

Driving with epilepsy

Driving with epilepsy is a serious and sensitive community issue.

Epilepsy affects 1-2% of the population and those with well-controlled epilepsy are legally able to drive.

Epilepsy Tasmania acknowledge that for many adults the sudden loss or suspension of a driving licence can adversely affect employment, education, and social participation.

With driving restrictions impacting quality of life and independence, the challenge for the Australian Transport Council was to develop driving regulations and guidelines that balanced the interests of public health and safety with optimal quality of life for people living with epilepsy.

The relative risk of accident for drivers with epilepsy compared to other drivers is estimated to be between 1.0 and 1.95, (far below the accident rate of young males). The contribution of seizures to an accident is only 0.025 – 0.053%.

To put these figures into perspective, risks that the community find acceptable or unavoidable are:

- driving within the legal alcohol limit of .05 has an accepted increased accident rate of 2.0
- young males under 25 have an unavoidable increased accident rate of 7.0
- drivers 75 years and over have an unavoidable increased accident rate of 3.2

Based on these statistics, Austroads and the National Transport Commission, with the contribution of the Epilepsy Society of Australia, developed management guidelines and medical standards for licensing drivers with epilepsy.

Epilepsy Tasmania supports these guidelines and their consistent application across all jurisdictions as well as the position taken by the Epilepsy Society of Australia that:

- determining fitness to drive and the subsequent granting of a driver licence lies ultimately with the Driver Licensing Authority (DLA);
- decisions are based on a full consideration of relevant factors relating to health and driving performance, including medical reports provided by a treating practitioner; and
- such a system should be supported by a review process consisting of an expert panel of neurologists indemnified by the driver licensing authority.

Epilepsy Tasmania acknowledge that drivers with epilepsy who are assessed fit to drive are personally accountable for management of their condition in conjunction with support from their medical practitioner.

It is a legal requirement in all Australian states and territories for the driver to notify the DLA of the onset of epilepsy or recurrence of seizures.

Epilepsy Tasmania is firmly opposed to mandatory reporting to the DLA by the treating doctor as it will encourage non-reporting of seizures to the treating doctor. The withholding of information interferes with treatment and has the potential for possible fatal consequences. Mandatory reporting breaches doctor-patient confidentiality, has the potential to erode the doctor-patient relationship, and serves neither patient nor public safety.

Epilepsy Tasmania advocate for self-reporting with the individual taking responsibility for the condition and the limitations it presents. Consequences, for example, may be the inability to get to work, loss of employment resulting in financial hardship, or difficulties in meeting family commitments.

Epilepsy Tasmania strongly advocate for government transport assistance to support the person with epilepsy during the suspension period until driving rights are restored.

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