



## MINUTES OF THE SECRETARY OF STATE FOR TRANSPORT'S HONORARY MEDICAL ADVISORY PANEL ON DRIVING AND PSYCHIATRIC DISORDERS

Meeting held on Wednesday 11<sup>th</sup> October 2023

### Present:

### Panel Members:

Professor Robert Howard (Interim Chair)  
Dr Daniel Dalton  
Dr Andrew Byrne  
Dr Mary Fisher-Morris  
Dr Abrar Ibrahim  
Dr Katherine Jefferies  
Dr Nicholas Woodthorpe  
Mr Anthony Arcari (Lay Member)

### EX-OFFICIO:

Dr Nick Jenkins	Senior DVLA Doctor
Dr Sophie Davies	DVLA Doctor
Dr Kathryn Saunderson	DVLA Doctor
Dr John MacAdie	DVLA Doctor
Dr Alun Hemington -Gorse	DVLA Doctor
Mrs Keya Nicholas	Driver Licensing Policy Lead
Mr Leigh Andrew Bromfield	Driver Licensing Policy
Mr Michael Jones	Driver Licensing Policy
Mr David George	Drivers Medical Business Change
Mr Richard Davies	Service Management
Miss Danielle Theophilus	Service Management
Mrs Siân Taylor	DVLA Panel Coordinator/PA to the Senior DVLA Doctor
Mrs Katy Adams	DVLA Panel Coordination Team

**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.



## SECTION A: INTRODUCTION

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

Apologies were received from:

Professor Peter J Connelly	Consultant Old Age Psychiatrist
Dr Tania Jagathesan	Senior Medical Assessor, Civil Aviation Authority
Mr Nikhil Gokani	Lay Member
Dr Katherine Jefferies	Consultant Old Age Psychiatrist
Dr Ed Bebb	Head of Health and Wellbeing, Rail Safety & Standards Board
Dr Sue Stannard	Chief Medical Advisor, Maritime, and Coastguard Agency
Dr Maria Morgan	National Programme office for Traffic Medicine

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

The panel chair welcomed all attendees. The Chair advised attendees regarding the etiquette of digital meetings. The Chair reminded members to ensure their declarations of interest were up to date.

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

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

- i. **Cognitive Function and Driving Assessments Update**  
Update provided at Agenda item 4

## SECTION B: TOPICS FOR DISCUSSION

### **4. Cognitive Function and Driving Assessments**

Dr Mary Fisher-Morris provided a presentation on cognitive function and driving, the topic covered cognitive and neurological changes in healthy ageing and early dementia and how they relate to driving behaviour.

drivers.

The three research studies verified:

**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.



- i. Decision study established a large normative data set of how driving is influenced by cognition in healthy older adults.
- ii. The Sensor study, compared cognitive and biological differences between healthy older adults and those with MCI/early dementia in a smaller population sample and finally,
- iii. Indicate study established how the novel cognitive battery compares to current gold-standard driving fitness evaluation measured in real-world settings.

To conclude to Dr Fisher-Morris advised that the aim is to improve the understanding of how changes in cognition and the brain influence driving behaviour within healthy ageing and neuro degenerative disease. If found to be more accurate than current gold-standard measures, the novel cognitive battery may be adopted on a nationwide scale to improve driving evaluation protocols. The cut-off scores with clinical relevance for cognitive tests can be used by clinicians to establish appropriate timelines for driving evaluation.

Panel thanked Dr Fisher- Morris for her presentation.

## **5. Seizure Risk ref Clozapine and bus and lorry (Group 2) Licensing**

The Senior DVLA Doctor provided an update regarding advice by the Neurology Panel.

In the Spring 2022 panel meeting it was advised that Group 2 licence holders/applicants, who are prescribed atypical anti-psychotic medication require individual consideration about prospective seizure risk.

Clozapine appears to attract a higher seizure risk than do other atypical anti-psychotic medications. The level of risk is related to plasma levels of Clozapine, with particular risk associated with levels of 750 ng/ml or greater. At the time the Neurology Panel advised that such drivers/applicants who are prescribed Clozapine should be considered on an individual basis for Group 2 licensing with annual assessment, including consideration of plasma Clozapine levels. It would be appropriate for such consideration to be undertaken by a panel member.

Panel discussed testing plasma levels and ensuring clinicians were made aware, Panel advised they were in support of the Neurology Panel's recommendation.

## **6. Significant Suicidal Thoughts**

A letter was received by a panel member regarding significant suicidal thoughts. DVLA asked Panel whether the current Assessing Fitness to Drive (AFTD) guidance requires clarification.

**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.



Panel advised that the current standards do not require changing. Dr Jenkins discussed Section 88 of The Road Traffic Act 1988 and voluntary surrender of driving licences. Panel discussed communication to medical journals regarding voluntary surrender and Section 88 cover to drive.

DVLA thanked panel for their advice.

## SECTION C: ONGOING AGENDA ITEMS

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

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.

Panel members discussed the shortage of Attention-Deficit/Hyperactivity Disorder (ADHD) medication currently being produced. This may be due to the increase in diagnosis of ADHD and people receiving treatment. DVLA advised that drivers/applicants only need to notify of ADHD if they have concerns about their ability to drive safely.

Panel also discussed the way in which the diagnosis of Alzheimer's disease is changing in the United States of America (USA). The clinical and pathological diagnosis can detect the presence of Alzheimer's disease in the brain, decades before any symptoms are developed.

### **8. AOB**

#### **Call for evidence (CFE):**

DVLA provided an update and on the call for evidence on driver licensing for people with medical conditions. The CFE launched on the 31st July and closes on 22nd October 2023. This call for evidence looks to gather evidence from experts across organisations on a variety of topics. Responses to the call for evidence will be analysed to assist with reviewing the existing legislative framework. Responses will be used to identify areas where policy or legislative changes may be able to improve outcomes for drivers and other road users. Essentially the CFE will explore if there are opportunities to change the legislative framework on which the medical driver licensing process is based. DVLA welcomed responses from Panel members and reminded them of the closing date.

**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.



**9. Date and time of next meeting**

Tuesday 12<sup>th</sup> March 2024

**Original draft minutes prepared by:**

**Siân Taylor  
Note Taker  
Date: 11/10/23**

**Final minutes signed off by:**

**Prof. R Howard  
Interim Panel  
Chair Date:30/10/23**

**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.**

**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.