

CIECA Report Medical Fitness to Drive Dependence

Report covering the answers to the questionnaire
about medical fitness to drive and dependence
final / June 2019

CIECA Topical Group on Fitness to Drive
Sub group 2: Setting Standards for the Evaluation of Medical Fitness to Drive
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1. INTRODUCTION

This report summarizes the answers in the questionnaire regarding “Dependence – alcohol – drugs - medicines” which was sent to 31 countries within Europe (Questions 1 – 9 below). Responses were provided by 18 countries (Austria, Belgium, Czech Republic, Denmark, Estonia, Finland, France, Germany, Great Britain, Hungary, Ireland, Luxembourg, Netherlands, Norway, Northern Ireland, Portugal, Spain and Sweden), although some of the countries did not answer all the questions. The questionnaire was not answered at all by 13 countries. The countries who did not answer some of the questions or where the answers needed further clarification was contacted again and in some cases an answer or clarification was received.

Based on the responses to the initial questionnaire, a supplementary questionnaire was also devised to further clarify emergent issues (Question 10).

Part two of this report lists the questions sent to the countries and the answers received. Part three contains a conclusion concerning fitness to drive and vision, based on the answers.

2. SUMMARY/OVERVIEW

Answer to questions in the questionnaire “Dependence-Alcohol-drugs-medicines.

2.1. Regulation/Guidelines

Question number 1 – Are there any regulations / medical and psychological guidelines in your country about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems?

Sixteen of the 18 countries (89%) that responded reported that they have regulations / medical and/or psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems formulated in a law or driving licence ordinance.

Some countries reported that they have additional special/concrete guidelines for assessments for instance:

Finland	Guidelines for physicians – Trafi
Germany	Evaluation of driving fitness – Assessment criteria (ISBN: 978-3-7812-1894-9)
Great Britain	Secretary of State for Transport’s Honorary Medical Panel
Ireland	Fitness to Drive Guidelines for physicians
Netherlands	Guidelines for examiner specialists
Norway	Regulations from the Norwegian Directorate of Health in cooperation with the Norwegian Public Road Administration
Portugal	Decree-Law 138/2012 with specific medical and psychological procedures
Spain	Protocol of medical-psychological assessment with standards.
Sweden	Regulation with requirements of fitness to drive including a chapter with issues about substance misuse from Swedish Transport Agency

2.2. Notification of substance (e.g. alcohol and drugs) use/misuse?

Question number 3 - How are substance (e.g. alcohol and drugs) use/misuse notified to the driver licensing authorities in your country?

Fourteen responding countries (72%) addressed this question. The means of notification that are used frequently are via Medical Professionals (5), followed closely by the Police (4) and self-report (3). In Spain, the authorities are notified by the Driver Assessment Centre. In Belgium drivers are not required to notify the authorities if they receive an unfavorable result from a medical fitness to drive assessment made by their doctor (Figure 1).

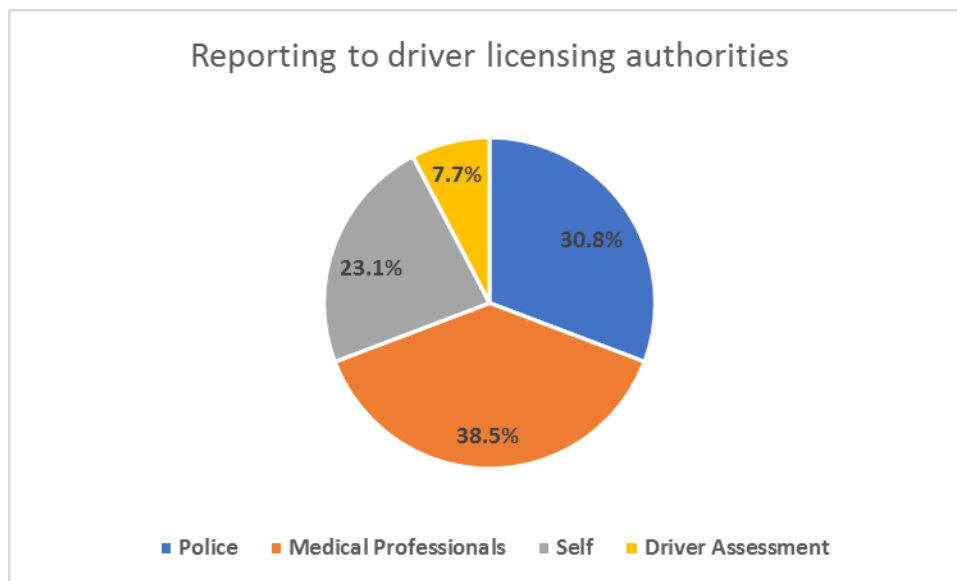


Figure 1. Reporting to driver licensing authorities.

2.3 Decision to revoke a driving licence

In the 12 countries that responded directly to this question the decision to revoke a driving licence is done by the driving licence authority. This can be the local driving licence authority, the police, road safety authority etc.

Four did not provide a clear indication of which experts or deciding authority is involved in their jurisdiction and one failed to answer the question.

2.4 Decision that an assessment is necessary

In most of the countries the decision is made by physicians or medical experts. Sometime the decision is done by the police based on recommendations of physicians.

In Denmark the Danish Health Authority / Police and in Sweden the Swedish Transport Agency decides the necessity. In Germany the driving licence authority or a court decides the necessity of an assessment.

2.5 Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor

Question number 2 – Who is primarily responsible for assessing medical fitness to drive where substance (e.g. alcohol and drugs) misuse is a factor?

Fifteen of the countries (83%) reported that medical experts including Physicians, driver's medical group, medical commission, medical board are primarily responsible for the assessment. Almost half of these (7) rely on solely on medical panels. Six rely on GPs/physicians and four use Psychologists or Psychiatrists. One country reported that no specialist is specified in their regulations and two countries did not respond to this question (Figure 2).

In Germany a psychologist and a medical doctor working together are primarily responsible for the assessment. In Spain a Driver Assessment Centre (CRC) is responsible for the assessment.

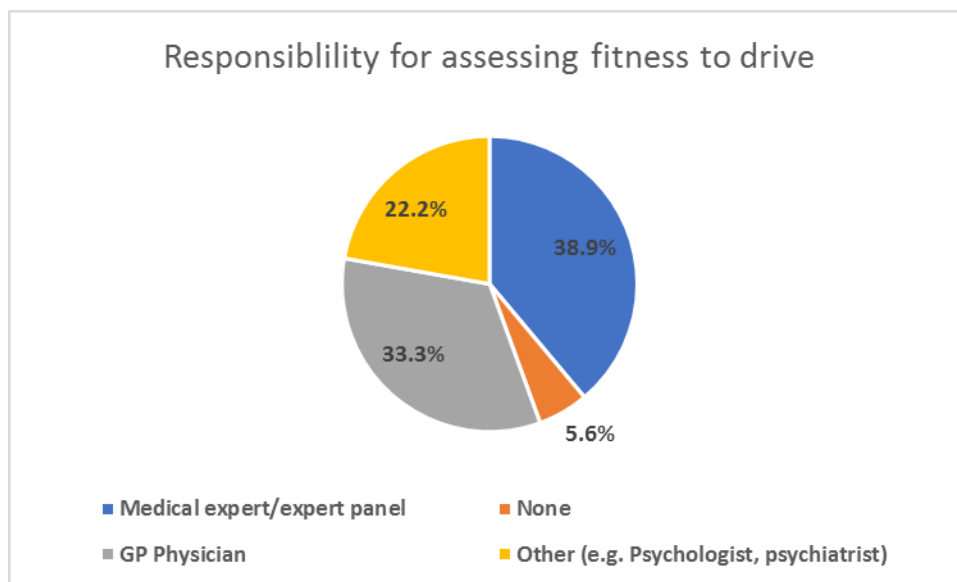


Figure 2. Responsibility for assessing fitness-to-drive.

2.6 Support from other professions

The support from other professions differed across responding countries. Following professions are involved:

- Psychologists /Traffic Psychologists
- Neuropsychological driving practical
- Health care professionals
- Independent or specialist physicians
- National Office for Traffic Medicine / Emergency Medicine Physicians (IRE)
- Psychiatrist
- Specialized centre for person with substance use/misuse problems

2.7 On-road assessments

Question number 4 - Are on-road assessments used to assess medical fitness to drive for people with substance (e.g. alcohol and drugs) use/misuse conditions?

Six responding countries (one-third) including Austria, Belgium, Denmark, Finland, France and Germany reported that they have on-roads assessments in certain circumstances.

The professionals involved in the on-road assessment process were reported as follows;

- Austria - Medical and technical experts
- Belgium – Medical and where relevant neuropsychological. Note this refers to off-road rather than on-road testing
- Denmark - Medical doctors and the Danish Patient Safety Authority
- Finland - Police and if test is positive, healthcare professionals
- France - médecins agréés
- Germany - Traffic Psychologists

Description of the on-road driving assessment process

- Austria - Observing practical on-road driving skills
- Belgium – The response provided referred to off-road rather than on-road testing
- Denmark - 60-minute practical driving test involving multiple traffic situations
- Finland - The response provided referred to off-road rather than on-road testing
- France - médecins agréés
- Germany - The response provided did not refer to on-road testing.

The authors concluded that these questions related to on-road testing were poorly understood by the respondents for two reasons (1) the response rate was very low and (2) those who did respond did not seem to make the differentiation between off-road and on-road testing.

2.8. Specialized medical teams within the healthcare systems that carry out assessments

Question number 5 - Do you have specialized medical teams within the healthcare systems that carry out assessments of medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems?

Just 2 of the 18 countries involved in this study responded positively to this question. Fourteen reported that they do not have such teams performing Fitness to Drive assessments in relation to substance use/misuse cases. Two countries did not answer this question.

Some of those who responded negatively provided some detail:

- Austria - authorities have the experts themselves
- France - drivers can be compelled to undertake an addictology consultation (CSAPA), mandatory in some cases. Possibility for an interlock.
- Germany - Not in the health care system but as certificated private companies after being licensed for this task by Federal Highway Institute in Germany. You have to have a quality-management system and the institute has to obey legal requirements with regard to the examination tasks and there are different requirements due to basic and further qualification along with quality management audits. Each expert needs 3 days of further education/training each year.

2.9. Mechanism to restore the driving licence after revoke

Question number 7 - Are there any mechanisms whereby drivers with substance (e.g. alcohol and drugs) use/misuse problems can either retain their licence or get it back more quickly if they comply with certain conditions, e.g. alcohol interlocks, alcohol interlock programs or alcohol advanced courses?

In some countries it is possible to restore the driving licence when a responsible physician decides that there is no lack of fitness to drive anymore.

- In Belgium a person must show six months of proven abstinence.
- In Luxembourg a hair test must show that the person is clean of drugs/alcohol misuse.
- In Denmark a person must pass a driving test.
- In Finland it is also possible to apply to the court.
- In the Netherlands it is based on the decision of a physician from CBR (Centraal Bureau Rijvaardigheidsbewijzen - CBR is the Dutch Driver and Vehicle Licensing Centre) and an examination by a psychologist.
- In Norway in strong cases the person must pass a driving test in theory and practice.
- In Germany the person needs a Medical-psychological assessment with a positive result.

Additional questions (answers from: Austria, Belgium, Denmark, Finland, France, Germany, Great Britain, Hungary, Ireland, Luxembourg, Norway, Spain, Sweden and Switzerland)

A supplementary questionnaire was developed in an effort to flesh out some of the issues that emerged in the responses that were submitted to the original questionnaire. This too was circulated to all 31 CIECA member states and forms were returned from 11 countries containing at least some responses. These include Austria, Belgium, Denmark, France, Germany, Great Britain, Hungary, Ireland, Norway, Sweden and Switzerland.

Do you have regulations or guidelines about the time period needed to prove sobriety/abstinence once a diagnosis is made (Yes or no)?

Ten Countries reported that they do have such regulations or guidelines: Austria, Belgium, Denmark, France, Germany, Great Britain, Ireland, Norway, Sweden and Switzerland have regulations or guidelines. One Country, Hungary, does not have such guidelines. Some additional detail was also provided by some countries for instance:

In France it is called "repérage précoce et intervention brève".

Finland has no regulations or guidelines, but physician should consider giving driving ban lasting at least one month when alcohol dependency is diagnosed. If misuse of alcohol continues the driving ban should be prolonged. If a person with alcohol misuse problem can't change his/her behaviour a driving ban is needed

In Spain the periods are not regulated in the norm and the incorporation to driving is done with a favourable report of the professionals that treat the patient in which the clinical stability, the absence of relapses, etc. are taken into account (Please see remarks Q6).

If yes, do you differentiate between misuse and dependency of alcohol in these regulations (yes or no)?

Seven of the respondents indicated that they differentiate between alcohol misuse and dependency in their regulations including Austria, France, Germany, Great Britain, Ireland, Spain and Switzerland

If yes, is the time needed to prove sobriety/abstinence different between a diagnosis of dependence or misuse of alcohol?

Six countries, Austria, Germany, Great Britain, Ireland, Norway and Switzerland, answered that the time needed to prove sobriety/abstinence is different between dependence and misuse.

If yes, how long is the time needed to prove sobriety/abstinence?

Six countries including Austria, Germany, Great Britain, Ireland, Norway and Switzerland, answered that the time needed to prove sobriety/abstinence is different between dependence and misuse.

In the case of ***dependence*** in Austria, Belgium, Norway the time will be 6 months, in Germany, Great Britain and Switzerland the time will be 12 months. Ireland difference between group 1 (3 months) and group 2 (three years).

In the case of ***misuse*** in Belgium, Great Britain, Norway and Switzerland the time stipulated is 6 months. In Germany the time required is 6 months in some cases 12 months. Ireland differentiates between group 1 (3 months) and group 2 (12 months).

To prove sobriety/abstinence and get the license back, do your licencing guidelines specify biomarkers in blood (Yes or no)?

Only Austria, Luxembourg, Norway and Sweden specify biomarkers in blood. In these cases, CDT (Carbohydrate deficient transferrin), but not in Norway, Transaminases (GOT and GPT or ASAT and ALAT), GT (Gamma-Glutamyl Transferase GGT), MCV (Mean Corpuscular Volume) are biomarkers. In Norway and Sweden also PEth (Phosphatidyletanol) is a biomarker. In Belgium these biomarkers should be present in the lab rapport.

In France it is possible if the medicine agrees. Than CDT, GT and MCV are biomarkers. Germany and Norway have additional explanations about biomarkers.

In Luxembourg and Switzerland a hair-test can also be performed.

In Austria, Belgium and France the license applicant knows exactly when the testing will be done. In Luxembourg, Norway and Sweden the license applicant does not know this. Only Norway and Sweden give clear answers about the number of tests in a period of six month.

Do you have a definition on what sobriety/abstinence means in the process of proving it?

Only Austria, Denmark, Germany, Great Britain, Norway, Sweden and Switzerland have a definition.

Diagnosis of dependency is highly prevalent among persons committing drunk driving offenses. Does your country have regulations to check sobriety/abstinence within this group before getting their license back, even though no medical diagnosis is made?

Only Belgium, Finland, France, Great Britain, Ireland, Sweden and Switzerland have regulations, but these regulations are very specific and not comparable.

Once a person with an alcohol dependency gets his license back, do you get it back with a condition on further testing?

In Austria, Belgium, (Denmark), Finland, France, Great Britain, Luxembourg, Norway, Spain, Sweden and Switzerland this is possible. In Germany it is forbidden by law.

If yes, for how long is there a condition on further testing?

It differs between the named countries between 6 months and 5 years.

If yes, do the conditions differ from the period when you prove your sobriety/abstinence?

Only in Norway and Sweden do the conditions differ based on a health or medical certificate.

If yes, please describe how the conditions differ from the period when you prove your sobriety/abstinence.

Norway: Health requirements met after six months where monthly follow-up shows abstinence and normalization of biological specimens reflecting alcohol consumption.

- A health certificate can then be issued with a recommendation on driver's license with duration of up to one year at a time for three years, provided that the minimum quarterly follow-up shows controlled use.
- A health certificate can then be issued with a recommendation for a driver's license with up to five years' duration, before it can be given with normal duration.

Sweden: Condition under the period when you prove your sobriety/abstinence are a medical certificate after at least 6 months. Testing of mandatory biomarkers CDT and GT are included at least four times during this period.

Condition on further testing when you have your licenses back are medical certificate after 6 months, after 12 months and then after 24 months. Testing of mandatory biomarkers CDT and GT are included at least four times during respective period.

2.10. Mechanism to retain the licence more quickly

In some countries it is possible to retain the driving licence more quickly under certain conditions:

Austria, Denmark, Finland, France, Sweden	Alcohol interlock system
Denmark, France	Alcohol interlock with courses
Germany	Alcohol/Drugs courses
Portugal	Training action (National Road Safety Authority)
Spain	Penalty Point System

2.11. Follow up after regaining the driving licence

Question number 9 - How are drivers with substance (e.g. alcohol and drugs) use/misuse problems followed up in your country after regaining licence?

The results of the survey showed that a wide variety of mechanisms are used to check on drivers with substance misuse problems after they have regained their licence. Thirteen of the eighteen countries that responded to the survey answered this question (72%). Six countries indicated that licence durations are restricted, five reported restricted licensing accompanied by medical certification and two indicated that no specific restrictions are imposed (Figure 3).

- Restricted duration licences (ranging from 6 months to 3 years): Belgium, Denmark, Finland, Great Britain, N. Ireland, The Netherlands
- Restricted duration licences with medical certification: Austria (liver test) Portugal, Spain (psychiatrist/psychologist), Luxembourg (hair test),
- No specific restrictions: Germany, Ireland

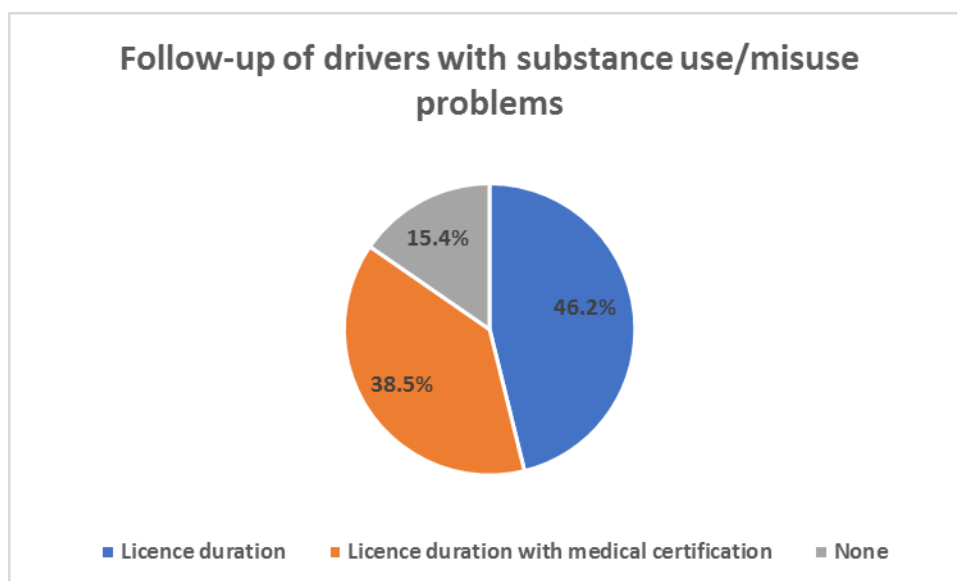


Figure 3. Follow-up of drivers after regaining their licence.

3. CONCLUSION

The responses from the different European Countries to the questionnaire have shown that the procedure to make the decision to revoke a driving licence because of use/misuse problems with substance (e.g. alcohol and drugs) is heterogeneous. There are big differences e.g. in the regulations, in the responsibilities to revoke a driving licence, the revealed indications and e.g. in the involved professions.

Related to the historical or culture backgrounds of the different European Countries it will not be possible to find minimum standards for Europe in the moment, because of the heterogeneous procedures.

- The answers to question number 1 have shown that there exists a discrepancy in the regulations from e.g. no clear definition of abuse/misuse problems with substance to clear definition regulated in different manuals.
- Also, the response to question 3b shows that there are lots of differences in the responsibility to make the decision to revoke a driving licence.
- The response to question 6 shows that wide range of specialist are involved in making decisions about the medical fitness to drive.
- Some countries have an on-road assessment, some countries not and some countries have not answered.
- The additional questionnaire about regulations or guidelines about the time period needed to prove sobriety/abstinence once a diagnosis is made shows also that there is a big difference in Europe. Some countries have regulations, some do not. The existing regulations are partly comparable, but not at all. The responses also showed that there is a wide range of regulations in force currently.
- In twelve countries it is possible to retain the driving licence more quickly under certain conditions (e.g. alcohol interlock systems, courses or training actions), in other countries this is not possible.

These examples show that it will not be easy to find clear recommendations for Europe.

4. RECOMMENDATION

It should be possible nevertheless to find best practices through discussions between representatives from the different European Countries and to publish them as a toolbox for Europe. With this toolbox every European Country can decide to change the own system or to add some aspects into the own system.

Annex

Austria

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Same law and guidelines as for all other diseases
<i>Who decides to revoke the driving licence?</i>		The authority has to revoke for the duration of lack of FTD based on the decision of the medical expert of the authority
<i>Who decides that an assessment is necessary?</i>		Medical expert at the authority
<i>revealed indication</i>		Decision of the medical expert of the authority, on occasion an additional certificate from a medical specialist
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Medical expert of the authority
<i>Support from other professions</i>		Psychologists
<i>Mechanism to retain the licence or get it back more quickly</i>		(no), but the Austrian interlock program is not related on the medical side of the driving licence system, but a measure to shorten a part of the withdrawal period
<i>Mechanism to restore the licence after revoke</i>		When the applicant has got an additional medical certificate, that shows that there is no more a lack of FTD because of substance misuse
<i>Follow up after regaining the driving licence</i>		It can be made the obligation to bring certificates
<i>On-road assessment</i>		Yes, on occasion (medical and technical expert)

Belgium

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		The definition of abuse/misuse is not clear
<i>Who decides to revoke the driving licence?</i>		Local Driving licence authority, if the patient present the certificate from CARA
<i>Who decides that an assessment is necessary?</i>		Strictly medical issue. The decision is left at the discretion of the MD. He can declare unfit to drive or refer to CARA
<i>revealed indication</i>		Decision of each MD clinical evaluation; clinical signs of abuse, misuse, lab results
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		No specialist specified
<i>Support from other professions</i>		Medical, neuropsychological driving practical
<i>Mechanism to retain the licence or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		MD have to state that someone has completed six months of proven abstinence
<i>Follow up after regaining the driving licence</i>		Limited time validity of the FTD certificate (max. 3 years) – not sure that this is common applied
<i>On-road assessment</i>		Yes, when referred to CARA, this is the case

Czech Republic

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Yes (it is assessed during the general fitness to drive assessment)
<i>Who decides to revoke the driving licence?</i>		Competent administrative driving licensing authority
<i>Who decides that an assessment is necessary?</i>		The assessing physician issues a medical assessment of FTD after assessing the patient's medical condition by the medical examination, the patient's declaration and the results of further professional examinations
<i>revealed indication</i>		
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Physician
<i>Support from other professions</i>		Psychologist
<i>Mechanism to retain the licence or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		The driver can apply to revoke the driving licence at the competent administrative authority. Under certain conditions the driver must make a psychological examination
<i>Follow up after regaining the driving licence</i>		
<i>On-road assessment</i>		no

Denmark

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		yes
<i>Who decides to revoke the driving licence?</i>		Road Administration
<i>Who decides that an assessment is necessary?</i>		The Danish Health Authority / Police
<i>revealed indication</i>		Urine samples for a period of time (6 samples in a period of six month)
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Physician
<i>Support from other professions</i>		Specialist physician, Police, Danish Patient Safety Authority
<i>Mechanism to retain the licence or get it back more quickly</i>		Alcohol interlocks (optional and mandatory) and alcohol, drugs and traffic courses
<i>Mechanism to restore the licence after revoke</i>		After the period of withdrawn is expired. The person most concerned completes a driving test.
<i>Follow up after regaining the driving licence</i>		When abstinence, the Danish Patient Safety Authority may recommend that the driving licence can be issued for 2 years. After two years a physician must renew a medical certificate
<i>On-road assessment</i>		yes (indicative health driving test)

Estonia

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Law and regulations Traffic Law § 101-102
<i>Who decides to revoke the driving licence?</i>		Road Administration
<i>Who decides that an assessment is necessary?</i>		
<i>revealed indication</i>		
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Physician
<i>Support from other professions</i>		
<i>Mechanism to retain the licence or get it back more quickly</i>		
<i>Mechanism to restore the licence after revoke</i>		
<i>Follow up after regaining the driving licence</i>		
<i>On-road assessment</i>		

Finland

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		The Finnish Transport Safety Agency (Trafi) has published obligatory driving health assessing guidelines for physicians
<i>Who decides to revoke the driving licence?</i>		Police
<i>Who decides that an assessment is necessary?</i>		Police based on the note of physician
<i>revealed indication</i>		Physicians assess the fitness to drive. They can consult specialists if needed Breath alcohol test, drug test from saliva
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		All physicians are obligated to notify the police. Also, nurses have the right to notify the police.
<i>Support from other professions</i>		Specialists, health care professionals
<i>Mechanism to retain the licence or get it back more quickly</i>		When the person is willing to use an alcohol interlock; People with substance abuse can get the licence back if a substance abuse specialist recommends it.
<i>Mechanism to restore the licence after revoke</i>		When substance abuse specialist recommends it. It is also possible to appeal to the court.
<i>Follow up after regaining the driving licence</i>		Driver get the licence back for a shorter time, for instance for 6 months
<i>On-road assessment</i>		Yes

France

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Yes, after an offence and when there is a road-side check by law enforcement (alcohol, cannabis, amphetamine, opioids, cocaine)
<i>Who decides to revoke the driving licence?</i>		Not specified
<i>Who decides that an assessment is necessary?</i>		Medical commission (when they get the information from police, judgment or family)
<i>revealed indication</i>		Hair test. If the test is positive the driving licence is revoked and the driver is invited to explain. If the test is negative a second hair test is asked 6-24 month
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Medical board (two approved medical practitioners – “médecins agrees”)
<i>Support from other professions</i>		Addict consultation by CSAPA
<i>Mechanism to retain the license or get it back more quickly</i>		Alcohol interlock programs, with or without advanced courses
<i>Mechanism to restore the licence after revoke</i>		interlocks
<i>Follow up after regaining the driving licence</i>		
<i>On-road assessment</i>		no

Germany

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		<ul style="list-style-type: none"> - Law - Driving licence ordinance (and annex) - Evaluation of driving fitness – Assessment criteria (ISBN: 978-3-7812-1894-9)
<i>Who decides to revoke the driving licence?</i>		<ol style="list-style-type: none"> 1. Judge 2. Driving licence authority (if not the judge does the revocation in cases of BAC levels minimum 0,11 % BAC) if they have a clear diagnosis of dependence or a report from a medical-psychological assessment with neg. outcome/prognosis
<i>Who decides that an assessment is necessary?</i>		Driving licence authority (Court)
<i>revealed indication</i>		<p>BAC-level above 0,11 %</p> <p>Two offences with 0,05 % BAC</p> <p>Drug-related offences</p>
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		<p>Both a medical doctor and a psychologist.</p> <ul style="list-style-type: none"> - Med. Dr. assess physical fitness, probably healthy impairments and checks blood or urine parameters. - Psychologist assess attitudes towards drinking, ability and motivation for self-control and the way the person deals with relapse-risks and what kind of coping is performed to avoid relapse.
<i>Support from other professions</i>		Physician, Traffic Psychologist

<p><i>Mechanism to retain the licence or get it back more quickly</i></p>		<p>In Germany there is no alcohol interlock program.</p> <p>But if a person has a BAC-level between 0,11 up to 0,15 he or she can voluntary participate at a specified course and in most cases the judge will cope with this issue by reducing the person's driving ban. But there is no automated procedure for getting the license back more quickly, these are individual decisions due to the single case and in the judge's responsibility. Only a very small number of candidates use this way. The judge will only accept professional programs according the Driver improvement programs according to § 70 FeV. The intervention program has to be done by a professional traffic psychologist.</p>
<p><i>Mechanism to restore the licence after revoke</i></p>		<p>By passing the examination of the MPA (Medical-psychological assessment) and achieving a positive result. Decision of the driving licence authority.</p>
<p><i>Follow up after regaining the driving licence</i></p>		<p>no</p>
<p><i>On-road assessment</i></p>		<p>(no) Not in general, but if the person has insufficient test results (e.g. reaction, orientation, attention) there is an on-road test to check compensation</p>

Great Britain

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Separate standards for alcohol and various drugs; separate standards for alcohol misuse and dependence. Standards for group 1 and group 2. (Advised by Secretary of State for Transport's Honorary Medical Panel)
<i>Who decides to revoke the driving licence?</i>		Driver and Vehicle Licensing Authority
<i>Who decides that an assessment is necessary?</i>		1. self-declaration of individual 2. Reports from individual's family doctor and/or hospital specialist 3. Examination by Agency appointed independent doctor and clinical investigation
<i>revealed indication</i>		Written information provided assessed against published standards; Result of blood/urine investigations interpreted with assistance of guidelines
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Drivers medical group of DVLA
<i>Support from other professions</i>		Independent physicians
<i>Mechanism to retain the licence or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		Eligible to reapply once able to meet the required medical standard
<i>Follow up after regaining the driving licence</i>		Short term licence may be issued should this be considered appropriate. Individual basis.
<i>On-road assessment</i>		no

Hungary

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		no
<i>Who decides to revoke the driving licence?</i>		Court (competent judge) decides
<i>Who decides that an assessment is necessary?</i>		An extraordinary medical fitness examination can be initiated by any acting authority, employer, aptitude testing organization and all physicians who treat the patients if it is well-founded.
<i>revealed indication</i>		
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		The general practitioner (GP) has the single right and scope to decide about the medical fitness
<i>Support from other professions</i>		Health care providers, psychiatrist, expert of addiction
<i>Mechanism to retain the licence or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		
<i>Follow up after regaining the driving licence</i>		Medical fitness examinations will take place in accordance to age-appropriate frequency, unless a shorter period is determined by the competent DG
<i>On-road assessment</i>		no

Ireland

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Based on UK DVLA and Austroads guidelines
<i>Who decides to revoke the driving licence?</i>		Road Safety Authority request the police force (An Garda Síochána) to apply through the courts to revoke a driving licence
<i>Who decides that an assessment is necessary?</i>		1. Driver's responsibility to report; 2. direct physicians reporting only where physicians have discussed the need to report with the patient and the patient is non-compliant or the physician is aware that the driver continues driving and will be a substantial risk to the public.
<i>revealed indication</i>		Written information provided assessed against published standards; Result of blood/urine investigations interpreted with assistance of guidelines
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Family doctor with support from psychiatry, substance dependence treatment experts
<i>Support from other professions</i>		The National Office for Traffic Medicine has worked with Emergency Medicine physicians to diffuse leaflets on MFTD with substance abuse.
<i>Mechanism to retain the licence or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		When a treating doctor consider it appropriate in terms of the guidelines to complete a D501 medical certificate for return to driving
<i>Follow up after regaining the driving licence</i>		No specific system, clinically guided
<i>On-road assessment</i>		no

Luxembourg

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Code de la route (derived from European Directives)
<i>Who decides to revoke the driving licence?</i>		Not specified
<i>Who decides that an assessment is necessary?</i>		Medical commission (when they get the information from police, judgment or family)
<i>revealed indication</i>		Hair test. If the test is positive the driving licence is revoked and the driver is invited to explain. If the test is negative a second hair test is asked 6-24 month
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Medical commission
<i>Support from other professions</i>		no
<i>Mechanism to retain the license or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		A hair test which shows that the applicant is clean of drugs/alcohol misuse
<i>Follow up after regaining the driving licence</i>		Regularly hair test in varying intervals of 6-24 month
<i>On-road assessment</i>		no

Netherlands

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		There are criteria in law and directives and guidelines for examiner specialists
<i>Who decides to revoke the driving licence?</i>		Physician of the legal authority of CBR
<i>Who decides that an assessment is necessary?</i>		Report by police or personal declaration by candidate
<i>revealed indication</i>		Examination by psychologist (under supervision of a psychiatrist)
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Psychiatrist
<i>Support from other professions</i>		Physician, Psychologist, Psychiatrist
<i>Mechanism to retain the license or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		Personal declaration Examination by a psychologist Decision of a physician of CBR
<i>Follow up after regaining the driving licence</i>		Driving licence is valid only for 1 year
<i>On-road assessment</i>		no

Norway

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Regulations from the Norwegian Directorate of Health in cooperation with the Norwegian Public Road Administration (Driver's licence guidelines/supervisor)
<i>Who decides to revoke the driving licence?</i>		Not specified
<i>Who decides that an assessment is necessary?</i>		Physician
<i>revealed indication</i>		Physician will state it in the medical certificate. Police will get a message.
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Physician
<i>Support from other professions</i>		Specialized center for persons with substance use/misuse problems
<i>Mechanism to retain the license or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		In light cases drivers will lose the licence up to 6 months, in strong cases drivers must make a new driving test (theory and practice)
<i>Follow up after regaining the driving licence</i>		
<i>On-road assessment</i>		no

Northern Ireland

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Yes (Medical Advisory Panel issue guidelines)
<i>Who decides to revoke the driving licence?</i>		licensing authority (based on medical assessment or specialist advice)
<i>Who decides that an assessment is necessary?</i>		licensing authority
<i>revealed indication</i>		Self-declaration by licence holder Referral by medical practitioner
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Specialist medical practitioner
<i>Support from other professions</i>		Not applicable
<i>Mechanism to retain the license or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		Normal application, but must show they meet FTD requirements
<i>Follow up after regaining the driving licence</i>		Short period licences are granted. Renewal is subject to medical review
<i>On-road assessment</i>		no

Portugal

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Decree-Law 138/3012, July 15 th with successive changes (Regulation of legal qualification to drive)
<i>Who decides to revoke the driving licence?</i>		Not specified
<i>Who decides that an assessment is necessary?</i>		Physician
<i>revealed indication</i>		The driving licence is declared invalid if the driver fails or do not take part at the medical or psychological evaluation.
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Extensive process described in the Decree-Law 138/2012. There are specific medical and psychological procedures and guidelines.
<i>Support from other professions</i>		Physicians, Psychiatrists and Psychologists
<i>Mechanism to retain the license or get it back more quickly</i>		Drivers with substance dependency must prove that they are abstinent on medical report. There are certain programs that replace the applied penalty of inhibition of driving by training actions focused the damages of driving with alcohol. Health authority is responsible for the medical report. National Road Safety Authority is responsible for the implementation of mentioned training actions.
<i>Mechanism to restore the licence after revoke</i>		The drivers may appeal to a “medical board” (Junta médica) in case of “unfitness” in medical evaluation or must wait six months for a new assessment.
<i>Follow up after regaining the driving licence</i>		Drivers may have restrictions based on the medical evaluation such as regular medical check-ups
<i>On-road assessment</i>		no

Spain

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Same regulations as in the case of other health problems of drivers. There exists a protocol of medical-psychological assessment with standards.
<i>Who decides to revoke the driving licence?</i>		Not specified
<i>Who decides that an assessment is necessary?</i>		Not specified
<i>revealed indication</i>		Medical-psychological report from Drivers Assessment Centers send electronically to the traffic authority
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Drivers Assessment Centers (CRC) authorized by the Administration
<i>Support from other professions</i>		Physician, Psychologist, Psychiatrist
<i>Mechanism to retain the license or get it back more quickly</i>		no
<i>Mechanism to restore the licence after revoke</i>		The Penalty Point System gives the possibility (recovering points), but this system doesn't consider the health problem.
<i>Follow up after regaining the driving licence</i>		It is possible to reduce the period of validity of a licence based on the report from the psychiatrist/psychologist.
<i>On-road assessment</i>		no

Sweden

FTD – Dependence: use/misuse problems with substance (e.g. alcohol and drugs)

Topic		Description
<i>Regulations / medical and psychological guidelines about assessing medical fitness to drive for individuals with substance (e.g. alcohol and drugs) use/misuse problems</i>		Regulation with requirements of fitness to drive including a chapter with issues about substance use/misuse from the Swedish Transport Agency (STA) based on the Annex III of 2006/126/EC
<i>Who decides to revoke the driving licence?</i>		STA's clerk investigators based on the result of the assessment of STA
<i>Who decides that an assessment is necessary?</i>		Swedish Transport Agency (STA)
<i>revealed indication</i>		All physicians in the Swedish health care are responsible for assessing medical fitness and to notify the unfit drivers to STA (inquiry report)
<i>Primarily responsibility for assessing medical fitness to drive where substance (e.g. alcohol and drugs) use/misuse is a factor</i>		Physicians
<i>Support from other professions</i>		STA's advisory physicians and senior medical officers within STA's Department of Traffic Medicine Laboratory testing (CDT, GT, PEth or urin toxicology screen)
<i>Mechanism to retain the license or get it back more quickly</i>		Participation in an alcohol interlock program during 1 or 2 years. During the conditional period, the driver may only drive vehicles equipped with a personal alcohol interlock system approved by STA. Before participation a permanent sobriety must be verified during a period of 6 month and the prognosis for continued sobriety must be good.
<i>Mechanism to restore the licence after revoke</i>		
<i>Follow up after regaining the driving licence</i>		
<i>On-road assessment</i>		no