

# DVLA update on driving regulations for OSA

**If you are a driver with symptoms of Obstructive Sleep Apnoea (OSA) or a fleet operator unclear of the implications for drivers, please read the following explanation of the new DVLA guidance for Assessing Medical Fitness to Drive.**

Following discussions with the DVLA relating to the requirements for driving with OSA, there have been some changes to the guidance provided for medical professionals when assessing whether a patient should drive and or whether they should contact the DVLA.

## INFORMATION FOR DRIVERS

These changes mean that if a driver is diagnosed with OSA, but does not have excessive sleepiness having, or likely to have, an adverse effect on driving, they may continue to drive as normal and do not need to notify the DVLA.

If a driver has sleepiness that has an adverse effect on driving, and it is suspected that they might have OSA, they should stop driving but do not have to notify the DVLA until a diagnosis has been confirmed.

However, if OSA causing excessive sleepiness, that has an adverse effect on driving, is confirmed by a sleep clinic, the driver must stop driving and must notify the DVLA. If they have already been treated, and the symptoms have resolved, then the DVLA should not revoke their licence.

Sometimes the term OSA syndrome (OSAS) is used to mean OSA plus symptoms, usually sleepiness. The DVLA however are only concerned about symptoms that adversely affect driving (i.e. sleepiness).

You may see references to AHI (Apnoea/Hypopnea Index). This is a measurement that is referenced in the DVLA guidance. However the central focus for a medical professional in making an assessment should be based on excessive sleepiness and whether it has an adverse effect on driving.

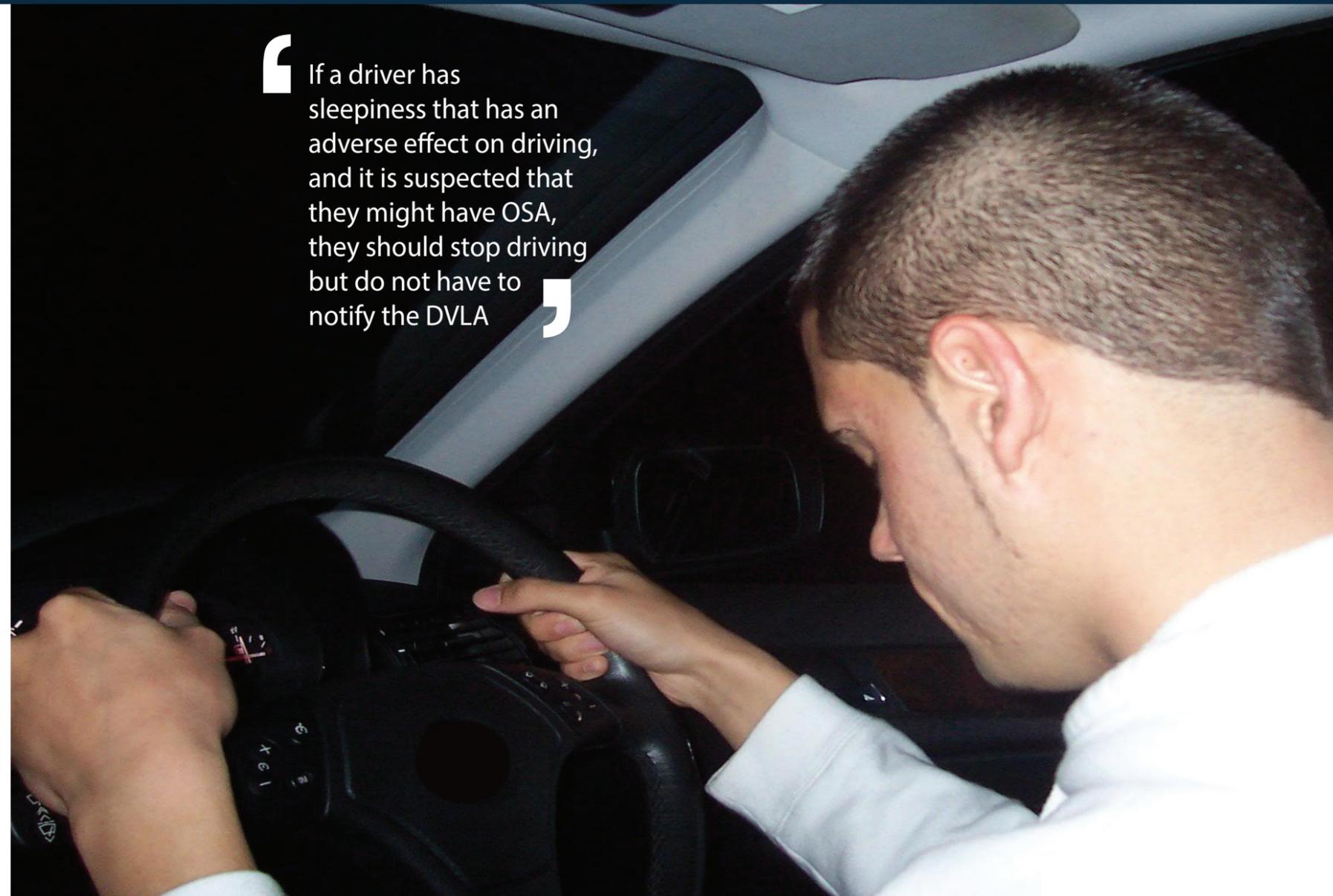
If a driver falls into one of the categories above where the DVLA needs to be informed, we recommend the following steps:

- If they are a professional driver, who relies on their driving licence for their livelihood, it is recommended that they mention this to their GP and ask that the GP contacts the local sleep centre to request fast-tracked treatment within four weeks. <https://cks.nice.org.uk/obstructive-sleep-apnoea-syndrome>

- Once OSA has been confirmed as the cause for sleepiness adversely affecting driving, regardless of whether the driver is a type 1 or a type 2 licence holder, it is recommended that they write to the DVLA (rather than calling the helpline number or using the online facility). The DVLA will send form SL1 or SL1V and this should be completed and returned. In the intervening time, the driver must stop driving and start the recommended treatment.

- Once this treatment is successfully controlling the symptoms, and the sleep unit has confirmed this, driving may start once again. Therefore on the form the DVLA sends (SL1 or SL1V), the driver can say the condition is controlled (tick the 'yes' box in 1.3) and there will be no need to withdraw the licence. As long as they comply with the treatment and the sleepiness resolves, the driver's licence will not be affected.

**“ If a driver has sleepiness that has an adverse effect on driving, and it is suspected that they might have OSA, they should stop driving but do not have to notify the DVLA ”**



## What is OSA exactly?

OSA is a condition which affects approximately 5% of the population, but which often goes undiagnosed. If you have OSA with symptoms, so called Obstructive Sleep Apnoea Syndrome (OSAS), and it is not treated, this can be very dangerous to your health. It can significantly reduce your quality of life and, when causing sleepiness or related symptoms, can be a risk factor for road traffic accidents. Sleepiness is implicated as a major contributory factor in up to 20% of motorway traffic accidents, and is associated with an increase in the severity of an accident, as driver reactions are impaired.

### Is Obstructive Sleep Apnoea Syndrome (OSAS) different to OSA?

OSAS is a more serious form of OSA where there is evidence of both a disruption of normal breathing patterns during sleep, and symptoms such as excessive sleepiness in the daytime. OSAS occurs in approximately a quarter of those with OSA.

If you suffer from OSAS, the pauses in breathing can happen hundreds of times a night, which most of the time you won't be aware of. This means you're getting less of the restorative kind of sleep required to enable you to work with the levels of energy and concentration. As a result, OSAS may affect your ability to drive safely.

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