

A painting of a sailboat on a bay with a bridge in the background. The sailboat is in the center, with its sails up. The bridge is a long, low structure with many pillars, spanning across the water. The water is blue and green, with some whitecaps. The sky is a pale blue. In the background, there are some buildings and hills.

**WELCOME....**

**to the 2014 ICAO Session  
in....**

**SAN DIEGO!**

**Before we start....**



**Thanks**

## The Role of Preventive Medicine in Regulatory Aviation Medicine

### **Overview.**

Dr Anthony Evans

### **A medical examiner's view**

Dr Anthony Wagstaff – Institute of Aviation Medicine, Oslo

### **A pilot's view**

Dr Carlos Salicrup – IFALPA

### **An airline's view**

Dr Tim Stevenson – Virgin Atlantic

### **A regulator's view**

Dr David Salisbury – Transport Canada

Dr Jarnail Singh – CAA Singapore

### **Discussion – everyone!**

# ICAO and Preventive Medicine - Current SARP



- **6.3.1.2.1 Recommendation.**— *In alternate years, for Class 1 applicants under 40 years of age, the Licensing Authority should, at its discretion, allow medical examiners to omit certain routine examination items related to the assessment of physical fitness, whilst increasing the emphasis on health education and prevention of ill health.*

# What increased preventive medicine might entail for the medical examiner



- To a young pilot (who may have normal body weight) – discuss exercise and nutrition
- To a pilot who drinks alcohol (who may not drink excessively) – discuss safe alcohol levels
- To a smoker – advise him to stop smoking
- To a pilot who is bereaved – discuss possible counselling options

Pilots “take it or leave it”. Voluntary.

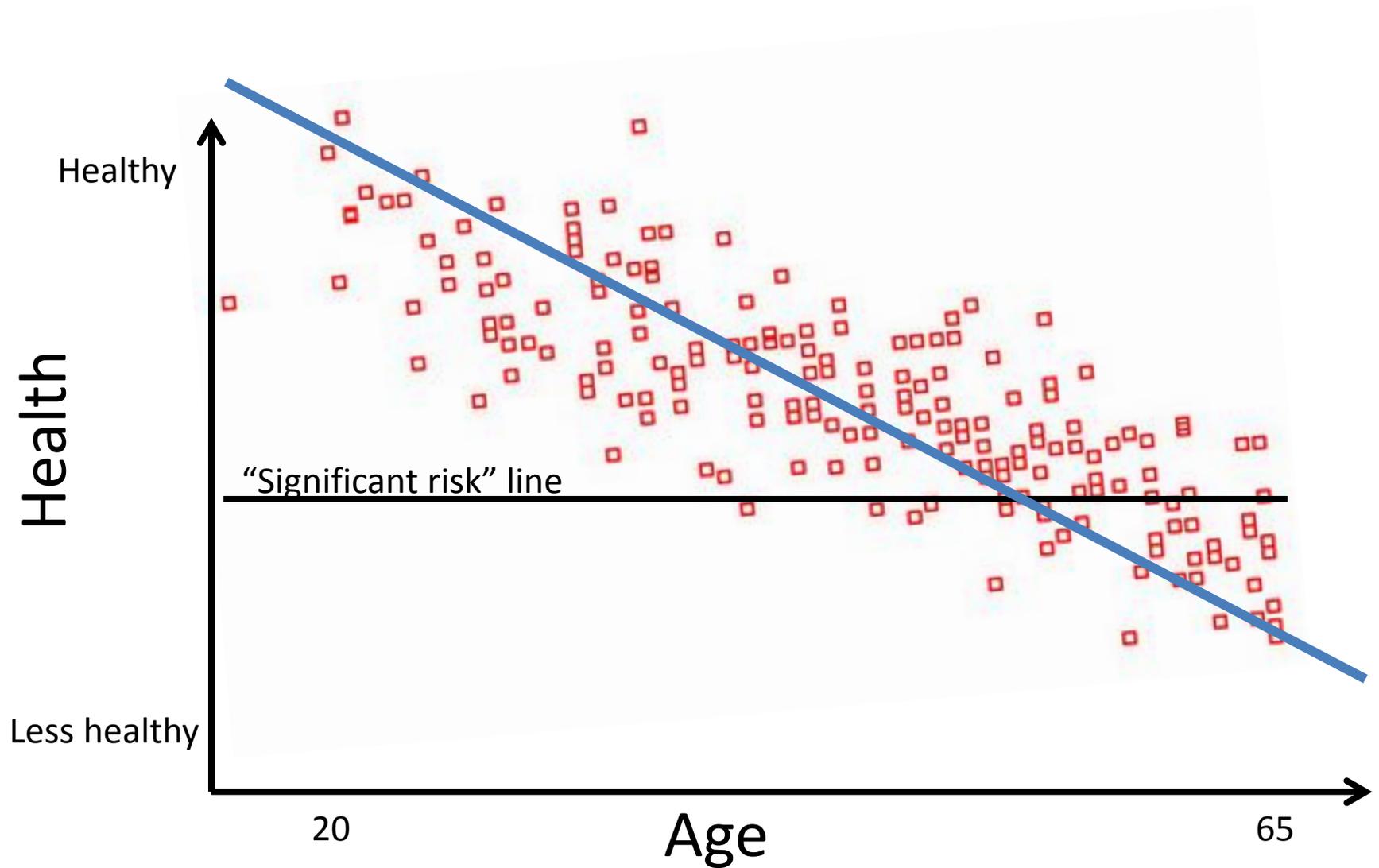
The intention is not that:

- The subject be used to threaten certificate withdrawal
- The examiner provides prevention “treatment”
- Additional tests be introduced (cholesterol etc)

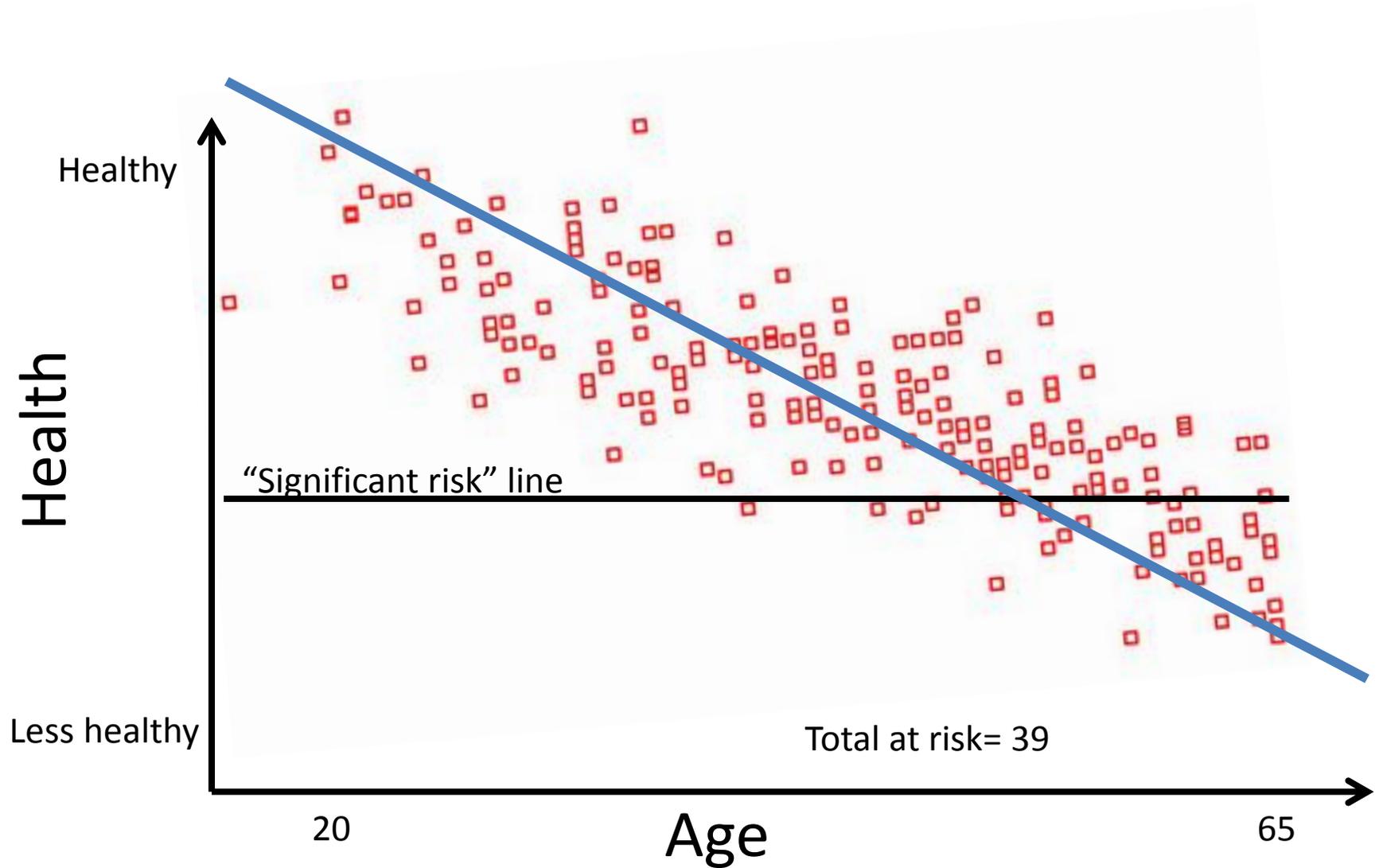
At present most authorities do not require any preventive medicine advice to be given (although there may be some informal suggestion that they do)

# The Theory....

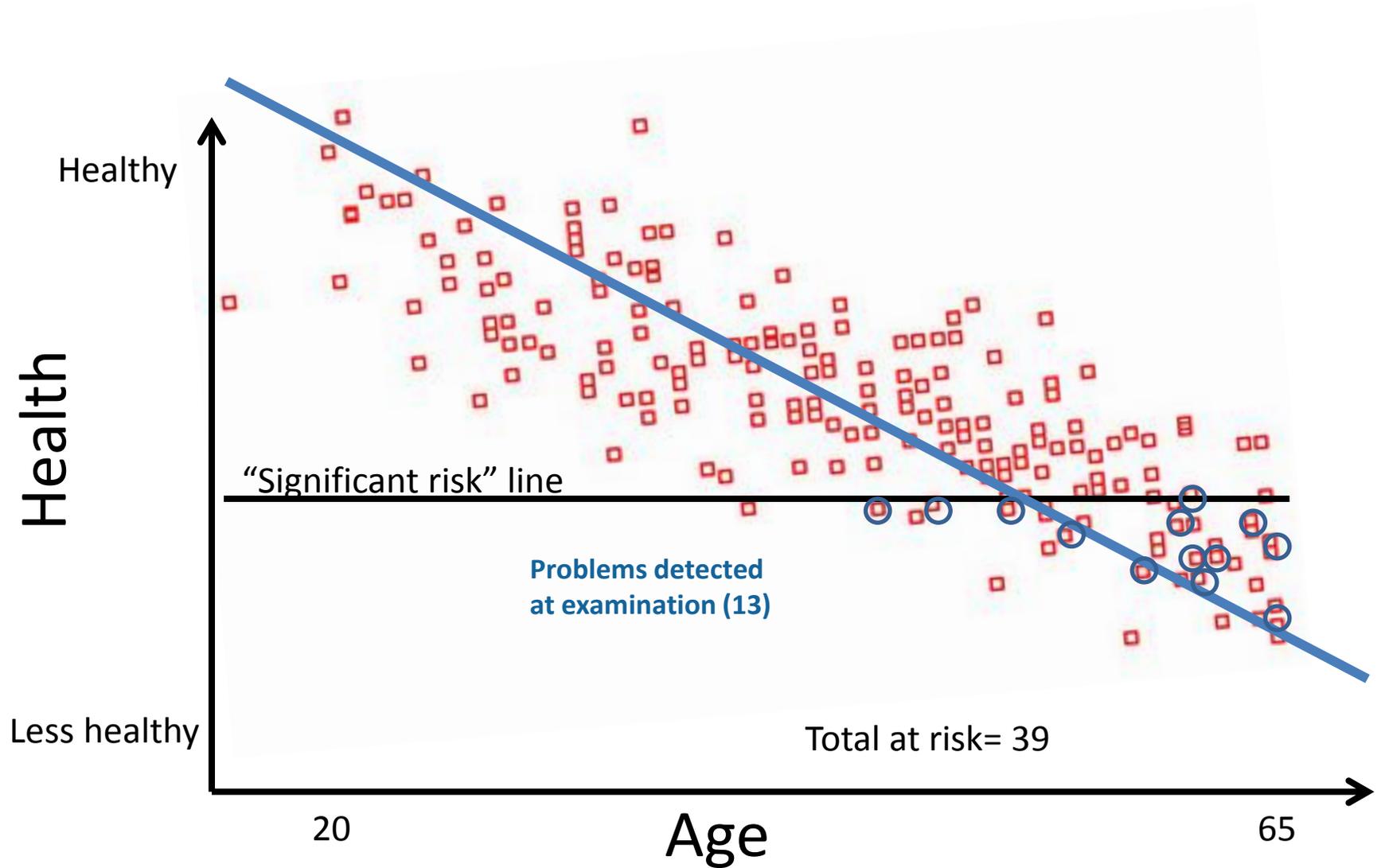
# Pilot Health and Age (average)



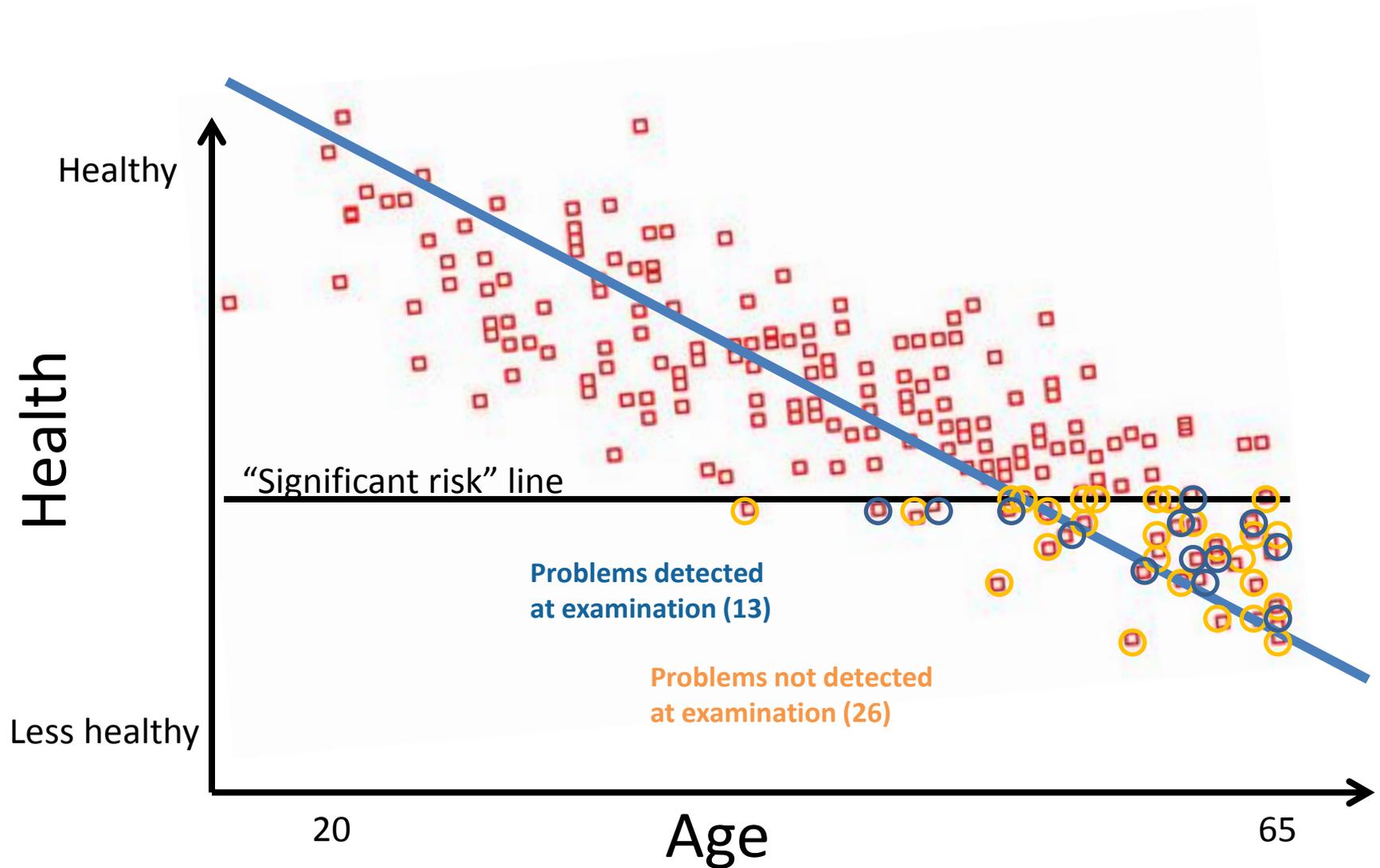
# Pilot Health and Age (average)



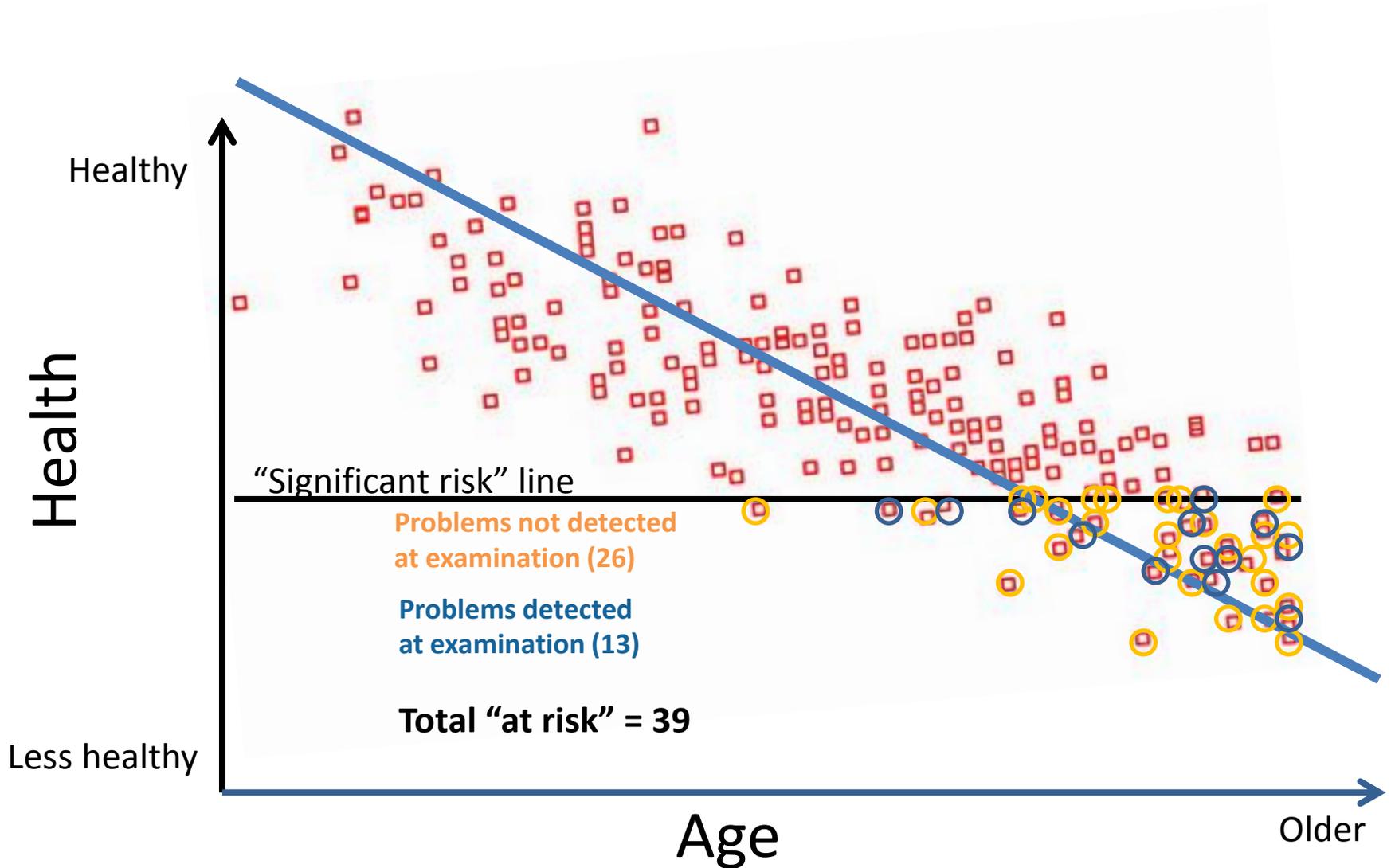
# Pilot Health and Age (average)



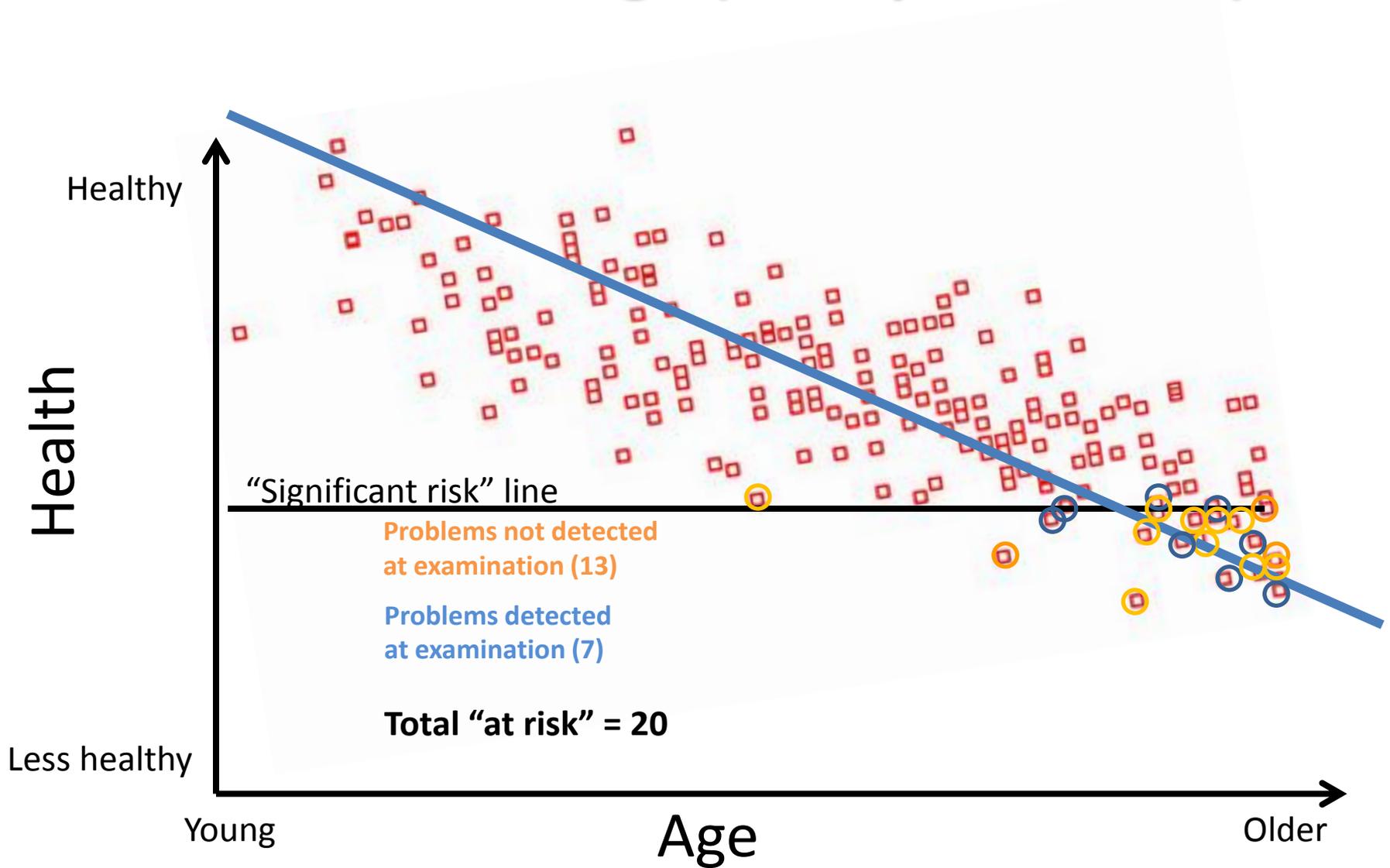
# Pilot Health and Age (average)



# Pilot Health and Age (current)



# Pilot Health and Age (with prevention)



# If we successfully introduce preventive strategies....



- The amount of pathology in the pilot (ATCO etc) community should decrease
- **Flight safety** should be improved
  - Also, less time off work, reduced retraining costs, more pilots complete a full career
- Minimal additional costs

# % of serious medical problems identified at routine medical examination?



- 39 LTU assessments (UK, 1999)
  - 27 (69%) contacted CAA to advise of illness
  - 8 were identified on resting ECG
  - 4 were identified by physical examination

# Possible new ICAO Standard



**“States shall require medical examiners to provide appropriate preventive medicine advice to applicants at periodic medical examinations”**

## A medical examiner's view

Dr Anthony Wagstaff

Institute of Aviation Medicine, Oslo