



CENTRE FOR INNOVATIVE HUMAN SYSTEMS



Dementia and driving

Prof Desmond O'Neill



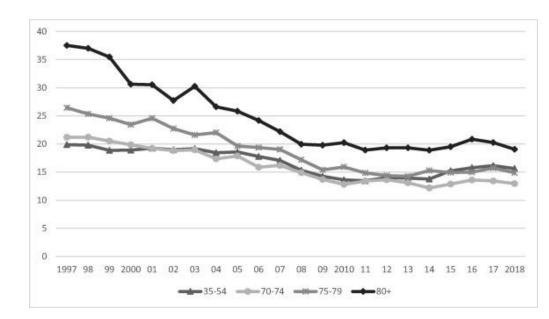






The 'paradox'

 Since the mid-1990s, fatal crashes per licensed driver trended downward, with greater declines for drivers ages 70 and older than for middle-aged drivers



Cox AE, Cicchino JB. J Safety Res 2021 Jun;77:288-295.

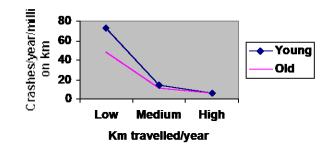






U-shaped curve?

- Older people drive less miles
- Drive on more risky roads
- Lower mileage intrinsically risky Crashes per year and distance



travelled









Risk of dementia for crashes

- Overall no clear indication of definite increase despite reduced driving performance
 - Chee et al, Am J Geriatr Psych 2017;25: 1376-90

- If declared to driver licensing agency halved!
 - Fraade-Blanar et al. Accid Anal Prev 2018;113:47-53
 - Dow et al. Ann Adv Automot Med 2013;57:57-66









- Dementia
 - Progressive condition
 - Cognitive deficits
 - Impairment of social/occupational function
- Mild Cognitive Impairment
 - Memory complaint
 - <1.5 SD cognitive test</p>
 - <u>No functional loss</u>

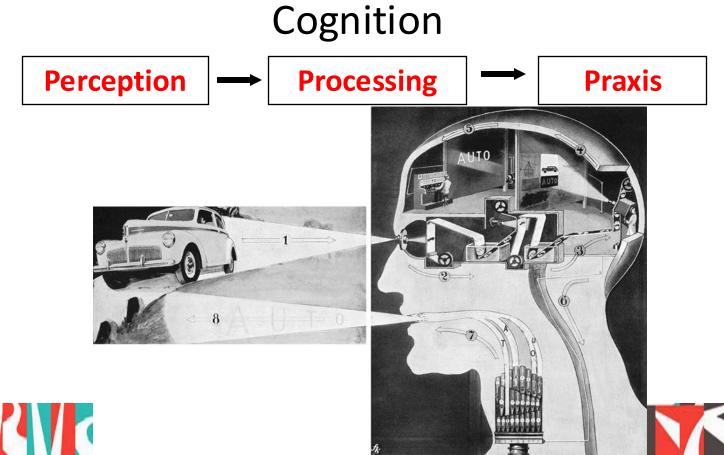






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Three stages

- Cognitive dysfunction
- Delirium/dementia
- AD/VaD/LBD/CJD...

Breathlessness

Cardiac failure

Ischaemic cardiomyopathy











• The biologically based diagnosis of Alzheimer's disease (AD) is meant to assist rather than supplant the clinical evaluation of individuals with cognitive impairment.

Received: 7 February 2024	Revised: 21 March 2024	Accepted: 4 April 2024	
DOI: 10.1002/alz.13859			Alzheimer's & Dementia [®]
RESEARCH ART	ICLE		THE JOURNAL OF THE ALZHEIMER'S ASSOCIATION



Revised criteria for diagnosis and staging of Alzheimer's disease: Alzheimer's Association Workgroup





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NINDS-ADRDA 2024 Staging

- 0 Asymptomatic deterministic gene
- 1 Asymptomatic positive biomarkers
- 2 Transitional decline minimal impact on daily function
- 3 Cognitive impairment with early functional impairment
 - detectable functional impact on complex ADLs (i.e., may take more time or be less efficient but still can complete
- Dementia with 4) mild, 5) Moderate, 6) functional impairment







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The most widely read and highly cited peer-reviewed neurology journal



| May 22, 2024



Predicting Driving Cessation in Alzheimer Disease

Performance Beats Biomarkers

1 This article has related content. VIEW RELATED CONTENT

Richard M. Dubinsky, MD, MPH, and Anthony C. Stein, PhD AUTHORS INFO & AFFILIATIONS

June 25, 2024 issue • 102 (12) • https://doi.org/10.1212/WNL.000000000209523











- Routine transportation inquiry
- Assessment
- Provisional decision pending full assessment
- Intervention(s)
- Societal obligations
- Review







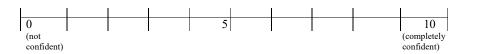


Adelaide Driving Self-Efficacy Scale (ADSES)

ID Number: _____ Date administered: _____

How confident do you feel doing the following activities?

Please allocate a number from 0-10, where 0 is not confident and 10 is completely confident, for the 12 questions below.



Collateral history

- 1. Driving in your local area:
- 2. Driving in heavy traffic: _____
- 3. Driving in unfamiliar areas:
- 4. Driving at night: _____
- 5. Driving with people in the car: _____







Cascade

- Clinical assessment
 - Neuro, Ophth, Musc-skel, Cognitive Screen
 - Epworth Sleep Apnoea Scale?
 - Collateral History
 - Drugs
- Occupational Therapy
- Neuropsych
- Specialist driving assessor
 - Social worker









Trichotomy

- MCI
 - No issue
- 'Mild' Dementia
 - On-road test
- Dementia clearly too severe for driving

- Cessation and alternative transportation strategies









Red Lights for dementia

- Loss ADL function
- Lost >2 IADL functions
- Collateral report impaired driving
- <u>></u>Moderate severity
- Behavioural disturbance

Current Psychiatry Reports (2018) 20: 16 https://doi.org/10.1007/s11920-018-0879-x

GERIATRIC DISORDERS (W MCDONALD, SECTION EDITOR)



An International Approach to Enhancing a National Guideline on Driving and Dementia

Mark J. Rapoport^{1,2} · Justin N. Chee^{1,2} · David B. Carr³ · Frank Molnar^{4,5} · Gary Naglie^{2,6} · Jamie Dow⁷ · Richard Marottoli⁸ · Sara Mitchell^{1,2} · Mark Tant⁹ · Nathan Herrmann^{1,2} · Krista L. Lanctôt^{1,2} · John-Paul Taylor¹⁰ Paul C. Donaghy¹⁰ · Sherrilene Classen¹¹ · Desmond O'Neill¹²





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On Road Assessment

Very helpful but subordinate to clinician judgement

6 monthly intervals







Modified Ulysses Contract







CrossMark



ELSEVIER	Available online at ScienceDirect www.sciencedirect.com	Elsevier Masson France EM consulte www.em-consulte.com/en	
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Research paper

Is driver licensing restriction for age-related medical conditions an effective mechanism to improve driver safety without unduly impairing mobility?

C. O'Byrne^a, A. Naughton^a, D. O'Neill^{a,b,*}

* School of Medicine, Trinity College Dublin, Dublin, Ireland ^b Trinity College Dublin, and National Programme Office for Traffic Medicine, Dublin, Ireland

- Official restricted licence
 - Speed
 - Daytime only
 - Distance

- Advisory •
 - Accompanied driving







Advise accompanied driving

but not

as a co-pilot!







Insurance and Licensing Authority

• Is disclosure a barrier to mobility?

Insurance companies do not seem to load disclosed and assessed dementia

• Non-disclosure may put patient at risk in terms of insurance cover and a legal penalty



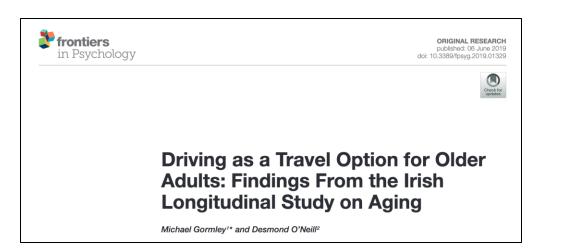






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Alternative transport











Dangerous driving a policing issue

- Misguided kindness to prioritize medical over policing approach
- Those who witness it should report it
- Breaching confidentiality must be effective
- Removing a licence may be meaningless









Age-based Medical Screening

- Ineffective
 - Even when Denmark added a cognitive test..
- Harmful
- Contravenes WHO guidelines on screening

O'Neill D. BMJ 2012;345:e6371









 The demand for certainty is one which is natural to man, but is nevertheless an intellectual vice

Bertrand Russell

