Is it safe for my patient to drive?

Jamie Dow md
Direction de la recherche et du
développement en sécurité routière

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Conflicts

No relationship with any commercial company

• Full-time employee of the SAAQ.

Objectives

Following this workshop a physician will be able to:

• Recognise signs of possible unfitness to drive in their patients

Apply basic screening tests for fitness to drive

 Refer patients with a possible compromise of their fitness to drive to the appropriate driver-fitness evaluation resource



Context

Predicted increase in older drivers over the next 15 years

• 2008	8%
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- 2018 18%
- 2025 25% (30%?)

As people age they are more likely to have at least one of the medical conditions known to influence driver fitness.

62% of drivers aged 70-79 have at least one such condition



Driving: a complex task

- For most people, the most complex task undertaken during their regular daily activities
- Requires:
 - Judgement
 - Self-awareness
 - Intact divided attention
 - Rapid processing of (mostly visual) data and decision-making
 - Autonomy at the wheel



How complex?



BUT:

- Age is not a criteria in determining driver fitness
- Medical unfitness to drive can occur at any age
- Usually diagnoses alone do not determine driver fitness, it is the functional impairments that result from the medical conditions that are the major factor.
- Often a road test is necessary

Medical fitness to drive

Practically speaking, it is difficult to determine fitness to drive in an office setting unless the unfitness, or fitness, is blatently evident - e.g. severe dementia.

SAAQ does not ask physicians to determine fitness to drive.

Physicians are asked to provide accurate medical information and to communicate any unsettling findings that may indicate potentially-compromised driver fitness



Red flags

- Any impairment, physical or cognitive, that affects their quality of life or their daily activities
- Voluntary changes to their usual driving activities
 - Only drives in their local area
 - Only drives in daylight and/or good weather
 - Avoids rush hour, busy periods or autoroutes
- Visual problems (cataracts, low acuity, visual field defects)

A change in cognitive status?

- There are no cognitive tests or battery of tests that may be used as the sole determinant of driver fitness.
- No correlation between results on the Clock, MoCA, MMSE (Folstein) and on-road performance
- The only tests that are predictive of driver performance are the Trail Making Test B and the Useful Field of View (UFOV).
- The Maze Test, Trail Making Test A reversed and the Colour TMT have potential but have not been validated in this context.

TMT B - Driver screening

Do not use the tables that interpret results according to age.

Normal: Less that 60 seconds

More than 180 seconds = 50% risk of failure on road test

More than 300 seconds = 83% risk of failure on road test

Does not understand, cannot finish = almost 100%

TRAIL MAKING TEST PARTIE B
Nom du patient Date
Évalué par
Voir au verso les instructions et un modèle du test. Fin
(13) (8) (9) (1) (10)
(12) Début (5) (C)
(G) (A)
(L) (2) (6) (E) (11)

automobile

Interviewing the patient about driving

- Obviously, it is not necessary to question every patient to the same degree about driving.
- As with any other condition, questions about driving will be required only for those patients for whom you suspect there is a possibility of their being unfit.
- In the same vein, it is not necessary to systematically administer the TMT B to all your patients.
- But, when you have doubts about their fitness, you must follow up your suspicions.



N.B.

- Unless the off-road cognitive tests confirm severe dementia, the unique role of the tests is to IDENTIFY drivers who will require further evaluation.
- Further evaluation :
 - OT
 - SAAQ

OT evaluation

- A half-day of off-road evaluation including cognitive and physical assessments
- An extensive road test lasting about 90 minutes conducted by a driving instructor with an OT observer in an unfamiliar car with double foot pedals.
- Costs: Private = \$300 \$600 depending on the number of road tests.

 Public = \$150 unless car is provided by the establishment
- Waiting list: Private = 2 6 weeks
 - Public = up to 10 months if eligible

Reporting

Physician reporting of a patient's unfitness to drive is discretionary in Quebec contrary to the situation in most Canadian jurisdictions.

According to the Quebec Highway Safety Code, physicians, nurses, OTs, psychologists and optometrists MAY report a patient aged 14 or more (with or without a driver's licence) who is, in their professional opinon, unfit to drive.

The reported person has no legal recourse against the professional who makes a "good faith" report.

BUT: According to the College of Physicians, there are some situations when reporting becomes obligatory

The 3 "ifs" Rule

IF the physician counsels the patient not to drive for medical reasons

IF the patient indicates, by word or deed, that they will not comply with this advice

IF the physician believes that in so doing the patient will endanger themselves or other road users

REPORTING BECOMES AN ETHICAL REQUIREMENT

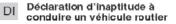
Déclaration d'inaptitude

SAAQ fax: 418-643-4840



Duébec 🕏 🏚 Service de l'évaluation médicale

Case postale 19500, succ. Terminus



Personne visée	Professionnel de la santé		
Nom et prénom(s) (en majuscules)	Nom et prérom(s) (en majuscules)		
Adresse (nº, rue, municipalité)	Adresse (nº, rue, municipalité)		
Code postal Nº de téléphone		Code posal	
Date de naissance Mots jour N° de permis de conduite	N° du permis d'exercice N° de téléphone (burs ()	lnformation (sans frais) 1 866 599-6915	
Veuillez motiver cette déclaration d'inaptitude en précisant la nature de	s maladies, des déficiences, des atteints	es, des limitations et leur sévérité.	
Awez-vous informé la personne concernée de votre démarche auprès de la Société ? Oui Non			
Désirez-vous un accusé de réception ?		☐ Oui ☐ Non	
Conformément à l'article 603 du Code de la securité routière, mentionné ci-dessous, je, soussigné, juge la personne visée inapre sur le plan de sa santé à conduire un véhicule routier.			
	☐ Médedn ☐ Ergothéxipeute ☐ Optométriste ☐ Infirmier ou Infirmiéxi ☐ Psychologue		
Signature du professionnel de la santé	,gee	Date	



Remember

Being medically unfit to drive is not restricted to older drivers.

With the current orientations dictated by the provincial government, even a severely-handicapped person may apply for a driver's licence.

Hence, the patient inquiring about fitness to drive may be only 14.

Example: a 33-year old man has had 3 crashes in the past year and does not remember any of the events leading up to them. His neurologist advises him not to drive while being investigated for epilepsy.

5 minutes later



Another example





Questions you should ask your patient

Recent crashes or infractions?

Do you lose your way when driving or forget where you are parked?

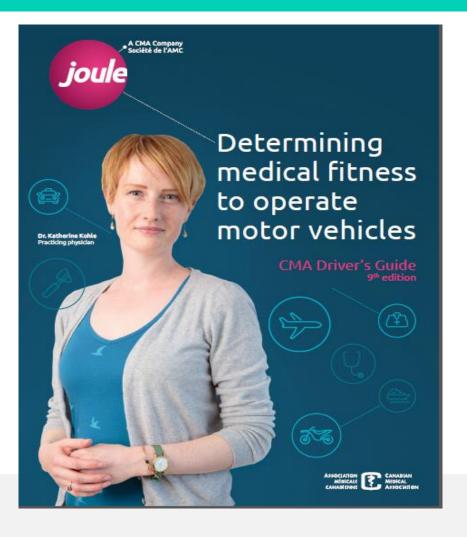
Have you restricted your driving?

Do you drive at night, in bad weather or use autoroutes?

Do your children let you drive their children?

Still unsure. Ask yourself....

Would I want someone I love to be driven by this person?



CMA Driver's Guide

https://saaq.gouv.qc.ca/extranet-sante



Conclusions

Although age may be a factor, it is not a criterion for determining fitness to drive.

Even a young driver may be unfit to drive.

If you have doubts about the effects of cognitive impairments on driving the Trail Making Test B provides an easy means of screening your patient.

Determining driver fitness is impossible in many cases without a practical evaluation.

Questions

