Driving and Diabetes

- The DVLA have laws concerning medical conditions and driving
- New legislation came into force in 1998 - in line with European laws.
Driving and Diabetes

- 2000 accidents caused by collapse at the wheel, the driver had diabetes.

- However, statistically people with diabetes have no more accidents than people without Diabetes.
The Law- (Group 1)

- Car up to 3.5 tonnes with a trailer
- Tow a caravan, boat or horse box
- Minibus up to 8 passengers
- Motorbike/Moped
The Law – Group 1

- On oral hypoglycaemics - licence lasts until 70 years old.
- On Insulin - issued with a 1,2 or 3 year licence
The Law- Group 2

- Vehicles over 3.5 tonnes
- Medium sized lorries
- Minibuses (>8 passengers)
- Lorries
- Buses
The law – group 2

- Patients on oral hypoglycaemics can drive these vehicles if they meet medical standards.
- Insulin treated diabetics are barred from driving these vehicles except in exceptional circumstances.
Informing the DVLA

- All patients treated with Oral hypoglycaemics, GLP1s (BYETTA/VICTOZA) or Insulin must inform the DVLA of their diagnosis
- Diet treatment alone - no requirement to inform
- All patients should inform their insurance agency at diagnosis and change of treatment.
The DVLA- musts

- All drivers must be able to read a car number plate at 20.5 meters
- If laser treatment to both eyes must inform the DVLA
- Other eye conditions must inform the DVLA
- If peripheral neuropathy or peripheral vascular disease affecting safe operation of pedals, as vehicle restrictions may be applied
Advise to Patients

- Main hazard is hypoglycaemia
- Aim is to keep patient safe and other road users safe
- Simple rules if followed aid in this
Advise to Patients

- Always keep rapid acting carbohydrate in the car
- Carry a blood glucose meter with them
- Check BM before driving
- Test every 2 hours during a journey
- If BM is less than 5 mmol/l then take a snack before driving
- Take regular rests on long journeys.
Advise to Patients

- Do not drive if BM is under 4 mmol/l
- Do not drive if they feel Hypoglycaemic
Advise to Patients

- If Hypo, stop the car
- Switch of engine
- Remove keys
- Vacate driving seat
- Do not drive until 45 minutes after blood glucose returns to normal
Advise to patients

- Carry identification with them
- If change to insulin regimen or commenced on insulin for the first time do not drive until BM stable
- Take extra care when pregnant - more prone to hypos
- If patient has a disabling hypo during waking hours must inform the DVLA
- If loose Hypo awareness should not drive
- If loss of awareness persists then inform the DVLA
- Inform DVLA if diagnosed with Diabetes Complications - neuropathy, retinopathy, experiencing frequent Hypos.
DVLA

- www.direct.gov.uk/motoring
Employment and Diabetes

- Disability Discrimination Act (DDA) 1996
- Hazardous Occupations
- Shift work
- Managing Diabetes at Work
- Hypos at Work
Key Points

- Diabetes is increasing in the working population
- Diabetes is a chronic condition and complications may appear over time-affecting ability to work
- Diabetes employees should be assessed for likelihood of sudden incapacity
- Risk assessment of the workplace should be carried out where safety may be compromised
- There are 2.3 million people with Diabetes in UK-majority have Type 2 and many of these are in work
- There can be limitations on types of jobs applied for
- DDA provides legal grounds for people with Diabetes to address issues of discrimination
Thanks for Listening