



## Patient Information

# Returning to Driving after a Stroke

This leaflet contains information and guidance for stroke survivor's that have been assessed by an Orthoptist and found to have visual problems that can affect their ability to drive safely. Returning to driving after a stroke can be an important part of recovery, but it is important to note that a stroke can make it unsafe to drive and the effects may be long term.

In England, Scotland, and Wales the DVLA sets the rules and standards that drivers must meet. **It is your responsibility to notify the DVLA (DVA in Northern Ireland) of any medical condition which may affect your ability to drive safely and your insurance company.** There are different visual standards depending on whether you are a car/motorcycle or bus/coach/lorry driver licence holder.

### Car or Motorcycle licence holders:

Initially you must stop driving for one month. To resume driving you must meet the medical and visual standards for driving. You do not need to inform the DVLA unless you are still having problems one month after the stroke with any of the following:

- You have had more than one recent stroke or transient ischaemic attack (TIA)
- You are still suffering from weakness of the arms or legs, **visual disturbance**, or problems with co-ordination, memory or understanding
- You have had any kind of seizure, unless it happened at the time of the stroke or TIA or within the following 24 hours and you have never had a seizure, stroke or TIA before
- You needed brain surgery as part of the treatment for the stroke
- A person providing your medical care has said they are concerned about your ability to drive safely

You can report your condition on-line or download form V1 and send it to the DVLA. See end of leaflet for further information.



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## Bus, coach, or lorry drivers:

If you hold a current Large Goods Vehicle (LGV) or Passenger Carrying Vehicle (PCV) (Group 2) driving licence, you must inform the DVLA if you have had a stroke or TIA. Download and complete form STR1V and send it to the DVLA. Your licence will be refused or revoked for one year. Relicensing after one year may be considered if there is no debarring residual impairment likely to affect safe driving and there are no other significant risk factors.

## What type of visual disturbance will prevent me from driving?

The main visual symptoms after stroke that will affect your fitness to drive are:

- **Visual field loss** – your visual field is the area you see around you when you are looking straight ahead and involves your central and peripheral vision. Two out of ten stroke survivors will experience long term visual field loss. Homonymous hemianopia which means ‘without half vision’ is the most common type of visual field loss and is the loss of half your field of vision in both eyes. Some people lose a quarter of their vision or just their central vision might be affected depending on where the stroke occurs in the brain. Most improvement in visual field loss occurs spontaneously in the first two to three months. Visual field loss remaining after six months will be permanent.

The Orthoptist will advise you whether your visual field loss meets the requirements for ‘sight impaired’ registration which may entitle you to certain benefits and arrange for the registration to be signed. Our Eye Clinic Liaison Officer (ECLO) will contact you and your local social services may arrange to visit you at home. See RNIB ‘Benefits, concessions & registration booklet’.

12 months after the onset of your stroke you may apply to the DVLA for a driving assessment to determine whether you have fully adapted to your visual field loss. This will involve a visual field assessment carried out at a ‘Specsavers’ designated by the DVLA and an on-road driving assessment. You also need to meet the physical and cognitive medical requirements.

- **Double vision** - usually you will be permitted to drive once the DVLA has received confirmation that your double vision is controlled by temporary prisms or you have fully adapted to monocular vision using an occlusive eye patch and still meet the eyesight standards in the non-occluded eye. Adaption to monocular vision could take many months as you need to adjust to losing your depth perception. See leaflet ‘Double vision and care of prisms’ for more information.
- **Eye movement disorder** – if you lose your ability to quickly move both eyes together either side to side or up and down you may be recommended to stop



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driving temporarily until either the condition improves, or you have fully adapted to having to turn your head to compensate.

- **blurred vision below a certain level** – to drive safely you must meet the minimum eyesight standard. The Orthoptist may recommend you visit your optometrist for an up to date sight test or refer you to the Eye Clinic for further investigations.
- **Nystagmus** (continuous uncontrolled 'to and fro' movement of the eyes) can develop after a stroke and may affect your ability to see clearly reducing your eyesight below the minimum standard for driving. It may gradually improve with time.
- **Visual inattention/neglect** – this is a visual processing problem which makes you unaware of your surroundings to one side. You may not realise that you are missing things around you and this makes it unsafe to drive.

### Caution

Loss of independence from loss of driving causes a huge impact to individuals but, not so huge as harm/death to others through continued, illegal driving. You can be fined by the DVLA for not telling them about a condition that affects your ability to drive and your insurance may be invalid if you have an accident.

### Useful information and websites:

The **DVLA** produces documents/ information including

- Driving eyesight rules/standards
- A guide for drivers with a medical condition (INF94) – explains how DVLA decides whether drivers are medically fit to drive.
- Standards for drivers who have had a stroke or transient ischaemic attack (TIA) (INF188/3)
- Neurological disorders – assessing fitness to drive
- Visual disorders – assessing fitness to drive

**DVLA: [www.gov.uk/health-conditions-and-driving](http://www.gov.uk/health-conditions-and-driving) Tel 0300 790 6806**

**Drivers Medical Group DVLA Swansea SA99 1TU**



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**BIOS:** The British & Irish Orthoptic Society produces downloadable patient information leaflets on visual disorders associated with stroke.

- Eye movement disorders
- Reduced vision
- Visual field loss
- Visual inattention
- Visual perceptual defects

Visit [www.orthoptics.org.uk](http://www.orthoptics.org.uk) and follow the links to 'Patients and Public' then 'Useful information and resources' then 'Stroke or brain injury'.

The **Stroke Association** produces information and leaflets including

- Driving after stroke
- Visual problems after stroke
- Migraine and stroke
- Cognitive effects of stroke
- Tiredness after stroke
- Epilepsy and stroke

[www.stroke.org.uk](http://www.stroke.org.uk) Helpline Tel: 0303 3033 100

**RNIB** Fact sheet - Eye conditions related to stroke.  
Booklet - Benefits, concessions & registration

[www.rnib.org.uk](http://www.rnib.org.uk) Helpline Tel: 0303 123 9999 email: [helpline@rnib.org.uk](mailto:helpline@rnib.org.uk)

**Nystagmus Network** [www.nystagmusnet.org](http://www.nystagmusnet.org) for advice about acquired nystagmus

**For further advice contact:**

**Orthoptic Department, The Great Western Hospital, Marlborough Road  
Swindon, SN3 6BB. Telephone/answerphone: 01793 604702  
Monday – Friday 8.00am – 5.00pm**

Smoking will not be permitted on any NHS site in England. Smoking will not be permitted within any of our buildings or anywhere outside on our sites. Smoking facilities will not be provided. Please be considerate of others when vaping in hospital grounds.

**This information sheet is available to order in other languages and formats. If you would like a copy, please contact us on 01793 604031 or email [gwh.pals@nhs.net](mailto:gwh.pals@nhs.net)**

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