



Please keep for further reference

# A Guide to Insulin Treated Diabetes and Driving

**Drivers who have any form of diabetes treated with any insulin preparation must inform DVLA.**

**You must also inform DVLA if your diabetes has become worse since your last licence was issued.**

## EYESIGHT

All drivers are required by law to read in good daylight a registration mark fixed to a motor vehicle and containing letters and figures 79.4 mm. high and 57 mm. wide, at a distance of 20.5 metres or at a distance of 20 metres where the characters are 50 mm. wide and 79 mm. high.

### You must inform DVLA

- If you are unable to meet the number plate requirement.
- Of any problems that affect your field of vision.
- Of any conditions that affect both eyes or the remaining eye if monocular.
- If you have had laser treatment to both eyes for retinopathy, or to the remaining eye if monocular.

## HYPOGLYCAEMIA

The risk of hypoglycaemia (low blood sugar) is the main hazard to safe driving. This may endanger your own life as well as that of other road users. Many of the accidents caused by hypoglycaemia are because drivers continue to drive even though they are experiencing warning signs of hypoglycaemia. Always stop as soon as safely possible – do not ignore the warning signs.

### You must inform DVLA

- If you develop impaired awareness of hypoglycaemia.
- If you suffer disabling hypoglycaemia at the wheel.
- If you have frequent episodes of hypoglycaemia

## LIMB PROBLEMS

Limb problems/amputations are unlikely to prevent driving. They may be overcome by either restricting driving to certain types of vehicles e.g. those with automatic transmission, or by adaptations such as hand operated accelerator/brake.

### You must inform DVLA

- If you develop problems with either the nerves or with the circulation in your legs which prevent safe use of the foot pedals.

## Drivers with insulin treated diabetes are advised to take the following precautions:

Do not drive if you feel hypoglycaemic or if your blood glucose is less than 4.0 mmol/l.

If hypoglycaemia develops while driving stop the vehicle as soon as possible in a safe location, switch off the engine, remove the keys from the ignition and move from the driver's seat.

Do not resume driving until 45 minutes after blood glucose has returned to normal. It takes up to 45 minutes for the brain to fully recover.

Always keep an emergency supply of fast-acting carbohydrate such as glucose tablets or sweets within easy reach in the vehicle.

Carry your glucose meter and blood glucose strips with you. Check blood glucose before driving (even on short journeys) and test regularly (every 2 hours) on long journeys. If blood glucose is 5.0mmol/l or less, take a snack before driving.

Carry personal identification indicating that you have diabetes in case of injury in a road traffic accident.

Particular care should be taken during changes of insulin regimens, changes of lifestyle, exercise, travel and pregnancy.

Take regular meals, snacks and rest periods on long journeys. Always avoid alcohol.

## CONTACT US

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