



MINUTES OF THE SECRETARY OF STATE FOR TRANSPORT'S  
HONORARY MEDICAL ADVISORY PANEL ON ALCOHOL, DRUGS AND  
SUBSTANCE MISUSE AND DRIVING  
Meeting held on Wednesday 14<sup>th</sup> October 2020 11:00am

**Present:**

**Panel Members:**

Professor E Gilvarry (Panel Chair)  
Professor K Wolff  
Dr J Marshall  
Dr S Morley  
Dr E Day  
Dr R Searle  
Dr A Brind  
Mr. A Elghedafi (Lay Member)

**OBSERVERS:**

Professor D Cusack	Director of Irish Medical Bureau of Road Safety, RCPI
Dr C Graham	Director, Occupational Health Service, NI
Dr S Bell	Chief Medical Officer, Maritime and Coastguard Agency
Dr M Trudgill	Chief Medical Officer, Civil Aviation Authority

**EX-OFFICIO:**

Dr N Jenkins	Senior Doctor, DVLA
Dr S Williams	DVLA Doctor
Dr A Holman	DVLA Doctor
Mr. David Snelling	DFT
Mrs. Helen Harris	Driver Licensing Policy, DVLA
Ms. Gwen Owen	Driver Licensing Policy, DVLA
Mrs. S Abbott	Operational Delivery & Support Drivers Medical, DVLA
Mrs. Lorraine Jones	Panel Coordinator, Drivers Medical, DVLA
Mrs. Suzanne Richards	Drivers Service Management, DVLA
Mrs. S Taylor	DVLA Note Taker

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## SECTION A: INTRODUCTION

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

Apologies were received from;

Miss S Oldham

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

The Panel Chair welcomed all attendees to the meeting. The Panel Chair acknowledged that the meeting in March was cancelled due to COVID 19 restrictions.

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

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

#### **3a Alcohol dependence, DVLA to consider updating the AFTD guidance**

The Panel had previously discussed DVLA's internal processes for dealing with alcohol dependence cases in the October 2019 meeting. The Senior Doctor advised that requirement to amend the published medical standard for Alcohol Dependence will be considered by DVLA.

#### **3b Polysubstance misuse – DVLA to identify suitable cases**

At the October 2019 panel meeting it was agreed that DVLA would collate suitable cases of polysubstance misuse. The medical standards will be discussed when cases have been identified.

#### **3C %CDT,**

The Senior Doctor advised that the contract with Synlab for CDT and toxicological services is now operational. There remains a need for clarification of assay methods used and reported upon. Panel members and DVLA will arrange to meet and discuss this with Synlab. Panel noted that the cut off level for CDT when considering alcohol dependence will now be the IFCC reference value upper limit of 1.7% and this supersedes the previous value of 1.6% previously agreed by the Panel.

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### **New reported Drugs**

DVLA presented a list of new substances to be included in the toxicological reporting. Panel discussed the required periods of time off driving for the various substances and agreed that a further meeting should be arranged to continue the discussion.

### **Provoked Seizures**

The DVLA Senior Doctor provided an overview of the situation regarding provoked seizures and the time required off Group 2 driving. Currently provoked seizures require a period of five years off Group 2 driving although there has now been agreement across Panels that the five year period should apply only to those seizures of Central Nervous System (CNS) origin.

Agreement has been reached that it will be appropriate to reduce the time off Group 2 driving to two years for those provoked seizures of non-CNS origin. The Neurology Panel plan to discuss the requirements for those seizures of cardiovascular origin further. DVLA will not make any operational changes to the standard until full agreement has been reached.

## **SECTION B: TOPICS FOR DISCUSSION**

### **4. COVID Recovery, DVLA Update**

DVLA provided an update on the impact that the COVID 19 pandemic situation has had on the Agency as a whole as well as on DVLA working practices.

The Senior Doctor advised Panel of the challenges faced during the COVID 19 situation, specifically in relation to processing alcohol, drugs and substance misuse cases and the lack of access to blood and urine tests and examinations. Panel were reassured that High Risk Offender (HRO) cases awaiting a licensing decision did not have legal entitlement to drive. Panel discussed the impact of possible social effects of the COVID 19 situation on HRO work in coming years

### **5. Subcutaneous depot formulation of buprenorphine**

DVLA received correspondence from a pharmaceutical company enquiring whether the published medical standard would be updated following advances in the area of buprenorphine maintenance programmes. The enquiry specifically related to the use of a subcutaneous depot formulation of buprenorphine.

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DVLA asked panel whether the introduction of this treatment preparation into clinical practice should lead to any changes in published standards.

Panel discussed and advised that the preparation is expected to yield positive results. Its use can result in greater stability with injections administered either weekly or monthly. This is expected to prove particularly useful during the social isolation required during the pandemic situation. The medication results in no sedation and is likely to become increasingly used in future clinical practice.

The current medical standard states that oral maintenance treatment only is permitted, although the use of naltrexone implants may be considered. Panel agreed that the standard should be reworded to allow for the consideration of subcutaneous long acting buprenorphine preparations.

## SECTION C: ONGOING AGENDA ITEMS

### **6. DFT Update, Mr. David Snelling**

Mr David Snelling provided an update on the proposed drug driving rehabilitation programme.

Panel discussed the drug driving scheme; Panel and DVLA will need to consider the future workload impact. Anabolic steroid use requires further consideration as there is increasing evidence regarding its impact upon driving ability.

There are currently no plans to reduce the permitted drink drive limit.

### **7. Tests, horizon scanning, research and literature**

DVLA reminded all panel members as part of the Terms and Conditions of their obligation to update panel about any information/tests/research that could impact on standards or existing processes.

### **8. Medicinal Cannabis**

Dr Morley presented details of a case in which he had provided DVLA with advice with regard to cannabis use. The problems encountered centred around the differentiation of medically prescribed Tetrahydrocannabinol (THC) from non-medically prescribed THC in the urine. DVLA advised they are receiving enquiries from representatives of medical cannabis clinics regarding the use of medicinal cannabis. It appears a lot of people are being referred to private clinics in addition to NHS Pain Clinics. Many of these people are still driving.

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DVLA asked whether the information provided should lead to any changes in published standards. Panel discussed and advised that as DVLA handle a low volume of such cases they should be assessed by panel on an individual basis.

## 9. Appeals

DVLA dealt with 351 appeals between 1<sup>st</sup> January 2019 and 1<sup>st</sup> July 2020. It was acknowledged that numbers had been impacted upon by the effect of COVID 19 restrictions. DVLA advised that Court services were now resuming, with cases often being heard virtually.

## 10. AOB

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.

## 11. Date and time of next meeting

**Wednesday 24<sup>th</sup> March 2021**

**Original draft minutes prepared by:**

**Sian Taylor**

**Note Taker**

**Date: 15<sup>th</sup> October 2021**

**Final minutes signed off by:**

**Professor E Gilvarry**

**Panel Chair**

**Date: 30<sup>th</sup> October 2020**

**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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