Seizures

Driving-Related Fact Sheet For Medical Professionals



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A seizure is a sudden change in behavior that may range from loss of consciousness or body control to a mild subjective feeling, due to acute abnormal brain electrical activity. People who have had a seizure are generally at greater risk for another seizure than people who have never had a seizure. As a general rule, the longer the seizure-free period, the less likely a person is to have another seizure. Epilepsy is the common medical disorder characterized by recurrent seizures.

Effects on Driving

- NHTSA data shows that driver crashes related to seizure activity are rare. However, there is a small increased crash risk with those individuals who carry a diagnosis of epilepsy. Some seizure types such as simple partial seizures—which do not interfere with consciousness or motor control —and seizures that are unlikely to occur while driving (nocturnal seizures or those related to reversible illnesses) are less likely to have an impact on driver safety in comparison to grand mal events.
- The most common type of seizures are associated with epilepsy. Patients with epilepsy (seizure disorders) are at increased risk for motor vehicle crashes because of the seizure, the underlying condition causing seizures, or the side effects of anti-epileptic drugs. Epilepsy patients who have ongoing seizures are legally or medically prohibited from driving.
- Usually patients who are seizure-free for periods varying from 3 to 18 months are permitted to seek driving privileges, and many drive; the rules vary by State. How long a person has remained seizure free is helpful in predicting the risk of seizure recurrence. The annual risk of seizure recurrence is less than 2 percent after 8 years and less than 1 percent after 10 years.

The Clinician's Role

- Anti-epileptic drugs (AED) can produce side effects in some patients that may affect driving. Clinicians should monitor drug levels regularly and counsel these patients to restrict their driving until any side effects pass.
- Cessation of AEDs may lead to a new seizure. Counsel drivers who experience a seizure until therapeutic levels of AEDs are achieved.
- Seizures induced by the ingestion of alcohol or drugs must be followed by a 6-month period of abstinence before resuming driving.
- Counsel a patient who has experienced a unique seizure to cease driving until an investigation of the cause can occur. The person can start
 driving again if the neurological and cardiac investigations do not reveal a cause or if a treatable cause has been identified and the therapy
 is successful.
- Schedule an annual examination for patients with epilepsy. These controls can be relaxed based on a clinical assessment and side-effect profiles.

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