### Injury Potential and Regulatory Compliance for

## Passenger Seats with Install Angle Above 18 Degrees



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# *Objective*

- Premium "Herringbone" seats
  - Side Facing Seats (install angle > 18 deg.)
  - Impact Vector predominantly forward
- Compliance is Complex and Confusing
- Airbags used to help satisfy Injury Compliance
- OBJECTIVE: Share Experience (Lend some Historical Perspective) Identify Considerations and Issues





## Background: Seatbelt Airbag

Introduced in 2001, Revised and Expanded in 2002

- First BAE J-41, then Airbus A340, and A330, A320, B777, CRJ
- Front Row Economy and special economy (life raft bustle, etc.) Solution for FAR 25.562 Head Injury Criteria (HIC)





- 2003: Premium Seats
- 2004: Introduced onto General Aviation
- Since 2005: Several Business / Premium Interiors and full economy class
- Over 50k Seat Placements and over 50 Commercial Airlines

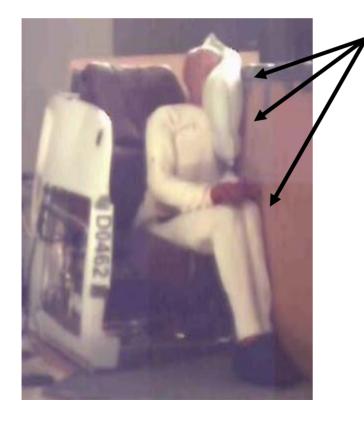
## Side Facing Seat – Existing Guidance

Seat angle > 18 degree: Side Facing Seat "Herringbone Interior"

 Issue Paper / Special Conditions







### Support Wall: Full Body Head, Chest, Pelvis

- *HIC* < 1000
- Thoracic Trauma Index (TTI) < 85G</li>
  TTI = ½(RIBG+T12G)
- Pelvic Acceleration < 135 G
- May require reporting of neck loads

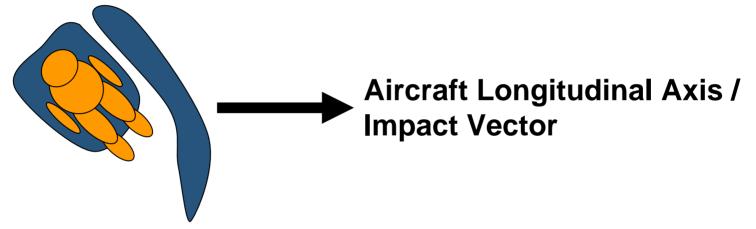
...and Airbag Special Conditions



# Side Facing Seat – Existing Guidance

#### Considerations

- Impact Vector toward monument
  - Monument part of seat structure or Interior
  - Row to Row vs Front Row and Seat TSO



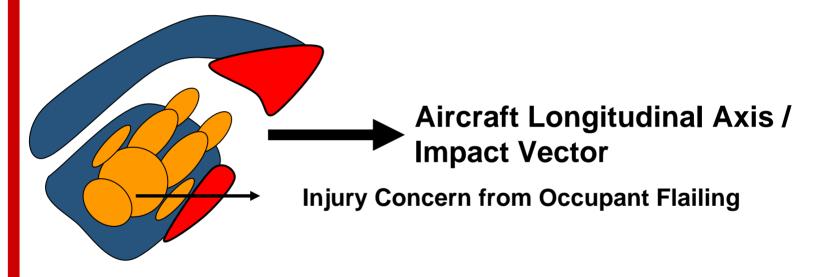
- Side Facing Anthropomorphic Test Dummy (ATD) for TTI and Pelvic Acceleration Data
  - EuroSid II recommended by FAA CAMI,
- Hybrid II and/or FAA Hybrid III for HIC and Neck
- No recent programs with side wall....evolution of SFS..... new questions?? (standardized process still applicable?)



Side Facing Seat – No Support Wall

#### Considerations

- Impact Vector <u>away from</u> monument <u>into free space</u>
  - No flailing over armrest
  - Footwell affect flailing?

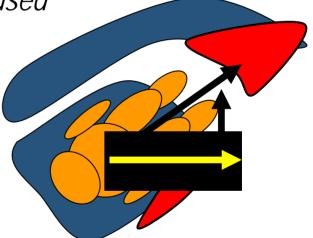


- TTI, Pelvic Acceleration Data Don't Apply if not striking wall
- ATD: Hybrid II and/or FAA Hybrid III for HIC and Neck



### Scope of Compliance Discussion

- Process confusing and will have variations depending...
  - if FAA or EASA originated program (Boeing / Airbus)
  - Airline, Applicant, and Seat Supplier
- Compliance Approach is Variable
  - ELOS (Equivalent Level of Safety) is used
  - Injury compliance is Key



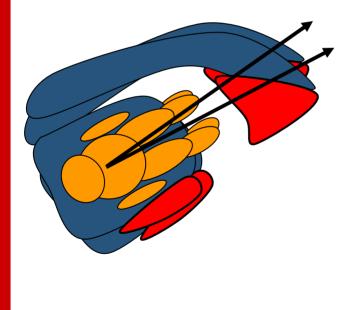
- Injury Compliance
  - No universally accepted ATD's for predominantly forward SFS
  - No universally accepted injury <u>measures</u> or <u>criteria</u> for open flailing .....IS Therefore SUBJECTIVE



*Comparison Point (example 25 ° install angle)* 

• SFS, no support wall, Equivalent Level of Safety (ELOS) Option A (Past): max seat angle per FAR 25.785 = 18°

A: 18°vs 25° (+10° yaw)



<u>Demonstrate</u> Similarity to a certifiable interior

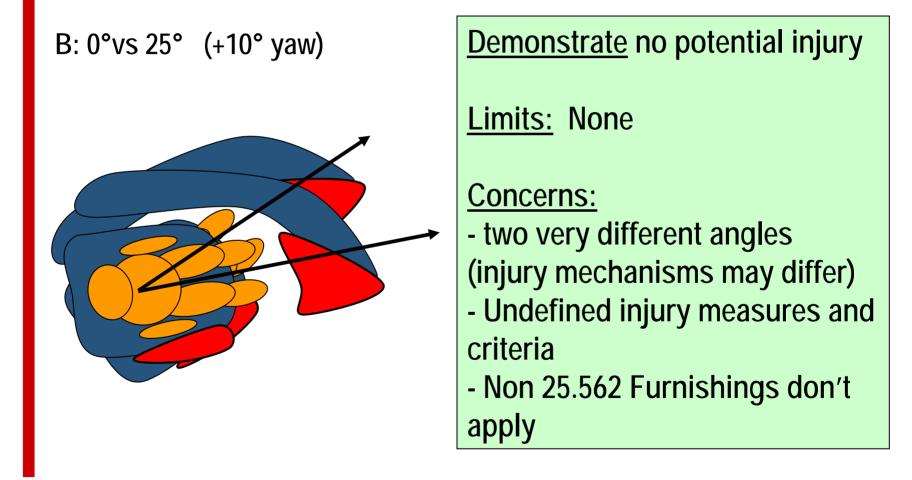
<u>Limit:</u> - Existing Certifiable Forward Facing Seat Configurations (some angle would be too large, 35°?, 40°?)

<u>Concern:</u> May not capture all potential injury (allowable 18° seats may have injury mechanisms not taken into account)



*Comparison Point (example 25 ° install angle)* 

• SFS, no support wall, Equivalent Level of Safety (ELOS) Option B (Current): most common forward facing seat = 0°





• Paper Abstract for this conference was submitted based on data evaluating injury comparisons using Option A. Compliance has evolved since that time. The paper was modified to reflect current status.

<u>Current Status:</u> (Option B) – Comparison is 0° standard seat

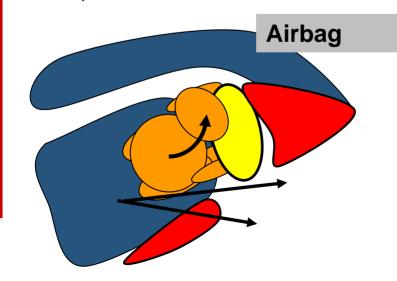
- Satisfy HIC for real interior using typical guidance
- Account for undefined / subjective injury
- Allowances
  - TTI and Pelvic Accel. Not Mandatory (unless needed)
  - Side Facing ATD Not Mandatory (unless needed)
  - Flail Comparison can be done with Structural Tests



- All Interior Combinations at + or 10° yaw
- Representative Monuments allowed (at least as stiff as real)
- Airbag typically used to mitigate HIC
  - If monument is just within strike zone...

Bag may only interact with head...

*Can raise concern for Neck or other injury mechanisms (that would not be considered for a normal forward facing seat)* 



Head can twist if airbag contacts mostly head.

More torso support is needed.



# Subjective Injury Considerations

- Best Tool Today: <u>Occupant Kinematics</u> from High Speed Video
- *Six Axis <u>Spine Load</u> Cell used in past, but meaning poorly understood*
- <u>Neck Load</u> criteria beginning to take shape, but lateral vs forward impact vectors add complexity
- Current Subjective Injury Status
  - Seat must allow Free Flailing (like a no-strike forward seat)
- Free Flailing: (no armrest or other structure in the way)
  - No obstructions impinging body
  - ATD should adopt "forward" vector (recognizing that belt anchor points will not allow perfectly forward alignment)



### Spine

FAA CAMI Research and other sources establish that misalignment of spine drastically reduces injury threshold.

- Severe flailing with complex (combined) motion can cause misalignment
- Objective:
  - Neck: Avoid bending with tension

(others will be researched in future)

- Spine: Avoid bending with rotation or tension or shear
- Avoid intrusion into soft tissue



# Flailing Over Structure (Armrest)

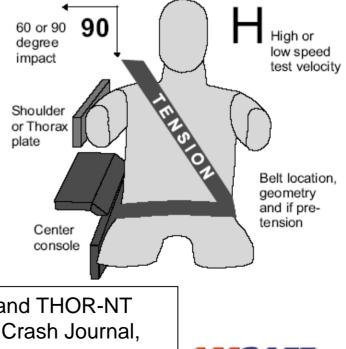
Automotive Research analogous to Angled Side Facing Seats Far Side Impacts

- Center Console is a significant source of trauma from far side impacts.
- Head flailing, chest and organ injuries are all of concern.
- Inboard restraints and shoulder and thorax plates helped in some ways, but not others. The specific design must be evaluated.

Bottom Line Objective: Must mitigate head flail and Local chest deflections.

#### Injury Measures:

- THOR-NT better for restraint evaluations
- WorldSID better for shoulder/chest support evaluations.



Pintar F.A. et All, Comparison of PMHS, WorldSID, and THOR-NT Responses in Simulated Far Side Impact, Stapp Car Crash Journal, Vol 51, pp313-360, SAE 2007-22-0014.

### Conclusions

*How to Certify Interior efficiently (no support wall) 1. Mitigate HIC* 

- Associated benefit for head flailing and neck loads (limited head accel. mitigates injury, even if undefined)
- 2. Move lateral obstructions out of the way
  - Mitigates local chest trauma in a practical manner
- 3. Compare Flailing to "Normal" Forward (0 degree install angle)
- 4. Save Some Effort: Avoid Side Facing ATD Tests
- 5. But Extra Effort is Needed to evaluate Subjective Injury: Structure program to evaluate realistic flailing early Coordinate Occupant Kinematics Response with authorities



### Thank You For Your Time!



### Questions?

Comments?

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