Contemporary aeromedical considerations relevant to passengers: are MEDICATIONS and/or ALCOHOL acceptable?

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Greetings from the Aerospace Medical Association
TUBERCULOSIS and AIR TRAVEL:

GUIDELINES FOR PREVENTION AND CONTROL

WORLD HEALTH ORGANIZATION
Figure Flowchart summarizing the recommended procedures for deciding whether tracing and informing of passengers and crew are needed.

1. Physician diagnoses a TB case with history of recent air travel
2. Health authority notified of a TB case with history of recent air travel, either by patient's physician or airline company
3. Was case infectious at time of flight?
   - Yes
     - Contact airline medical director to verify case was on aircraft
     - Total flight time ≥ 8 hours?
       - Yes
         - Flight(s) occurred within the past 3 months?
           - Yes
             - In cooperation with health authorities, the airline company informs passengers and crew of possible exposure
           - No
             - No further action needed
       - No
         - No further action needed
   - No
     - No further action needed
4. Airline informed by patient/private physician of TB case with history of air travel
5. Airline contacts health authority
6. The airline company reports to the health authority on the information process; records should be kept for at least 3 years
FEAR of FLYING
Contemporary trends in aviation medicine applicable to aircraft occupants
Aircraft occupants: Flight crew, cabin crew, passengers (healthy and/or with problems potentially aggravated by flying).
Fear of Flying – WHO diagnostic criteria vs. aeromedical approach. Evolution of its understanding.
Fear of Flying
present day description as per Clinical Aviation Medicine

• Generic term-diverse group of conditions
• Great anxiety in anticipation of flying
• Cannot board without the aid of tranquilizers or alcohol
• Desensitization programs have been available with different success levels
• Not all aviators are initially comfortable in flight.
Fear of Flying is an aeromedical term.

- In general, the Psychiatric literature does not use this term.
- WHO includes Fear of Flying in a special cluster of phobias section of Chapter V of the International Classification of Diseases.
Classical descriptions: crew members

- Military pilots
- Civilian pilots
- Cabin crew members
- Licence holders (above) indicate a real change in their motivation and adaptation. Experts suggest grounding them until causes are determined by a meticulous psychiatric history.

Classical descriptions: passengers

All: Evolution of understanding – Concerns about PTSD
Example of **evolution**: hearing loss determination by whispering voice testing (air passing through struts)
Question?

Who whispers in modern aircraft?
The Humanization of Air Travel

- Air travel used to be pleasant.
- Passengers were looking forward to plane rides.
- The minimal discomfort was fully compensated by reaching destination faster than with any other form of transportation.
### Aeromedical practice

#### Major shifts – Contemporary trends

- From “Ground the unfit” to “Keep them flying”.
- From Medical Requirements for Operational Safety to:
  - Health and Safety are interrelated.
- Major achievement in International Quarters:
  - ICAO’s Assembly A35-12: “Protection of the health of passengers and crews and prevention of the spread of communicable disease through international travel”. It should be taken as a first step in the right direction.
Previous ICAO actions

• 1944 – Chicago Convention
• Facilitation programme
• 1959 – Council (C 36/13) “…due consideration will be given to any passenger aspects”
• 1992 – A29-15 Smoking restrictions
• 2000 – Legal work on unruly passengers
• 2004 – Health as a condition of safe travel and prevention of spread of disease
Other (non-ICAO) relevant activities over the recent years

- AsMA’s useful tips for airline travel
- ECAC/EU Dialogue with the European Air Transport Industry leading to the Airline Passenger Service Commitment
- Science and technology – Fifth Report on Air Travel and Health – HOUSE of LORDS
- AsMA’s Position on DVT and other passenger related issues
- IATA – DVT preempted by SARS
MEDICATIONS - ALCOHOL

- Prescribed
- Over the counter
- Underlying disease
- Allergies
- Idiosyncrasies
- Undesirable side effects
- Aviation related synergism
Most common medications for Fear of Flying (including anxieties and depression)

- Anxiolitics
- Sedatives
- Alcohol!!!
- SSRI (Substantial debate going on)
Fear of Flying

• Definition
• Epidemiology
• Assessment of the subject
• Diagnosis
• Treatment
• Prevention
Fear of Flying

- World Health Organization
- ICD Revision 2007
- Chapter V
- Mental & behavioral disorders
- Neurotic, stress related and somatoform disorders
- Phobic anxiety disorders
- Agoraphobia
Formation flying helps substantially; let’s work together! Many thanks Canadian Geese!!