



Maritime and Coastguard Agency

Medication at Sea

Notice to Ship Owners, Ship Operators and Managers, Manning Agencies, Masters, Officers and Seafarers

This notice should be read in conjunction with Merchant Shipping Notice MSN 1765(M), Marine Guidance Note MGN 219(M)+ amendment and Merchant Shipping Notice MSN 1768(M+F) + amendment

Summary

This Note alerts ship operators, employers and seafarers to the potential effects on performance of prescription and/or over the counter drugs, and the need to review and monitor a seafarer's fitness for service at sea whilst they are being taken.

It highlights the personal responsibility of seafarers to notify employers when medication likely to affect performance is being taken. It recommends that companies develop management systems to minimise the risk of adverse effects of medication at sea whilst respecting the need for confidentiality and discretion.

Appendix 1 lists drug types where side effects might be expected to impair performance
Appendix 2 provides a sample declaration form

1.0 Background

1.1 Prescription and over the counter (OTC) drugs may enable users to continue working during periods of acute or chronic illness. However there is an increased risk that impairing side effects of such medication, e.g. fatigue or disorientation, could jeopardise personal safety and in some cases, the safety of others. At sea this can be a particular problem, and recent accidents have highlighted impairing medication as a contributory factor. Employers and seafarers should therefore be aware of their particular roles in helping to prevent such incidents, and the following guidelines should be followed whenever necessary.

2.0 The risks of medication use at sea

2.1 The use of any form of medication is likely to be an indicator of symptoms of an illness which may influence the ability of a seafarer to undertake their duties safely and efficiently. Thus it is a marker for the employer, master, maritime health adviser and approved doctor, which indicates a need to ask further questions. An Approved Doctor may fail a seafarer or restrict a certificate as a result of the condition for which the medication is prescribed. A good example of this would be the use of inhalers or other treatments for asthma.

2.2 Some forms of medication, both issued on prescription (e.g. tranquillisers and many other treatments for mental health problems), and bought over the counter, (e.g. some hay fever, sea sickness and cough medicines), can directly impair brain function, usually by slowing responses and causing sleepiness. This will have an impact on the ability to perform safety-critical tasks. A few can have other directly impairing effects, for instance on vision (some sea sickness remedies).

2.3 The risk of episodes of seafarer incapacity, for instance from treatments such as insulin, may lead to loss of control of a vessel or to personal dangers, especially when working alone. Such risks may be increased by irregular routines of work and eating.

2.4 Dangerous complications, such as excessive bleeding, can arise from medication with or without a prior injury, in those taking anticoagulants such as warfarin and can put the seafarer's life at risk. They will also cause operational problems and risks for others if urgent medical attention is needed.

2.5 Some medications, for instance hormone replacements in those with disorders of their own hormone production, can be essential to support life. If doses are missed, this can pose a risk. In some cases the dose may have to be adjusted correctly by the user in the event of a minor infection or other incidental event.

2.6 Medications may be prescribed to be held in reserve by a seafarer, for instance to treat an infection if they are liable to asthma or have damaged heart valves. Correct use is important, as is the need to recognise when the treatment used is insufficient and expert help is needed.

2.7 Regular medical surveillance of treatment may be needed, either to adjust dose or to follow the progress of the condition being treated e.g. tablets for diabetes or blood pressure. These will not in themselves cause problems at sea but can limit the length of voyages undertaken in order to ensure that follow up takes place.

3.0 Risk Management Principles

3.1 The risks associated with medication use at sea need to be effectively managed to ensure vessel safety by:

- a) avoiding impairment in those doing safety-critical tasks;
- b) reducing the risk of medical emergencies at sea either from the effects of medication or from the illness for which it is used; and
- c) ensuring that, where regular surveillance of treatment is needed, this can be accessed.

3.2 There is little direct evidence relating to the level of risks at sea, but impairing medications are known to be contributors to accidents in other safety-critical employment and the complication rates from most commonly used medications are known from onshore experience; these are equally applicable to maritime conditions.

3.3 Experience in other modes of transport indicates some of the options for medication risk management. The measures used will depend on the risk, both in terms of its probability and the worst-case accident which could arise. Different types of seafarer will pose different patterns of risk. For example, impairment in a navigating officer can directly put a vessel at risk, whereas similar impairment in customer service personnel may be less significant. On short voyages, a risk of recurrent illness or a complication from medication use will only be significant if it is very sudden, such as severe bleeding. However, on deep sea voyages, even progressive loss of control from therapy or slowly developing illness can lead to risks and costs.

3.4 **Confidentiality.** Declaration of medication to an employer can cause confidentiality problems and needs to be handled in a way such that it does not give rise to unfair discrimination or to information about a sensitive medical condition becoming public.

4.0 Responsibilities for Risk Reduction

4.1 **Individual seafarers** have a general duty to take care of their own and others' health and safety whilst at sea. It is therefore their responsibility to disclose to their employers any medication they are using, whether prescribed or over the counter, (OTC), which might affect their ability to carry out their duties safely, together with any accompanying warnings or advisory leaflets. They should also ensure that whenever drugs are prescribed, the prescriber is aware that they work at sea and should give appropriate advice. In all cases they need to read and act on any warnings given on the medication packet or in the enclosed advisory leaflet, and inform their employer of any potential or foreseen problems. This applies to both prescribed and OTC medicines, although the majority are free from relevant side effects. The first few days of taking a medication is the period when any impairing effects are most likely to occur, and the user needs to take special care at this time, remaining aware that self-monitoring of performance as well as perceived side effects is needed.

4.2 Others with a responsibility for risk reduction are as follows:

- Where a medication is prescribed, the **doctor and pharmacist** have a duty to inform the user of any risks. However, this is not always done and for any general health professional, the special requirements of seafaring will not usually be well understood. It may sometimes be possible for an alternative and lower risk medication to be substituted for the original one.
- At the statutory seafarer medical examination, the **Approved Doctor** will enquire about ill health and any treatment and this will form part of the basis for the decision on fitness for sea service. However, as this is generally only carried out every two years, it can be expected that only long-term medication use will be detected and then sometimes long after it has started. The seafarer will also be advised, as stated on the reverse of the ENG 1 certificate, that if they are off sick for more than 30 days or if their medical fitness changes significantly, they should contact an Approved Doctor for medical review. Employers can also require seafarers to be re-assessed if they consider there may be any new health risk – including new medication.
- **Employers and operators** are able to introduce policies on medication use. These may vary from information, with responsibilities left to the individual, to a requirement in the contract of employment that a person taking any form of medication cannot go to sea until both the medication itself and the condition for which it is being used have been reviewed by a competent health professional. This may be coupled with a policy that any undeclared medication is considered contraband, resulting in disciplinary action if found.
- **Masters and senior personnel** – if the policy is for disclosure to be made to the Master, he/she is advised to inform the appropriate Head of Department or supervisor so that the seafarer's performance and response at work can be monitored.

5.0 Risk Management Options

5.1. **High level protection:** as in many airlines, train and bus companies, those directly responsible for safety-critical functions can be required, under their contracts of employment, to declare medication (prescribed or purchased, but for practical reasons with a limited list of exemptions such as simple analgesics and contraceptives) for use prior to departure and only be allowed to leave once clearance has been obtained from a health professional.

Such organisations have standing arrangements with their healthcare providers for rapid access to such advice, usually with safeguards for confidentiality. Much can be given instantly by reference to lists of medications and their side effects, but in complex cases medical or pharmacist's advice may be needed. A clearance certificate is then issued by the company adviser. Failure to comply with this requirement is treated in the same way as illicit use of other drugs or alcohol.

5.2. **Medium level protection:** most of the medications which are likely to pose a major risk or have wider safety implications will have the warning 'if using (or if affected) do not drive or work with moving machinery'. Declaration to the employer when any such medications are taken can be required or recommended as above. The person to whom they are declared will need to make a decision on whether a risk can be anticipated from the duties performed and then either seek further advice or act based on their appreciation of the situation. For other medications, a list of the types presenting potential problems of personal risk can be used to judge whether work at sea is acceptable (Appendix 1). This may be assessed either by declaration or by asking the seafarer to confirm on boarding the ship that the medication is not on the list

5.3. **Low level protection:** seafarers can be issued by the employer with a carry card (sample at Appendix 2) explaining that they undertake safety-critical work at sea, at a distance from health care facilities. They should show it to the doctor or pharmacist whenever any medication is prescribed or purchased, and obtain advice on its suitability or on any restrictions required. They should then transmit this information, either verbally, or by means of a form, or a letter from the health professional, to their employer prior to embarkation.

5.4. **No protection:** no special measures are put in place. This may be applicable in some circumstances, such as for personnel who are not involved in the running of the ship or do not have safety duties.

5.5 Experience ashore indicates that such systems work most effectively when any absences due to the use of impairing medication are treated in the same way as absences attributed to sickness. Any financial penalty for essential medication use will result in a low level of declaration or compliance with risk management arrangements or in failure to take required therapy.

5.6 Where medications are issued on board, from medical stores or the doctor's bag, the person issuing them will need to consult the product information to determine whether they pose any risks to the duties undertaken by the user. Advice from the radio medical advisory centres may be obtained if there is doubt.

6.0 Recommended actions

6.1 Operators, employers and masters **with input from masters and other senior personnel** as appropriate, should establish the required level of protection and, based on the above advice, put it into practice. In all cases, the need for confidentiality should be respected and arrangements should provide for disclosure to be made in privacy and dealt with sensitively and with discretion. Advice from a maritime healthcare provider or Approved Doctor may help at this stage and if a high level of protection is considered necessary, a continuing relationship with an accessible source of medication advice will need to be established. Referral for a statutory medical examination by an Approved Doctor will be appropriate if a full re-appraisal of fitness is indicated and this can be required by the employer at any time, where there is reasonable cause.

7.0 Sources of Help

7.1 Appendix 1 gives examples of medications with the potential to cause side effects that might significantly affect performance.

7.2 Appendix 2 provides a model for a carry card for seafarers, incorporating a declaration on any medication used.

Further Information

Further information on the contents of this Notice or any aspect of seafarer medical certification is available from the MCA at the address below.

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File Ref: MC 18/3/096

Published October 2005

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Printed on material containing minimum 75% post-consumer waste

*An executive agency of the
Department for
Transport*

EXAMPLES OF MEDICATIONS WITH THE POTENTIAL TO CAUSE SIDE EFFECTS THAT MIGHT SIGNIFICANTLY AFFECT PERFORMANCE

This is an indicative list only. In the case of doubt, advice should be obtained on the risks for the individual concerned.

1. Any medication which warns of drowsiness or advises not to drive or use moving machinery
2. Any injected medication, including insulin and epi pens.
3. Any medication for treating a mental health problem, including anxiety and depression.
4. All corticosteroids, whether oral, injected, inhaled or for skin treatment.
5. All hormone preparations except oral contraceptives and treatments for menopause.
6. All eye medications, local or oral.
7. Any treatment requiring regular laboratory monitoring – including warfarin (which will normally bar from work at sea).
8. Any prescription medication which needs to be held in reserve and used in the case of illness e.g. for mild asthma.

MEDICATION AT SEA - SAMPLE DECLARATION FORM

Side 1

Company Logo
SEAFARER MEDICATION ALERT
To the Seafarer
Show the reverse of this card to any doctor or pharmacist supplying medication.
If they give you any written or verbal warning on the treatment given and its suitability for use at sea, please pass it on to the Master of any ship you serve on, or your employer, company medical adviser or other (as appropriate)

Side 2

To the doctor or pharmacist
The bearer of this card is a seafarer, and:
<ul style="list-style-type: none">• works at sea, at a distance from medical care• may perform tasks where safety depends on alertness• in an emergency may have to undertake demanding physical tasks at short notice.
Before supplying any medication, please consider whether it could put the user's safety at risk, and if in doubt, give the seafarer written advice on relevant risks.