DVLA Update: Assessing Fitness to Drive

There have been a number of changes in the latest “Assessing Fitness to Drive” (AFtD) published January 2024.

Please check here for the latest version of the AFtD guide before advising patients.

I would recommend that you consider bookmarking the link on your clinic pc.

Here are some of the changes to the Neurology Guidance:

- **Narcolepsy**: Changes include details of specific requirements for on-road assessments. HGV/PSV drivers must remain under specialist follow-up. Should treatment be changed (e.g. due to pregnancy, or planning pregnancy) driving should cease until specialist opinion confirms stability.
- **TIAs**: If there is more than one TIA, one month off required after each TIA.
- **Brain Tumours**: Tumours are classified into four groups. Classification of risk relates not just to seizure risk, but also risk of recurrence, and/or deterioration.
- **Arachnoid Cyst(s)**: New standards, which refer to the site of the cyst(s), and if there has been any surgery.
- **Colloid Cyst**: Likewise new standards, which refer to the site of the cyst, and if there has been any surgery, and nature of such surgery.
- **Subdural Haematoma (not related to TBI)**: Standard simplified, need for surgery, or not, no longer a factor.
- **PRES and RCVS**: Grouped together, with same standards for both. If associated with stroke (haemorrhage or infarction) or seizures, then relevant standards for those conditions apply.
- **Dural AVF**: More granular standards now refer to whether there has been any haemorrhage, if there is any neurological deficit, and also the drainage pattern.
- **CAA related TNFEs (Previously called “Amyloid Spells”)**: New section with standards specific to this condition.
- **Provoked Seizures**: Definition has changed: the stimulus must be unlikely to reoccur. Also, the concession for provoked seizure, for Group 1 drivers, only now applies if there have been no prior unprovoked seizures, and in the absence of cerebral pathology. The situation therefore is:
  - Provoked seizure – no previous unprovoked seizure / nor pre-existing cerebral pathology: 6 months off Group 1 driving
  - Provoked seizure – with previous unprovoked seizure / or with pre-existing cerebral pathology: 12 months off Group 1 driving
  - For Group 2 the potential for earlier relicensing if it is felt risk may have fallen below 2% has been removed. (Colleagues therefore will no longer be asked about this)
- **Seizures associated with Syncope**: True seizures associated with cardiovascular syncope are considered “Provoked”, and Provoked Seizure standards apply. “Convulsive Syncope” (myoclonic jerks associated with syncope) is not considered an epileptic seizure, and relevant syncope standard applies.

Contacting DVLA Drivers Medical Group Advisors:

Phone number and fax numbers for the advice line have now been withdrawn. The best contact is via email at medadviser@dvla.gov.uk; alternatively, you can write to Drivers Medical Group, DVLA, Swansea, SA99 1DA. They can provide general advice on standards in England, Scotland and Wales (Northern Ireland has a separate driving agency) and specific driver using their reference number.

Any questions or clarification requests on AFtD should be directed to the DMG Advisors; please do not contact me personally.

Paul Cooper
Chair, Secretary of State for Transport’s Advisory Panel on Driving and Neurological Disorders.