

**MINUTES OF THE MEETING OF
THE SECRETARY OF STATE FOR TRANSPORT'S HONORARY
MEDICAL ADVISORY PANEL ON DRIVING AND DIABETES MELLITUS**

HELD ON TUESDAY 20 March 2018

Present:

Dr I Gallen Chair
Prof M D Feher
Dr D Flanagan
Dr D J C Flower
Dr M Evans

Guest Speaker:

Dr Pratik Choudhary

Lay Members:

Mr K J Clinton
Dr M L Shaw

Observers:

Dr Sally Bell Chief Medical Officer, Maritime and Coastguard Agency
Professor Graham Roberts National Programme Office for Traffic Medicine, Dublin

Ex-officio:

Dr A Hemington-Gorse	Panel Secretary/Doctor, DVLA
Dr W Parry	Senior Medical Doctor, DVLA
Dr S Rees	Medical Doctor, DVLA
Dr J Morgan	Medical Doctor, DVLA
Emma Melrose	Drivers Medical Group, DVLA
Rachael Toft	Driver Licensing Policy, DVLA
Sue Charles-Phillips	Business Support, DVLA
Kay Bevan	PA to Emma Melrose and Dr Wyn Parry
Lorraine Jones	Panel Co-ordinator, DVLA
Sian Taylor	Doctors Support, DVLA
Tracey Bevan	HR Business Partner DVLA

Important: These advisory notes represent the balanced judgement of the Secretary of State's Honorary Medical Advisory Panel as a whole. If they are quoted, they should be reproduced as such and not as the views of individual Panel members.

1. Apologies for absence

Dr Clive Beattie, Northern Ireland DVA, Belfast

2. Minutes of the last meeting held on 10 October 2017

The minutes were accepted as a true account of the proceedings on 10 October 2017.

3. Matters arising from the minutes

There were no matters arising from the minutes reported at the meeting.

4. Review of the current medical standards including Assessing Fitness to Drive

Further to correspondence received to the panel chair and to the DVLA Medical team from the outside medical community, the panel reviewed the published group 1 standards for insulin treated Diabetes Mellitus in Assessing Fitness to Drive.

Concerns had been raised that both doctors and drivers were interpreting that a driver could return to driving if there had been no episodes of severe hypoglycaemia in the last 3 months without the need for DVLA medical enquiries. The DVLA clarified the process to the panel and that we would only issue a licence in these circumstances if we had received satisfactory medical reports from the treating clinician that they met all our standards for insulin treated diabetes.

The panel advised that assessing fitness to drive and the advice the DVLA gives to drivers needs to be clarified to explain the need for the DVLA's medical enquiries following severe hypoglycaemic episodes. Once these requirements are met, then a licence can be issued. It does not mean that after 3 months the driver can immediately return to driving. The DVLA's medical forms may need to be amended to explain the change.

The panel stated that the standards for group 1 insulin treated diabetes currently imply that 4 hours could pass between the first and second glucose checks at times relevant to driving. Panel's opinion remains that no more than 2 hours should pass between consecutive glucose measurements.

5. Continuous/ Intermittent interstitial Glucose Monitoring and Group 1 driving

Dr Pratik Choudhary gave a presentation to the panel regarding the current evidence surrounding the use of both continuous and intermittent interstitial glucose monitoring systems and how these systems could be used for glucose monitoring for driving. Continuous Glucose Monitoring Systems and Intermittent Glucose Monitoring systems measure glucose levels in interstitial fluid through a sensor worn on the skin. Some of these sensors and devices require calibration with blood glucose levels, whilst others do not. From the evidence supplied the panel was satisfied that these systems, significantly decrease the risk of hypoglycaemic episodes in users. The panel recognised that this is a rapidly developing area, and it is likely that many systems will be available over the coming years. They also offer useful additional information to drivers regarding trends in blood glucose levels that inform treatment decisions and of pending hypoglycaemic episodes. An amendment to the Motor Vehicles (Driving Licences) regulations 1999, which was implemented on the 1st of January 2018 has lifted the previous legal restriction to their use.

The panel agreed that these systems could be used to monitor glucose levels when driving. However before implementation, the panel and the DVLA would require an extraordinary meeting of the Panel to define how this would work in practice to cover all systems.

The DVLA acknowledged that there is considerable work needed by both the panel and the DVLA to implement our guidance to ensure road safety is maintained.. It is important that the news surrounding CGMS is communicated clearly and correctly to all key interested stakeholders. This will be communicated only via the DVLA's external communication department to prevent misinformation causing further unnecessary enquiries from outside organisations.

DVLA will provide an update in the next Panel meeting.

6. Group 2 drivers -glucose monitoring requirements.

Dr Mark Evans advised that some glucose meters used by group 2 drivers only display a limited amount of glucose readings, but that additional data is available to download from the device. The panel discussed this and felt that the DVLA should write to all of our independent assessors to ensure that they have full access to the appropriate data from these devices.

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7. Update on possible move to 5 year licensing for group 1 drivers on insulin.

The DVLA advised that the data analysis is at an advanced stage and will be available for panel discussion at the next panel meeting. The panel advised that it would be helpful to know how many drivers had their licences revoked in years 4 and 5 of a five year cycle and for what reason. Also the duration of their diabetes would be taken into account. Further action to be taken on this by DVLA and by Panel at the next meeting.

8. Definition of acceptable episode of hypoglycaemia whilst asleep for group 1 drivers.

Panel discussed correspondence from a diabetologist which expressed concern that some of their patients cannot distinguish a daytime hypoglycaemic attack from falling asleep, as they have no other symptoms of impending hypoglycaemia. However they supported the change to allow episodes of nocturnal hypoglycaemia

Panel agreed that for group 1 licensing purposes an episode of hypoglycaemia whilst asleep would usually be an episode in driver's normal sleeping hours and not at the initiation of sleep. The DVLA will consider appropriate wording to update its guidance.

9. Panel Recruitment update.

The DVLA confirmed that Dr Gallen has recently been confirmed as the Diabetes Panel Chair. It was also announced that a further recruitment campaign for panel members was to be launched in the immediate future to include both lay and medical panel members.

10.AOB

Dr Gallen advised that during his tenure as panel chair he hoped to review licensing standards for group 2 drivers who commence on insulin. Our current standards require a group 2 driver to take a minimum of 3 months off group 2 driving before we can issue a group 2 licence. This can lead to employment difficulties and reluctance for some group 2 drivers to start insulin therapy.

Dr Gallen also expressed a wish that the panel's opinion should be supported by an evidence base wherever possible.

11. Date of Next meeting:

16 October 2018

Original Draft Minutes prepared by: **Dr Alun Hemington-Gorse**
Panel Secretary

Date: 26th March 2018

Final Minutes signed off by: **Dr Ian Gallen**
Chair

Date: 24th April 2018

Dr A Hemington-Gorse
Panel Secretary