



# Information for drivers with diabetes treated by non insulin medication, diet, or both.

Please keep this leaflet safe so you can refer to it in the future

**Drivers do not need to tell us if their diabetes is treated by tablets, diet, or both and they are free of the complications listed over the page.**

Some people with diabetes develop associated problems that may affect their driving.



## Hypoglycaemia (low blood sugar)

Hypoglycaemia (also known as a hypo) is the medical term for a low blood glucose (sugar) level.

**Severe hypoglycaemia** means the assistance of another person is required. The risk of hypoglycaemia is the main danger to safe driving and can occur with diabetes treated with insulin or tablets or both. This may endanger your own life as well as that of other road users. Many of the accidents caused by hypoglycaemia are because drivers carry on driving even though they get warning symptoms of hypoglycaemia. If you get warning symptoms of hypoglycaemia while driving you must stop as soon as safely possible – **do not ignore the warning symptoms.**

### Early symptoms of Hypoglycaemia include:

- Sweating, shakiness or trembling, feeling hungry, fast pulse or palpitations, anxiety, tingling lips.

If you don't treat this it may result in more severe symptoms such as:

- Slurred speech, difficulty concentrating, confusion, disorderly or irrational behaviour, which may be mistaken for drunkenness.

If left untreated this may lead to unconsciousness.

## What you need to tell us about

By law you must tell us if any of the following applies:

- You suffer more than one episode of severe hypoglycaemia within the last 12 months. You must also tell us if you or your medical team feel you are at high risk of developing severe hypoglycaemia. For Group 2 drivers (bus/lorry), one episode of severe hypoglycaemia must be reported immediately.
- You develop impaired awareness of hypoglycaemia. (Difficulty in recognising the warning symptoms of low blood sugar).
- You suffer severe hypoglycaemia while driving.
- You need treatment with insulin.
- You need laser treatment to both eyes or in the remaining eye if you have sight in one eye only.
- You have problems with vision in both eyes, or in the remaining eye if you have sight in one eye only. By law, you must be able to read, with glasses or contact lenses if necessary, a car number plate in good daylight at 20 metres. In addition, the visual acuity (with the aid of glasses or contact lenses if worn) must be at least 6/12 (0.5 decimal) with both eyes open, or in the only eye if monocular.

- You develop any problems with the circulation, or sensation in your legs or feet which makes it necessary for you to drive certain types of vehicles only, for example automatic vehicles, or vehicles with a hand operated accelerator or brake. This must be shown on your driving licence.
- An existing medical condition gets worse or you develop any other condition that may affect your driving safely.

In the interests of road safety, you must be sure that you can safely control a vehicle at all times.

## How to tell us

If your doctor, specialist or optician tells you to report your condition to us, you need to fill in a Medical Questionnaire about diabetes (DIAB1). You can download this from

[www.gov.uk/driving-medical-conditions](http://www.gov.uk/driving-medical-conditions)

**Phone:** 0300 790 6806.

### Write to:

Drivers Medical Group  
DVLA  
Swansea  
SA99 1TU

## Useful address

### Diabetes UK Central Office

Macleod House  
10 Parkway  
London  
NW1 7AA

### Diabetes UK Website:

[www.diabetes.org.uk](http://www.diabetes.org.uk)

Find out about DVLA's online services

Go to: [www.gov.uk/browse/driving](http://www.gov.uk/browse/driving)

