, patients with serious cardiac issues are often not able to tolerate turns because of respiratory compromise. Unfortunately, hospital employed nurses and doctors have lost the ability to advocate for their patients as they see hospital administrators refuse their request who view the

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Greg Vigna, M.D., J.D.

cost of the daily rental for this necessary medical equipment as unnecessary. The result is foreseeable and predictable as to which patients will develop a catastrophic Grade III or Grade IV decubitus ulcer. Each of these outcomes were unavoidable.”

Dr. Vigna adds, “There is no substitution for the Clinitron bed. Patients who are post-flap closure of a decubitus ulcer require a Clinitron bed as they can lay on their flap immediately post-op and not compromise the surgical site. There are added benefits as patients who are post-flap

don’t need to be turned except for dressing changes and bowel management which will reduce the risk of traction injuries to the incision lines. Also patients post-flap may have fresh bleeding noted in their surgical drains and instead of having nurses apply manual pressure to stop the bleeding, you can simply turn the bed off and on every twenty minutes and the silicon beads provide excellent evenly distributed pressure that will naturally contour along the post-operative flap site when the bed is turned off which will assist with reducing the oozing of blood at the operative site. The risk of failed flaps from hematomas are substantially reduced with this technique.”

Dr. Vigna continues, “Clinitron beds complications occur if the nursing staff are not trained in their proper use and if there isn’t physician supervision of the wound care team. Nursing aids like to use draw sheet under dependent patients on air mattress and conventional hospital beds to assist with repositioning and turns but, when used with a patient on a Clinitron bed, unwanted pressure creates a hammock effect. The Rite-Hite Clinitron bed is a model that is half air-fluidized for the legs and buttock and half air mattress for the upper half of the body which is needed for patients who can’t lay flat or those who require tube feeds. Patients who are treated with the Rite-Hite still require turns every two hours as they can develop pressure sores on the shoulder blade region from the air mattress portion of the bed as pressure relief is not absolute as the air mattress does not utilize air-fluidized technology.”

Dr. Vigna concludes, “Fortunately, I practiced at a time where hospital administrators and nursing home administrators listened to treating physicians. Those days appear to be over as big business has taken over hospitals and nursing homes. Big business now will have to listen under the power of a subpoena to the questions from my litigation team. Case by case, they get to see the expense of their decisions and the suffering they have caused.”

Greg Vigna, MD, JD, is a national malpractice attorney and an expert in wound care. He is available for legal consultation for families and patients who have suffered decubitus ulcers because of poor nursing care. Nursing homes and hospitals must be held accountable for the complications they cause. The Vigna Law Group along with Ben C. Martin, Esq., of the Martin Law Group, a Dallas Texas national pharmaceutical injury law firm, jointly prosecute hospital

malpractice and nursing home neglect cases, nationwide.

Learn more [about decubitus ulcers](https://vignallawgroup.com/decubitus-ulcer-help-desk/) visit <https://vignallawgroup.com/decubitus-ulcer-help-desk/> or [inquire about deep tissue injury](#). The Vigna Law Group help desk also has information about the [stages of decubitus ulcers](#).

References:

https://synergiecare.com/files/2020/12/Air_Fluidized_Therapy_Physical_Properties_and.23.pdf

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