

SAFE DRIVING: PART 1

There is a wealth of information on driving safely. AAA, AARP and the National Institute on Aging have developed fact sheets, brochures and even safe driving courses to help seniors stay on the road safely.

As a group, older drivers are good drivers – fewer drink and drive or speed. Despite this, people over 70 are more likely, than other adults, to be in a serious crash or die in a crash. Senior drivers over the age of 85 have a higher fatality rate than 16 year olds.

There are many reasons which contribute to these statistics: changes in our physical and mental abilities, medications and health problems. The first step to maintain driving safety is to understand these changes and assess “whether it is wise for you...to continue driving.” (NY Times 2/20/01)

You don't need a chronic illness or disability to experience changes which can contribute to an increased risk of accident. There are four areas of visual change: **acuity** – ability to see ahead, especially at night; **accommodation** – your eye's ability to change from light to dark and near to far; **peripheral vision** – ability to see left and right; and **depth perception** – ability to judge speed and distance of other cars. In addition, your response time to glare (from headlights or solar glare) decreases with age. Loss of contrast sensitivity makes it more difficult for seniors to detect curves or highway dividers. The older eye may have difficulty seeing the color red causing a slow response to brake lights. If you are experiencing any changes in one or more of these areas, it is crucial to have your vision evaluated as there are treatments available to improve vision.

Your hearing can also change. Sirens and car horns are only two of the sounds which provide a warning signal to us – more subtle sounds might be the screech of tires or the laughter of children which cues you to slow down.

Some seniors experience joint stiffening which impacts their ability to back out of parking spaces. Others experience muscle weakness which makes it hard to steer or brake. Response time can also decrease with age.

In addition to these physical changes, we experience cognitive ones: difficulty learning new information (detours or road changes from the Big Dig); and maintaining attention - without being distracted by a radio or conversation. Dementia and depression are two forms of mental problems which can affect your ability to drive.

Medications, both prescription and over-the-counter, such as sleep aids, cold remedies and painkillers, may interfere with safe driving as can alcohol use. You and your physician should discuss how your medications might affect your driving safety.

Next month: How to Be a Better Driver