



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

Meeting held on Tuesday 17<sup>th</sup>  
March 2020 13:00pm

**Present:**

**Panel Members:**

Dr Ian Gallen (Panel Chair)  
Dr Mark Evans  
Dr D Flannagan  
Dr P Choudhary  
Dr D J C Flower  
Dr Peter Rogers (Lay Member)  
Mr. W Wright (Lay Member)

**OBSERVERS:**

Dr S Bell Chief Medical Officer, Maritime and Coastguard Agency  
Dr Graham Roberts National Programme Office for Traffic Medicine, Ireland

**EX-OFFICIO:**

Dr Nick Jenkins Senior Doctor, DVLA  
Dr John Evans Panel Secretary, DVLA  
Mrs. Rachael Toft Driver Licensing Policy , DVLA  
Mrs. Julie Bartlett Driver Licensing Policy, DVLA  
Mrs. Sharon Abbott Operational Delivery & Support Drivers Medical, DVLA  
Mrs. Lorraine Jones Panel Coordinator, Drivers Medical, DVLA  
Mr. Matthew Thomas Panel Coordinator Support, Drivers Medical, DVLA  
Mr. Iain McTaggart Drivers Services, DVLA  
Mrs. Sian Taylor Note taker, DVLA

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## SECTION A: INTRODUCTION

### **1. Apologies for Absence**

Professor Michael Feher	Panel Member
Dr Ewan Hutchinson	Civil Aviation Authority
Dr Colin Graham	Occupational Health Service, Northern Ireland
Mr. Andrew Jones	Head of Complex Casework, Drivers Medical, DVLA

### **2. CHAIR'S REMARKS**

DVLA and the Chair agreed that the meeting should proceed by way of teleconference in view of government guidance in travel during the current Covid-19 situation.

The Chair introduced Peter Wright, new lay member.

### **3. ACTIONS FROM PREVIOUS MEETING**

DVLA provided an update on the actions from the last meeting.

## SECTION B: TOPICS FOR DISCUSSION

### **4. Diabetic peripheral neuropathy Research Paper**

Altered accelerator pedal control in a driving simulator in people with diabetic peripheral neuropathy, Author Professor Dilwyn Marple-Horvat, available in Diabetic Medicine, published by John Wiley & Sons Ltd on behalf of Diabetes UK 2019

Panel to discuss the research paper published by Professor Dilwyn Marple-Horvat, regarding the three recommendations made to protect drivers who have diabetic peripheral neuropathy from the consequences of their nerve damage.

- i. They should drive a manual gear change car not an automatic so they can't inadvertently accelerate to the top speed of the vehicle
- ii. They should have a Sturdy VMS installed to limit inadvertent aggressive acceleration and prevent accelerating beyond the speed limit
- iii. They should have training with feedback to alert them to their altered driving and help them to drive more as they did before the DPN

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Panel discussed the research paper and agreed it would be helpful to view data linking diabetic peripheral neuropathy with accidents. Recommendations could not be made in the absence of such data.

## 5. CGMS Research Paper

Glucose Variations During Driving in People With Type 1 Diabetes Using a Continuous Glucose Monitoring System, Authors Laurent Silvan Schmied<sup>1</sup> and Henryk Zulewski, published in Diabetes Care Volume 42, July 2019,

To discuss the findings of research carried out to investigate the glucose levels of drivers using CGMS in real life circumstances.

DVLA asked whether the information provided should lead to any changes in published standards.

Panel agreed that no changes in current standards were required.

## 6. Hypoglycemia due to other causes

Hypoglycemia due to other causes: DVLA have received an increasing number of enquiries from health care professionals regarding hypoglycemia causes other than insulin-treated diabetes (e.g. post-bariatric surgery and eating disorders).

What criteria do panel consider would be relevant to be introduced to the published standard? Possible criteria for consideration derived from the case presentation and operational issues with such cases include:

- i. Frequency of testing glucose, for group 1 ( Car/Motorcycle) and group 2 ( Lorry/Bus)
- ii. Level of hypoglycemic awareness, such as previously defined for insulin treated diabetes standards of group 1 ( adequate) and group 2 ( Full)
- iii. Is a medical review licence appropriate where the condition giving rise to episodes of severe hypoglycemia persists e.g. bariatric surgery?

A relevant case was discussed and Panel was asked whether the current published standards should detail key factors that should be identified when considering such cases. Panel advised that the application of standards in such instances should be triggered by an episode of severe hypoglycemia. Panel advised that the level of hypoglycaemic awareness, frequency of glucose

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testing and, period of licence review required for group 1 and group 2 drivers be the same as that required for insulin-treated diabetes .

## SECTION C: ONGOING AGENDA ITEMS

### **7. Provoked Seizures**

Dr Jenkins, Senior DVLA Doctor provided the background to the issue of Group 2 licensing in cases of provoked seizures. Dr Jenkins referred to the discussion held in the Cardiology Panel the previous week, noting the Cardiology panel did not agree that a period of five years off driving in such cases was appropriate and agreed that a period of 2 years was more appropriate. There is currently a lack of robust evidence to inform decision making but Panel decided that the evidence that is available supported a reduction in time off driving from the current five year period to two years. Panel expressed their concerns as to the impact of the standard upon the livelihood of Group 2 drivers and felt it essential that further evidence is sought.

### **8. Group 2 application process for insulin treated diabetes**

There was insufficient time to discuss this item, this will now be deferred to the next meeting.

### **9. Duration of Group 1 licence for insulin treated diabetes**

Analysis of the current data does not support a change to the current licensing periods at present.

### **10. Cases for discussion Dr Nick Jenkins/Dr John Evans**

This case was discussed in agenda item 6.

### **11. Tests, Horizon Scanning, Research and Literature Panel Members**

DVLA reminded all panel members as part of the terms and conditions of the requirement to update panel about any information/tests/ research that could impact on standards or existing processes.

### **12. Panel Composition**

DVLA advised that the Chair and two other panel members tenures will soon be coming to an end. An update was provided on the recruitment process and Panel were asked if there was any specific expertise required.

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Panel requested Primary Care representation.

Panel discussed extensions to tenures and to overlap the next one or even two meetings especially due to the extraordinary circumstances, the last meeting was cancelled due to unforeseen circumstances, and today's panel was moved to teleconference due to the Covid19 pandemic. DVLA advised that ministerial approval would be needed to extend tenures.

The Senior DVLA Doctor informed the panel about the changes to the role of the panel secretariat. Panel noted the changes and agreed with the new arrangements.

This was the Panel Chairs last meeting, panel and DVLA thanked the Chair his enormous contribution to the panel and excellent work over the years.

### 13. AOB

Panel discussed the Covid19 situation and cancelling face-to-face clinics and moving towards remote assessments.

DVLA advised that consideration was being given to developing contingencies however; we still have to remain legal and have road safety at the fore front.

### 14. Date and Time of next meeting

Thursday 13<sup>th</sup> October 2020

<b>Original draft minutes prepared by:</b>	<b>Sian Taylor</b> <b>Note Taker</b> <b>Date:17/03/20</b>
<b>Final minutes signed off by:</b>	<b>Dr Ian Gallen</b> <b>Panel Chair</b> <b>Date: 01/04/2020</b>

THE DVLA WILL CONSIDER THE ADVICE PROVIDED BY THE PANEL AND NO CHANGES TO STANDARDS WILL TAKE EFFECT UNTIL THE IMPACT ON INDIVIDUALS AND ROAD SAFETY IS FULLY ASSESSED.

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