Media Release
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Be above 5 to drive:
People with diabetes need to have safe blood glucose levels before they commence driving

Australians with diabetes who are at-risk of experiencing low blood glucose (or hypoglycaemia) should test their blood glucose levels before driving, according to new medical patient education guidelines released today by the ADS.

Launched amid calls in Europe for a total ban on driving by diabetes patients with a history of severe hypoglycaemia (very low blood glucose that impairs brain function), the new Australian ‘Diabetes and Driving’ Guidelines for health professionals and related Information Booklet for consumers, take a balanced view, and recommend for example that people with diabetes who are at risk of hypoglycaemia check their blood glucose levels before driving and every two hours during long haul trips.

Designed to minimise the risk of road accidents caused by ‘hypoglycaemic episodes’ the new Guidelines require people taking glucose lowering medication and insulin to always “check blood glucose before driving; carry fast acting carbohydrates; and carry a blood glucose meter” with them when driving.

They identify a blood glucose reading of above 5mmol/L before driving commencement, as being required to help people to be ‘safe to drive’ and to consider pedestrians and other road users.

“These Guidelines encourage people with diabetes to ensure they understand the risk of hypoglycaemia when driving and ways to prevent these episodes,” said ADS Past-President Stephen Twigg.

The new Guidelines will be unveiled at the Australian Diabetes Society & Australian Diabetes Educators Association Annual Scientific Meeting in Perth.

“We know that in some cases severe hypoglycaemia can lead to motor vehicle crashes causing death; fortunately these events are rare but there are coroner’s cases in Australia including across recent years where it was concluded that hypoglycaemia was the main cause of the crash leading to death”, said Associate Professor Twigg.

Australian and international research indicates that approximately ten to twenty per cent of people with type 1 diabetes and 1-2 per cent with type 2 diabetes will this year experience a severe hypoglycaemic attack, where blood glucose drops to a dangerous level and consciousness and judgement are impaired.

The Guidelines for healthcare professionals and information for people with diabetes, developed by the Diabetes & Driving Working Party on behalf of the Australian Diabetes
Society was funded by the National Diabetes Services Scheme. It was co-chaired across a number of years by two former ADS Presidents, Professor Stephen Twigg and Assoc. Prof. Maarten Kamp. The Working Party included members of the ADS, ADEA, Diabetes Australia and Project Officers who undertook detailed reviews of published literature and comparisons with international guidelines, to inform Guideline development.

“The message is clear – ‘Above 5 to drive’. We want people with diabetes to know that they need to feel well enough to drive and their blood glucose needs to be above 5 mmol/L to get behind the driving wheel,” said Associate Professor Twigg.

The Guidelines also recommend seeking medical clearance before driving after suffering a severe hypoglycaemic attack involving a loss of consciousness in any situation.

“Sometimes people are reluctant to report a severe hypoglycaemic attack for fear of having their licence suspended,” Associate Professor Twigg said. “Even if the hypoglycaemic attack did not happen in the car, it is important to get medical clearance before driving. This may involve the person not driving for six weeks or possibly more.”

Early warning symptoms of low blood sugar include trembling, sweating, light headedness, hunger, headache, palpitations and tingling around the lips. If any of these symptoms occur when driving, the Guidelines recommend safely pulling the vehicle over to the roadside, turning off the engine, and treating the low blood glucose immediately.

“Driving a vehicle when a hypoglycaemic episode strikes is extremely dangerous. It is the legal responsibility of the person with diabetes to inform their motoring authority that they are taking glucose lowering medication,” said Associate Professor Twigg.

While most people will recognise the early warning signs, some people with diabetes experience few or no early warning symptoms before a severe hypoglycaemic attack.

“Some people on insulin treatment, especially those with type 1 diabetes may become confused and lose consciousness without any warning, and this reinforces the need for safety, for the person with diabetes to actually test their blood glucose before driving” said Associate Professor Twigg. “Although it is the responsibility of the driver, family and friends should keep an eye out for any signs and symptoms that may not be obvious to the driver.”

The Information for the person with diabetes recommends carrying sweet food and a blood glucose meter in the vehicle at all times, informing the local driving authority of the condition, regularly reviewing driving fitness and considering the safety of other road users.

Other conditions associated with diabetes that may affect driving include poor eyesight, sleep apnoea, numb or painful feet and legs and heart disease. Each person with diabetes requires driving education by a qualified health care professional. An individual assessment is also required by a medical doctor/diabetes physician to grade risk and to help ensure that the privilege of driving is also a safe experience for all.

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To organise an interview with one of the Diabetes and Driving Co-Chairs Prof. Stephen Twigg or A/Prof. Maarten Kamp, or for a copy of the Guidelines please contact Mairead McLaughlin from Ethical Strategies on 0405 951 572 or mmclaughlin@ethicalstrategies.com.au.

About the ADS (Australian Diabetes Society)
The ADS is the peak medical and scientific body in Australia working towards improved care and outcomes for people with diabetes. The association’s members include medical graduates and scientist with an interest in diabetes as well as those with a primary role in professional diabetes care.

Ways in which the ADS strives to enhance the welfare of individuals who have diabetes include the dissemination of the latest developments in the treatment and management of diabetes to its members; developing in association with Diabetes Australia and other interested bodies, education methods designed to give those who have diabetes mellitus a better understanding of their condition.


About the ADEA (Australian Diabetes Educators Association)
The ADEA is the leading Australian organisation for health professionals who provide diabetes education and care. There are more than 900 credentialed diabetes educators working across public and private practices and hospitals in Australia.

The ADEA actively promotes evidenced-based best practice diabetes education to ensure optimal health and well being for all people affected by, and at risk of, diabetes. The ADEA considers diabetes education a specialty field of health care practice.

The ADEA accredits post graduate courses in diabetes education and management across Australia. It sets standards and develops guidelines for the practice of diabetes education. It supports diabetes educators’ delivery of quality diabetes education by offering and encouraging participation in its Credentialing and Re-Credentialing Program – a voluntary professional development and recognition program for full members.

The ADEA offers professional development events and activities and accredits those developed by other organisations.

For further information about the ADEA visit www.adea.com.au.