

Study reveals many people with epilepsy risk driving to get to work

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Even though they are at high risk for car accidents, many people with epilepsy whose seizures are poorly controlled continue to drive, according to a new University of Florida study.

The main reason they continue to get behind the wheel? It's often the only way they can make it to work, say UF researchers, who cite the need to keep patients with epilepsy productive yet safe.

Nearly one in every five is hitting the road, the UF research revealed. The study, described in the journal *Epilepsy & Behavior*, was the first to look at factors that influence why they do, said co-author Dr. Ramon Bautista, an assistant professor of neurology at the UF College of Medicine-Jacksonville.

“Whether or not they can drive and how they can drive is always an issue with the epilepsy population,” Bautista said. “We set out to identify two things — what factors are associated with driving and why folks who ought not to be driving continue to drive.”

More than 2.7 million Americans live with epilepsy, a disorder in which nerve cells in the brain misfire, sometimes causing them to lose control of body movements. Accordingly, all states have enacted strict laws regulating whether people with epilepsy are permitted to drive. Most mandate that drivers be seizure-free for at least six months to a year, Bautista said.

But even strict regulations don't keep some epilepsy patients from driving when they're not supposed to. UF researchers surveyed more than 300 patients in northeast Florida and southeast Georgia being treated for epilepsy and found that nearly 20 percent of those who had at least one seizure a year drove. Even worse, nearly 25 percent of patients who reported daily seizures admitted to driving occasionally, Bautista said.

"I thought the statistics would be lower than that and was surprised that so many with poorly controlled epilepsy continue to drive," he said. "This has always been a problem for epilepsy patients because driving serves both a social and a practical purpose. And if motorists with epilepsy are caught driving when they're not supposed to be, their license can be taken away."

Bautista said he was surprised by the reason why some study participants continued to drive: Most did so not because they had achieved good seizure control or did not have side effects from their medication, but because they needed to get to and from work.

"In many ways we have all these nice rehab programs for epilepsy patients but part of the reason they don't become fully successful is because we fail to consider the more practical things — like how they're going to get to work," he said. "These folks are not bad folks. They're not doing it because they want to hurt someone. They're doing it because they need to work."

Ultimately, seizure-related motor vehicle accidents make up a small proportion of all crashes, said Dr. Robert S. Fisher, a neurology professor and director of the Stanford Epilepsy Center. A 2003 study he conducted with Mayo Clinic neurologist Dr. Joseph Drazkowksi, and others compared seizure-related motor vehicle crashes in Arizona before and after the state eased its driving restrictions, requiring drivers to be

seizure-free for only three months instead of a year.

“Although this issue receives a lot of attention because of a few tragic anecdotes, we found that only 125 of 164,000 crashes in Arizona over a period of six years were likely due to seizures,” Fisher said. “This is a very small fraction compared to other risks at the wheel, and education of patients, families, physicians and the public is needed to put the true risks of seizures at the wheel in perspective.”

People with epilepsy who are a possible risk to themselves or others should not drive, Bautista stressed. But physicians and community leaders need to address epilepsy patients’ deeper needs — the chance to be productive and have gainful employment despite their condition, he said.

“That means we need to provide more home-based employment and develop better transportation systems,” he said. “Telling them they can’t drive does not answer their needs.”

Source: University of Florida

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