

Feedback from Stroke Society of Australasia and Australian and New Zealand Association of Neurologists on AFTD 2021 Draft and Interim Report

We note that the subarachnoid haemorrhage standard in the current draft is unchanged from AFTD 2016. We assume this is because there was not time to include the changes we suggested (below).

The reason for our suggested changes is that subarachnoid haemorrhage has a wide spectrum of severity and risk to driving ability. For example, subarachnoid haemorrhage found in association with reversible cerebral vasoconstriction syndrome (RCVS) would not, on its own, produce neurological impairment or increase the risk of seizures. The suggested changes to the 2016 wording in the text and table are shown below as tracked changes.

Subarachnoid haemorrhage

Text

Driving should be restricted if the person has had a subarachnoid haemorrhage. Aneurysmal subarachnoid haemorrhage has a high chance of associated neurological injury and high rates of post-SAH seizures. For such patients, a conditional licence may be considered after a minimum three-month non-driving period for private vehicle drivers and after at least six months for commercial vehicle drivers, taking into account the presence of neurological disabilities as described in Box 3. The vision standard may also apply (refer to section 10 Vision and eye disorders). If the person has had one or more seizures, the seizures and epilepsy standards also apply (refer to section 6.2 Seizures and epilepsy). If a craniotomy has been performed, the advice for intracranial surgery also applies (refer to page 102). A practical driver assessment may be considered (refer to Part A section 2.3.1 Practical driver assessments).

Minor Non-aneurysmal subarachnoid haemorrhage is associated with a range of underlying neurovascular conditions (for instance cerebral amyloid angiopathy, and reversible cerebral vasoconstriction syndrome) with differing symptom associations and risks. For such patients, assessment of fitness will depend on the underlying aetiology and presence of neurological disabilities as described in Box 3. The vision standard may also apply (refer to section 10 Vision and eye disorders). If the person has had one or more seizures, the seizures and epilepsy standards also apply (refer to section 6.2 Seizures and epilepsy). If a craniotomy has been performed, the advice for intracranial surgery also applies (refer to page 102). A practical driver assessment may be considered (refer to Part A section 2.3.1 Practical driver assessments).

Table

	Private standards	Commercial standards
Subarachnoid haemorrhage Refer also to aneurysms, page 100.	A person should not drive for at least three months after a subarachnoid haemorrhage. A person is not fit to hold an unconditional licence: <ul style="list-style-type: none">• if the person has had a subarachnoid haemorrhage.	person should not drive for at least six months after a subarachnoid haemorrhage. A person is not fit to hold an unconditional licence: <ul style="list-style-type: none">• if the person has had a subarachnoid haemorrhage.

	<p>A conditional licence may be considered by the driver licensing authority after three months and subject to periodic review, taking into account:</p> <ul style="list-style-type: none"> • the nature of the driving task; • information provided by the treating doctor about the level of impairment of any of the following: visuospatial perception, insight, judgement, attention, comprehension, reaction time, memory, sensation, muscle power, coordination and vision (including visual fields), and the likely impact on driving ability; and • the results of a practical driver assessment if required (refer to Part A section 2.3.1 Practical driver assessments). <p><u>This does not apply to persons with a minor non-aneurysmal subarachnoid haemorrhage (Refer to text)</u></p>	<p>A conditional licence may be considered by the driver licensing authority, after six months and subject to periodic review, taking into account:</p> <ul style="list-style-type: none"> • the nature of the driving task; • information provided by an appropriate specialist about the level of impairment of any of the following: visuospatial perception, insight, judgement, attention, comprehension, reaction time, memory, sensation, muscle power, coordination and vision (including visual fields), and the likely impact on driving ability; and • the results of a practical driver assessment if required (refer to Part A section 2.3.1 Practical driver assessments). <p><u>This does not apply to persons with a minor non-aneurysmal subarachnoid haemorrhage (Refer to text)</u></p>
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Stroke Table.

The wording that we suggested that appears in the Draft could be misunderstood: "...within 4 weeks following a stroke with no neurological deficit or residual minor symptoms that do not cause functionally significant impairment...". We suggest inserting a second "with" as follows: "...within 4 weeks following a stroke with no neurological deficit or with residual minor symptoms that do not cause functionally significant impairment..."

We note that "The person does not require a conditional licence." Has been removed from the end of the private standards in the Draft. We assume this was accidental, as it is important.

