

Studies show that in Vermont, 20.2% of respondents gave a history of a lifetime diagnosis of depression and 14.2% a lifetime diagnosis of anxiety. Most recent statistics available from 2017 show there are 374 licensed CDL drivers in Vermont and 520 bus drivers (some of whom are also counted among the 374 CDL drivers). Doing the math means there are between 100-200 Vermont FMCSA drivers who suffer from anxiety or depression on the road. Although the absolute number of drivers who have anxiety and/or depression is small, the risks to public safety are large and significant. So how does Champlain Medical Urgent Care help keep our roads safe? We collaborate with drivers and their PCP to make sure that the medications used will not interfere with safe driving, and that the underlying condition is well controlled, keeping both the driver and the public as safe as possible.

Evidence indicates that some antidepressant drugs significantly interfere with skills performance and that these medications vary widely in the degree of impact. With long-term use of antidepressants, many drivers will develop a tolerance to the sedative effects. We will consider both the specific medicine used and the pertinent characteristics of the patient.

Older antidepressants, called “first generation antidepressants”, have consistently been shown to interfere with safe driving. First generation antidepressants include tricyclics such as amitriptyline (Elavil) and imipramine (Tofranil) and drivers will not be certified if taking these medications.

Newer, “second generation antidepressants”, have fewer side effects and are generally safe; however, these medications can still interfere with safe driving and require case-by-case evaluation. Second generation antidepressants include selective serotonin reuptake inhibitors (SSRIs) such as fluoxetine (Prozac) and sertraline (Zoloft); serotonin and norepinephrine reuptake modulators such as venlafaxine (Effexor); and unicyclic aminoketones such as bupropion (Wellbutrin).

In general, a driver should not drive for a minimum of four weeks after starting SSRI medications and will not be certified until the medication has been shown to be adequate/effective, safe and stable. In addition, drivers cannot be certified if the driver uses tranquilizers for their anxiety or takes sleeping pills. If a tranquilizer/hypnotic medication is prescribed, it must be for only 2 weeks duration, and be very short acting, with a half-life (time for half of the medicine to be eliminated from the blood) of less than 5 hours.

References:

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