

RSA

Sláinte agus Tiomáint

Medical Fitness to Drive Guidelines

(Group 1 and 2 Drivers)

April 2026

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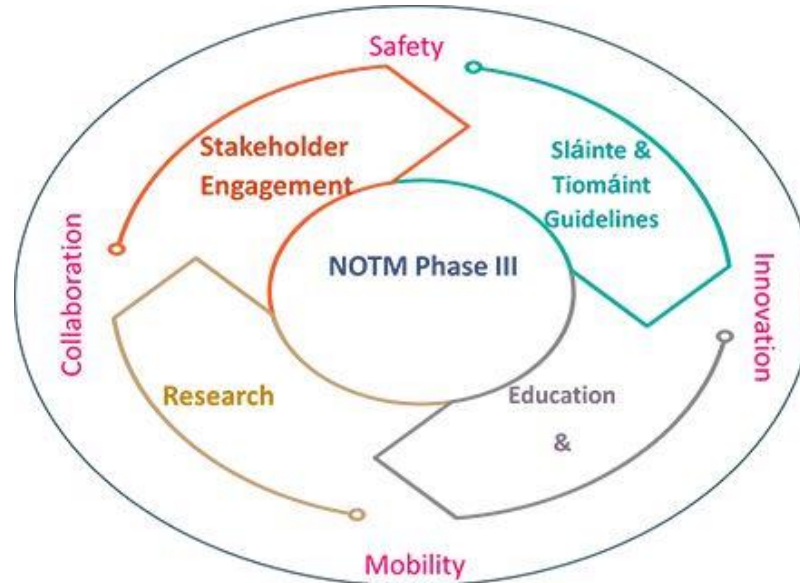
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Launch 2026 Edition Sláinte agus Tiomáint Guidelines on Medical Fitness to Drive

Prof Desmond O'Neill
Director



National Office for Traffic Medicine



<https://www.rsa.ie/services/licensed-drivers/medical-fitness/national-office-for-traffic-medicine>





Processes

- Large representative stakeholder Working Group
- In-house research
- Engagement with other medical advisory groups - DVLA
- Engagement with international bodies – US TRB, CIECA





Annual update

- Major literature review – July
- Working Group feedback – November
- External Review – January
- Consolidation - March

- Tracking other medical advisory bodies
- European directives





Recommendations on National Implementation

Health and Driving Aspects
of the Fourth Driving
Licence Directive:
Directive (EU) 2025/2205

Final / January 2026

CIECA Fit to Drive Permanent Advisory Group

CIECA
THE INTERNATIONAL COMMISSION FOR DRIVER TESTING
AV. DE LA TOISON D'OR 77
1060 BRUSSELS - BELGIUM
info@cieca.eu



- Medical declaration/screening
- Focus on education professions and public
- Alcohol ignition interlocks



- Chap 1: Extended section rehabilitation
- Chap 2: Psychogenic non-epileptic seizures (PNES); Primary/Central Hypersomnias
- Chap 3: Successful Catheter Ablation; Percutaneous Valvular Procedures
- Chap 4: Insulin-Treated Diabetes
- Chap 5: Developmental Disorders
- Chap 6: Alcohol Misuse and Alcohol Dependence
- Chap 7: Blepharospasm; Night Blindness
- Chap 9: Cough syncope and Obstructive Sleep Apnoea






Education

- Undergraduate
- 1st Prize
 - Heba Bagnash (TCD)
- 2nd Prize
 - John Scully (TCD)
- Postgraduate
- 1st Prize
 - Joyce Joan Macharia (UL)

NATIONAL OFFICE FOR TRAFFIC MEDICINE

Mary Ward
Essay Prize
in
Traffic Medicine

2025/
2026



• Essay Title: "Educating healthcare professionals and the public on medical fitness to drive."
• 1500 – 3000 words
• Applicants must be medical or allied health students on a full-time course in the Republic of Ireland


Scan here to find submission details and more information

Undergraduate Prizes	Postgraduate Prizes
First prize: €500	First prize: €500
Runner up prizes: €200 and €100	Runner up prizes: €200 and €100

CLOSING DATE: 11:59PM SATURDAY 31 JANUARY 2026

Trinity College Dublin
College of Medicine, Health & Life Sciences
The University of Dublin

Enquiries to notm@tcd.ie





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Online CPD Course on Guidelines – 3 CPD



Online from 13 April –
in-person 28 May





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Courses

☰ Menu

Traffic Medicine (P.Grad.Cert)(Online)

NFQ Level 9

1 year, online

20 Places

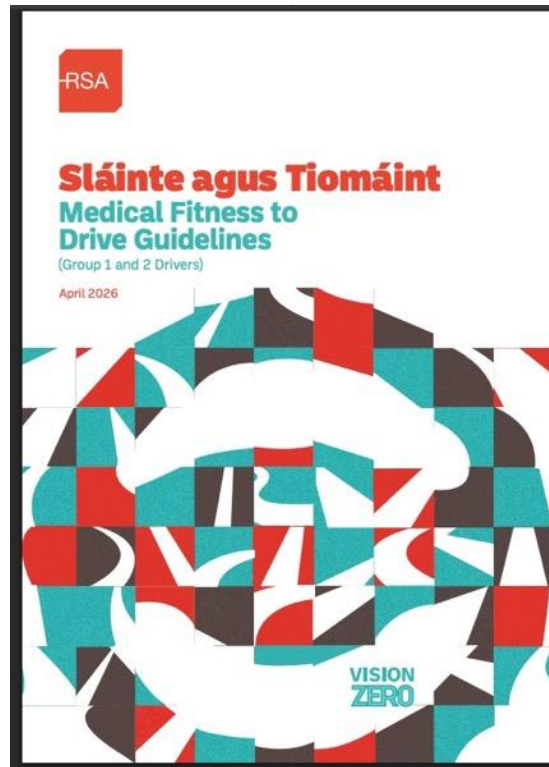




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<https://www.rsa.ie/services/licensed-drivers/medical-fitness/national-office-for-traffic-medicine>





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Medicines and fitness to drive in context

Prof Desmond O'Neill

Director





Changing emphasis of Traffic Medicine

- A relatively new specialism embracing all those disciplines, techniques, and methods aimed at reducing death and injury inflicted by traffic crashes
- Also enabling /rehabilitative in trying to ensure that transport mobility is not hampered, or rendered unsafe, by remediable illness or functional loss.





How do we translate it?

- Try to have guidelines administered by licencing authority staff

OR

- Engage healthcare professionals to take a pro-active approach to medical fitness to drive
 - Medical Advisory Board
 - Updated guidelines and education





"Automobile Driving"[Mesh]



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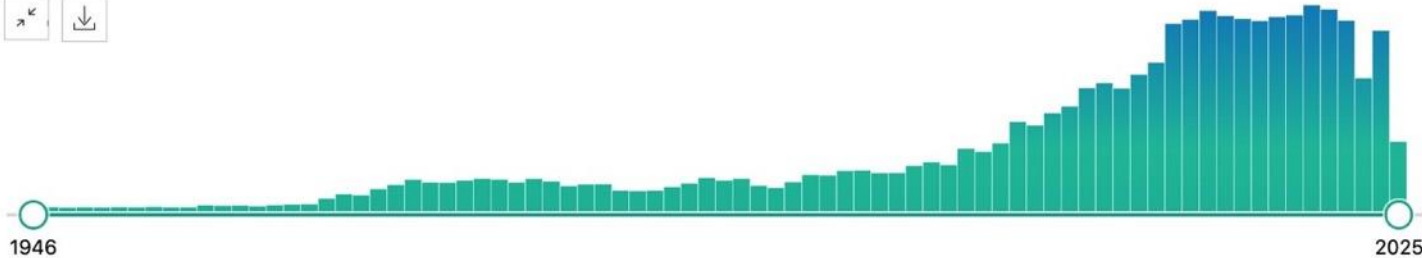


Display options

RESULTS BY YEAR

25,120 results

Page 1 of 2,512



..of 39 million
papers

....and heterogeneity in medical support to European driving licencing agencies





Medical Fitness To Drive

- Low profile in healthcare research, education and CPD
- Challenge to interpret research without broader interdisciplinary working
- 4th EU Directive promotes increased awareness and education





Risk and Risk Tolerance Criteria

Ulrich Beck
Risikogesellschaft
Auf dem Weg
in eine andere Moderne
edition suhrkamp
SV

- There is no such thing as zero risk. Residual risk always remains, no matter how great the resources applied to reduce it.
- Risk management requires resources.
- Risk tolerance is not the same as risk acceptance. This reflects the belief that no incident harming people should be considered acceptable. However, individuals and society may tolerate some level of risk in return for the benefits derived from the activity posing the risk.
- To be credible, risk criteria must be consistent with societal values. The public's level of confidence with respect to societal management of risk is an inevitable factor in the continued endorsement of industry activities.





Risk in perspective

- Driving at 0100 Sunday x 142
- 16 year old x 42
- Light car x 20
- Rural roads x 9
- ADHD (untreated) x 2
- Sleep Apnoea (untreated) x 2
- Diabetes x 1.19 (CI:1.08–1.31)

FMCSA, 2006

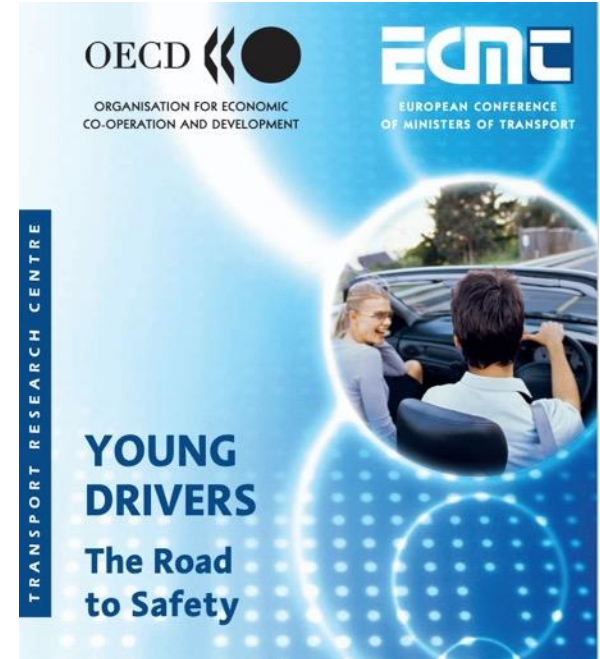




The availability heuristic....



VS





Alcohol Use Disorder



BAC

≥ 1.0

OR 5-8

≥ 1.2

OR 15-21

Ethical debate

Why are doctors ambivalent about patients who misuse alcohol?

BMJ 1997;315:1297-1300

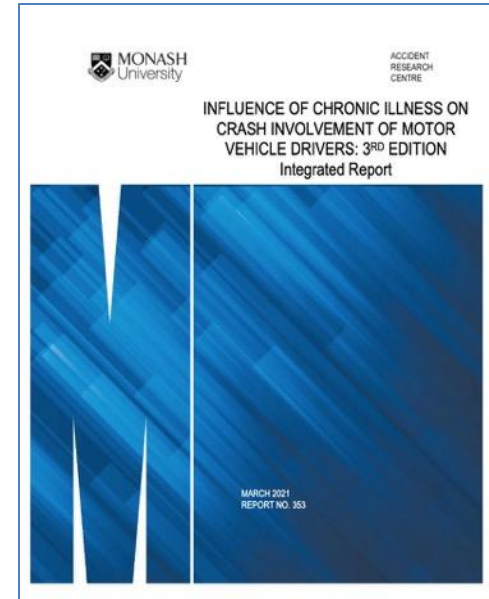
It is not unusual for doctors to see patients who they strongly suspect are misusing alcohol. Should they ignore it or try to intervene? And what should they do if the patient's alcohol misuse puts other people at risk? In this ethical debate a lawyer, two psychiatrists, and an oral and maxillofacial surgeon give their views.





Understanding relative risk

- Higher
 - mildly higher 1.1-2.0
 - moderately higher 2.1-5.0
 - Considerably higher >5.0
- Not Different ~1.0
- Lower
- Inconclusive





Medications and risk of motor vehicle collision responsibility in British Columbia, Canada: a population-based case-control study

Jeffrey R Brubacher, Herbert Chan, Shannon Erdelyi, Peter J Zed, John A Staples, Mahyar Etminan

<3% crashes

aOR all <2

.. we did not find increased risk in new compared with established users of these drugs.





Suddenly disabling events

- Less than 20% annual recurrence risk Group 1
- Less than 2% annual recurrence risk Group 2





Further challenge...

- Linking medications to driving model and crashes
- Strategic
- Tactical
- Operational – countless unhelpful studies on medications and braking distance





Further challenge...

- The medication.. or the condition which prompts the prescription
- The anti-psychotic... or the psychosis





European Medicines Agency

- any potential effect of the medicinal product that might affect ability to drive or operate heavy machinery.

4.7 Effects on ability to drive and use machines

On the basis of the pharmacodynamic and pharmacokinetic profile, reported adverse reactions and/or specific studies in a relevant target population addressing the performance related to driving and road safety or using machines, specify whether the medicinal product has a) no or negligible influence b) minor influence, c) moderate influence or d) major influence on these abilities. Other important factors that affect the ability to drive and use machines should be considered if known, e.g. duration of the impairing effect and the development of tolerance or adverse reactions with continued use.

For situations c and d, special warnings/precautions for use should be mentioned here (and also in section 4.4 for situation d).

Driving and using machines

Medicines such as Brufen may cause dizziness, drowsiness, tiredness and problems with vision. If affected, you should not drive or operate machines. Also you should not do anything else where you need to be alert. This particularly applies in combination with alcohol.



Early studies focused on ‘risk’

- DRUID
- Main focus on side-effects, not on crash risk
- Only two classes associated with modest increase crash risk
 - Benzodiazepines
 - Tricyclic antidepressants





O.Rs for Crashes	O.Rs.	C.I.
Opioids:	1.17	0.74 – 1.85
Antipsychotics :	1.01	0.62 – 1.63
Anxiolytics :	1.46	1.16 – 1.85
Hypnotics :	1.34	1.04 - 1.74
Antidepressants :	1.59	1.30 – 1.94
Sedative Antidepressants :	1.32	0.93 – 1.88
SSRIs :	1.76	1.38 – 2.24
Antihistamines :	0.75	0.55 – 1.02

Netherlands

Ravera S, et al. Br J Clin Pharmacol 2011;72(3):505-13.





Falling asleep at the wheel: Motor vehicle mishaps in persons taking pramipexole and ropinirole

S. Frucht, MD, J.D. Rogers, MD, P.E. Greene, MD, M.F. Gordon, MD, and S. Fahn, MD | [AUTHORS INFO & AFFILIATIONS](#)

June 1, 1999 issue • 52 (9) 1908 • <https://doi.org/10.1212/WNL.52.9.1908>

► [Neuropsychiatr Dis Treat. 2009 Nov 2;5:535–540. doi: 10.2147/ndt.s4578](#) [↗](#)

Sleep disorders in Parkinson's disease

[Israt Jahan](#)^{1,✉}, [Robert A Hauser](#)², [Kelly L Sullivan](#)¹, [Amber Miller](#)¹, [Theresa A Zesiewicz](#)¹



Caution while starting or increasing dose..





Compliance

Antipsychotic treatment adherence and motor vehicle crash among drivers with schizophrenia: a case–crossover study

John A. Staples MD MPH, Daniel Daly-Grafstein PhD, Mayesha Khan MA, Lulu X. Pei MSc, Shannon Erdelyi MSc, Stefanie N. Rezanoff PhD, Herbert Chan PhD, William G. Honer MD, Jeffrey R. Brubacher MD

■ Cite as: *CMAJ* 2025 June 9;197:E612-9. doi: 10.1503/cmaj.250020

...perfect adherence to antipsychotic medication was associated with half the odds of a crash relative to complete nonadherence (adjusted OR 0.50, 95% CI 0.38–0.66).





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European Neuropsychopharmacology (2014) 24, 1425-1443



ELSEVIER

www.elsevier.com/locate/euroneuro



REVIEW

Influence of stimulant and non-stimulant drug treatment on driving performance in patients with attention deficit hyperactivity disorder: A systematic review



Maria Angela Gobbo^{a,*}, Mario R. Louzã^b

...treatment with stimulants in therapeutic doses improves driving performance in ADHD patients, especially teenagers and young adults.





Received: 2 July 2021 | Revised: 15 November 2022 | Accepted: 24 November 2022

DOI: 10.1002/pds.5577

ORIGINAL ARTICLE

WILEY

Prescribed anti-glaucoma medication consumption and road traffic crash

Li Lu^{1,2,3}  | Benjamin Conrand^{2,3}  | Cedric Schweitzer^{4,5} |
Blandine Gadegbeku⁶ | Cécile Delcourt⁵ | Emmanuel Lagarde^{2,3}








Acta Ophthalmologica

ACTA OPHTHALMOLOGICA 2021

Driving vision in patients with neovascular AMD in anti-VEGF treatment

Nanna Jo Ferløv Baselius,¹  Troels Brynskov,¹ Mads Krüger Falk,¹ Torben Lykke Sørensen^{1,2}  and Yousif Subhi^{1,3} 

¹Department of Ophthalmology, Zealand University Hospital, Roskilde, Denmark

²Faculty of Health and Medical Sciences, University of Copenhagen, Copenhagen, Denmark

³Department of Ophthalmology, Rigshospitalet-Glostrup, Glostrup, Denmark



J Clin Psychopharmacol. 2010 June ; 30(3): 245–251. doi:10.1097/JCP.0b013e3181da5406.

Effects of Cholinesterase Inhibitors on Visual Attention in Drivers with Alzheimer's Disease

Lori A. Daiello, Pharm.D^{*}, Brian R. Ott, MD^{*}, Elena K. Festa, PhD[§], Michael Friedman, MD^{*}, Lindsay A. Miller, BS[¶], and William C. Heindel, PhD[§]

Effect of Memantine on Prolonging Safe Driving in Early AD: a Pilot Study

Peter J. Holland, MD, DLFAPA, FACOEM¹, Ruth M. Tappen, EdD, RN, FAAN², David O. Newman, PhD², Katherine C. Freeman-Costin, DrPH², Lori J. Fisher, MA²

¹Schmidt College of Medicine, Florida Atlantic University, Boca Raton, FL;

²Christine E. Lynn College of Nursing, Florida Atlantic University, Boca Raton, FL, USA

<https://doi.org/10.5770/cgj.24.540>



Studies that won't be done

- Anti-inflammatories
- Antidepressants
- Anti-Parkinsonian agents





Conclusion

- Many prescription medications have positive impacts on medical fitness to drive
- At most a modest impact on medical fitness to drive
- Challenging to disentangle medical condition from the remedy
- Advice at initiation of psychoactive drugs important
- Inclusion of traffic medicine in healthcare curricula a priority





- The demand for certainty is one which is natural to man, but is nevertheless an intellectual vice

Bertrand Russell

