

Sleep Apnea and Commercial Drivers

Do you snore? Do you feel sleepy during the day? Are you over 40 or overweight? If you answered yes to these questions, you may be at risk for obstructive sleep apnea.

Sleep apnea is a breathing-related sleep disorder that causes brief interruptions of breathing during sleep. These pauses in breathing can last at least 10 seconds or more and can occur up to 400 times a night. Sleep apnea is a serious, potentially life-threatening condition that often goes unrecognized and undiagnosed.

The Federal Motor Carrier Safety Administration (FMCSA) says that as many 28 percent of commercial driver's license (CDL) holders have sleep apnea.¹

Signs of sleep apnea include daytime sleepiness, falling asleep at inappropriate times, loud snoring, depression, irritability, loss of sex drive, morning headaches, frequent nighttime urination, lack of concentration, and memory impairment. For commercial drivers, these symptoms are dangerous and potentially deadly. Research indicates that untreated sleep apnea puts drivers at increased risk for motor vehicle crashes. In fact, one study found that drivers with *untreated* sleep apnea did worse on performance tests than healthy alert subjects whose blood alcohol concentrations was above the federal limit for driving a commercial motor vehicle (CMV).²

The good news is that sleep apnea is a highly treatable disorder. A continuous positive airway pressure machine is the most effective therapy, requiring patients to wear a nasal mask during sleep. The mask, connected to a pump, gently forces compressed air into the nasal passages at pressures high enough to open the airway from the inside. In addition, people with sleep apnea can lose weight, avoid alcohol prior to bedtime, and avoid sleeping on their backs. Other treatments include the wearing of oral devices and surgery to remove enlarged tonsils, adenoids, nasal polyps, or other growths. Deviated nasal septums or unusually formed jaws or soft palates can also be corrected surgically.

Once you have received treatment for sleep apnea and comply with your treatment plan, you can do your job as safely as someone who doesn't have the disorder.

Are You At Risk for Sleep Apnea?

Sleep apnea occurs in all age groups and both sexes, but there are certain factors that put you at higher risk:

- A family history of sleep apnea
- Being overweight
- A large neck size (17 inches or greater for men, 16 inches or greater for women)
- Being age 40 or older
- Having a small upper airway
- Having a recessed chin, small jaw or a large overbite
- Smoking and alcohol use
- Ethnicity

What should a CMV driver do after learning that they have sleep apnea?

Each state sets its own medical standards for driving a commercial motor vehicle in **intrastate** commerce. Many States have adopted the medical regulations found under Section 391.41(b)(5) of the FMCSRs and have determined that sleep apnea is a disqualifying condition. Each State has the jurisdictional authority to suspend a CDL if a person has sleep apnea. Medical examiners and CMV drivers should check with their Department of Motor Vehicles for more information about medical standards in their State.

What level of sleep apnea (mild, moderate, severe) disqualifies a CMV driver?

The disqualifying level of sleep apnea is moderate to severe, which interferes with safe driving. The medical examiner must qualify and determine a driver's medical fitness for duty.

What are the obligations of a motor carrier concerning an employee with sleep apnea?

A motor carrier may not require or permit a driver to operate a CMV if the driver has a condition, including sleep apnea, that would affect his or her ability to safely operate the vehicle.

If you suspect that you have sleep apnea, the FMCSA and the National Sleep Foundation (NSF) urge commercial truck and motorcoach drivers to discuss the problem with their doctor.

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References:

1. &Pack AI, Dinges DF, & Maislin G. (2002) A Study of Prevalence of Sleep Apnea among Commercial Truck Drivers (Report No. DOT-RT-02-030). Washington, DC: U.S. Department of Transportation, FMCSA.
2. &Powell NB et al. (1999). A comparative model: reaction time performance in sleep-disordered breathing versus alcohol-impaired controls. *Laryngoscope*, 109(10):1648-54.