

from the Federal Air Surgeon's  
**PERSPECTIVE...**

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## CONSEQUENCES

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Hello, Everyone,

**T**he purpose of this editorial is to remind you about the consequences of taking medications that could directly affect an individual's ability to safely fly an airplane. I know most of you will think, "This is old news. I discuss this issue with the airmen I examine during every periodic aviation medical examination." If that is true in your case, then I congratulate you and I urge you to continue the practice.

Good aviators never stop learning and honing their flying skills, and it never hurts to remind them that they are the most complex "component" of the man-machine combination. Unfortunately, many aviators have not digested and internalized the message.

Perhaps it was because they never received it, or they ignored it, or they have just forgotten it, or maybe they have been fooled into believing they were immune from the effects of a particular drug by the wording on warning labels.

Typical wording advises individuals not to drive or operate heavy machinery until they know how the drug affects them. The problem with that statement is that individuals who have taken a sedating medication have been cognitively compromised, so why would anyone expect that they could accurately assess themselves?

Diphenhydramine is a perfect example. Scientists have compared the effects of a single 50-mg. oral dose of diphenhydramine to the effects of a corresponding blood alcohol level of 0.1 g/100 ml. (0.08 g/100 ml. is considered legally intoxicating in most states). Their conclusion was that diphenhydramine may have "...an even greater impact than does alcohol on the complex task of operating a motor vehicle."

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It stands to reason that diphenhydramine and other sedating medications would have similar effects on aviators, so it is very disquieting that over the last decade impairing medications were present in 12 percent of fatal general aviation accidents.

This issue is such a significant problem that the General Aviation Joint Steering Committee (GAJSC), a joint industry-government committee, recently released a letter to all pilots informing them about the subject and asking them to take appropriate steps to mitigate the risk of impairment when flying. (GAJSC letter and a link to the FAA Fact Sheet attached on page 3). I hope when you discuss medical examination results with your pilots that you will take the opportunity to include this very important topic.

So, what should you be telling your airmen? The first message should be that if they are "sick" enough to need medication, then perhaps they should stand-down until they no longer need the medication. If for some reason they need to fly after taking a sedating medication, then they should wait for a period of time that equals five times the max dosing interval on the drug label. **NOTE:** Five half-lives is a better number, but it is often difficult to determine the half-life from a drug label.

And, as always, thanks again for the great service you perform for the Federal Aviation Administration and your pilots. You positively influence the safety of the National Airspace System.

—Fred