

Sunday May 3, 2015

## **Round the bend? How old is too old to drive?**

Elderly drivers can present a hazard to road safety – but the risks of their driving must be weighed carefully against the risks associated with their loss of independence, a leading Canadian geriatrician will tell a meeting of anaesthetists and pain specialists in Adelaide today, Sunday May 3.

Dr David Lussier will tell the annual scientific meeting of the Australian and New Zealand College of Anaesthetists that while older people were more likely to be involved in car crashes than younger drivers, assessing their driving ability was particularly difficult.

“With the ageing of our population we have an increasing number of elderly drivers on our roads,” Dr Lussier said.

“Driving remains a complex task requiring cognitive and physical skills and ageing is associated with the decrease in those skills that can affect driving ability – slower information processing, decreased capacity to process information and a decreased range of joint movement.”

But there were few tests available that could fairly assess that ability to drive, Dr Lussier said.

“Withdrawing someone’s driving license has significant impact on that person’s autonomy, quality of life and pride.

“Withdrawing a driving license should therefore be done with caution and after appropriate assessment and only after alternative means of transportation can be arranged.”

While “zero risk” was not achievable in road safety for any driver, risk could be minimised in older drivers with attention to the effect their medications may have on their driving capability.

“Several medications can affect driving ability, including blood pressure medications by lowering blood pressure,” Dr Lussier said.

He called on family and friends of elderly relatives to keep a careful watch on their suitability for driving.

“There is no age at which a person should simply stop driving and we cannot test for zero risk,” Dr Lussier said.

Dr Lussier will also address pain management in older patients.

“With an increasing life expectancy and frequent occurrence of degenerative diseases such as arthritis and spine disease in older people, chronic pain will become an increasingly more common problem, both in terms of frequency and of debilitating impacts on the person’s functioning and quality of life,” Dr Lussier said.

He believes it is vital clinicians conduct a thorough assessment of the older patient in pain and put in place a multifaceted pain strategy, including non-pharmacological treatments such as physical therapy, exercise and psychological approaches, as well as pain-relieving drugs.

“Even though pain medications can be associated with several adverse effects in frail older people, physicians should not refrain from using appropriate medications such as opioids, because when they are used adequately, then can decrease the person’s pain and hence improve his or her functional autonomy and quality of life.”

The meeting runs until Tuesday May 5.

For further information or to interview Dr Lussier or other speakers, please contact ANZCA Media Manager Ebru Yaman on +61 3 8517 5303, +61 408 259 369 or email [eyaman@anzca.edu.au](mailto:eyaman@anzca.edu.au).

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