

Newcastle Regional Sleep Service

Driving regulations and obstructive sleep apnoea

Introduction

This leaflet explains the regulations around driving if you have excessive sleepiness caused by obstructive sleep apnoea (OSA). In English law, falling asleep at the wheel is a criminal offence potentially leading to a prison sentence. Because untreated OSA often causes sleepiness, the Driver and Vehicle Licensing Agency (DVLA) are rightly concerned to prevent accidents. It is assumed that sleepy people know they are sleepy, and therefore should not drive. Once OSA is treated, sleepiness is improved and driving can continue as usual.

We would strongly recommend you look at the **Sleep Apnoea Trust website** before any contact with DVLA <https://sleep-apnoea-trust.org>. They have expertise and can advise of practicalities regarding when and how to contact DVLA and driving advice.

What happens if a diagnosis of obstructive sleep apnoea has been made?

If you have been diagnosed with OSA, you will be offered an appointment to commence treatment, usually CPAP. There are DVLA rules that should be followed. If you have excessive sleepiness with OSA “having, or likely to have, an adverse effect on driving”, you should not drive. It is the driver’s responsibility to ensure they are fit to drive for every journey. If excessive sleepiness is an issue, the driver may prefer to avoid driving until treatment has been given.

The DVLA do not need informing when OSAS is “suspected”, only when confirmed on sleep study, but safe driving must be done regardless.

The sleep specialist will advise on whether driving can continue at all, or wait until after treatment. Please make us aware if you driver for a living or depend on driving for your employment or carer responsibilities, as we will prioritise your assessment if the driving rules above would restrict your ability to work.

What does the DVLA say?

The table on the next page outlines the current DVLA regulations:

‘Excessive sleepiness’ having, or likely to have, an adverse effect on driving includes:

- obstructive sleep apnoea syndrome of any severity
- any other condition or medication that may cause excessive sleepiness

You may think that the regulations are harsh but many conditions that lead to an increased risk of accidents lead to the suspension of driving licences, such as epilepsy, heart attacks, certain forms of diabetes, etc. If you are in any doubt you may contact the DVLA directly. The contact details are at the end of this leaflet.

Excessive sleepiness – including obstructive sleep apnoea syndrome

	Group 1 car and motorcycle	Group 2 bus and lorry
Excessive sleepiness due to a medical condition including mild obstructive sleep apnoea syndrome or medication.	<p>Must not drive.</p> <p>Driving may resume only after satisfactory symptom control.</p> <p>If symptom control cannot be achieved in three months the DVLA must be notified.</p>	<p>Must not drive.</p> <p>Driving may resume only after satisfactory symptom control.</p> <p>If symptom control cannot be achieved in three months the DVLA must be notified.</p>
Excessive sleepiness due to obstructive sleep apnoea syndrome – moderate and severe.	<p>Must not drive and must notify the DVLA.</p> <p>Subsequent licensing will require:</p> <ul style="list-style-type: none"> • control of condition • sleepiness improved • treatment adherence <p>The DVLA will need medical confirmation of the above, and the driver must confirm review to be undertaken every three years at the minimum.</p>	<p>Must not drive and must notify the DVLA.</p> <p>Subsequent licensing will require:</p> <ul style="list-style-type: none"> • control of condition • sleepiness improved • treatment adherence <p>The DVLA will need medical confirmation of the above, and the driver must confirm review to be undertaken annually at the minimum.</p>
Excessive sleepiness due to suspected obstructive sleep apnoea syndrome.	<p>Must not drive.</p> <p>Driving may resume only after satisfactory symptom control.</p> <p>If symptom control cannot be achieved in three months the DVLA must be notified.</p> <p>See above when diagnosis is confirmed.</p>	<p>Must not drive.</p> <p>Driving may resume only after satisfactory symptom control.</p> <p>If symptom control cannot be achieved in three months the DVLA must be notified.</p> <p>See above when diagnosis is confirmed</p>

What happens when a driver informs the DVLA that they have OSA?

We would strongly recommend you look at the **Sleep Apnoea Trust website** before any contact with DVLA <https://sleep-apnoea-trust.org>. They have expertise and can advise of practicalities regarding when and how to contact DVLA and driving advice.

First you receive a form called SL1. You can now complete this form online if you wish to. The Sleep Apnoea Trust however suggest all communication with the DVLA is done by letter, so you have a copy. SL1 asks what the diagnosis is and whether the condition is now controlled. We suggest you complete this form once you start OSA treatment, but ensure safe driving prior to this. **Please complete this form carefully.** The second part of SL1 asks for details of the doctors involved in the diagnosis and treatment, as well as requesting permission to approach them.

If there is a diagnosis of OSAS and you cannot say you are free of “excessive drowsiness”, then the licence will be revoked. Your licence will be returned once successful treatment is effective.

Following the return of SL1 to the DVLA, the sleep unit may get SL2, particularly for group 2 license holders. This asks the consultant what the diagnosis is, what treatment has been given, is the patient compliant with treatment, whether there are other conditions causing sleepiness, whether the patient continues to experience “excessive sleepiness”, and finally, whether there are any other conditions that might affect fitness to drive. If everything is satisfactory then this will mean that the DVLA is happy for you to continue driving.

There is also an option of surrendering the licence from the outset. This may provide an advantage when it comes to reapplying for a licence at a later date, **but is probably not necessary if safe driving is practiced and the guidance here followed.** If a licence has been surrendered as opposed to revoked, on reapplication for the licence there is the potential for cover to drive under section 88 whilst awaiting the outcome of the DVLA inquiry. However, if a licence has been revoked by the DVLA the driver would have to wait until a licence is reissued before returning to driving (and the DVLA medical inquiry may take a long time).

What about car insurance?

For many insurance companies, failure to notify the DVLA of a medical condition would invalidate the insurance. In the small print of car insurance policies there will be a statement that the insured must also inform the insurance company of any circumstances that might alter the terms of the insurance, often specifically stating health related issues. A diagnosis of OSA qualifies. Essentially an insurance company could use the fact that someone had not informed them of their diagnosis of OSA to refuse to pay up after an accident. If you are involved in an accident, even if the cause had nothing to do with sleepiness, the police are entitled to ask for medical information. If it turned out that OSS had been diagnosed, and not yet treated, then it might be very difficult both to prove you were not the guilty party and get the insurance company to pay. You should inform your insurance company at the same time as you inform the DVLA. This should not affect insurance premiums.

Contact details

Regional Sleep Investigation Service
Freeman Hospital
High Heaton
Newcastle upon Tyne
NE7 7DN
Tel: 0191 233 6161
(Monday to Friday, 9.00am to 4.00pm)
Email: newcastle.sleep@nhs.net

For further information

Drivers Medical Group,
DVLA,
Swansea,
SA99 1TU
Tel: 03007906806 (car, motorcycle),
03007906807 (bus, coach, lorry)
(8.15am to 4.30pm, Monday to Friday)

Directgov. Obstructive Sleep Apnoea and Driving:
http://www.direct.gov.uk/en/Motoring/DriverLicensing/MedicalRulesForDrivers/MedicalA-Z/DG_189498

Tiredness can kill – Advice for drivers INF 159
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/503534/INF159_150216.pdf

PALS (Patient Advice and Liaison Service) for help, advice and information about NHS services. You can contact them on Freephone 0800 032 02 02, email northoftynepals@nhct.nhs.uk or text to 01670511098.

Useful websites

If you would like further information about health conditions and treatment options, you may wish to have a look at the NHS Choices website at www.nhs.uk.

This leaflet is available in alternative formats on request by telephoning 0191 213 7219

