

ICAO FIFTH MEDICAL EXAMINER AND ASSESSOR WORKSHOP



- **CASE STUDY OF A LICENSE HOLDER WITH DEPRESSION –
REGULATORS APPROACH**

Doctor Charles Limbia

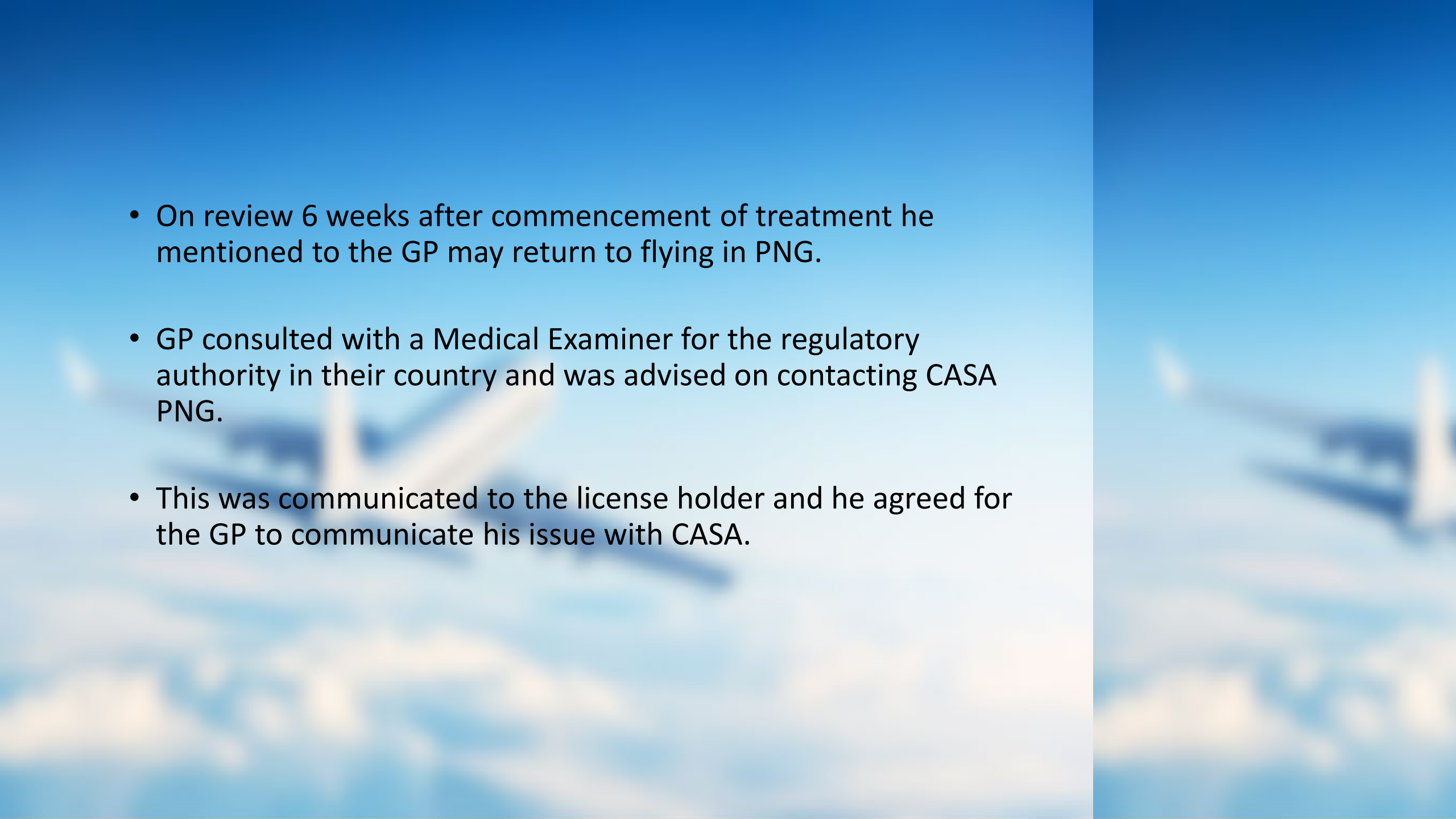
Medical Assessor – Papua New Guinea

Papua New Guinea Aviation Demographics

Description	Total
Number of Aircraft on PNG Register	214
Number of certified Airports	24
Number of Rural Airstrips	150-200 depending on Maintenance status. More than 600 known
Air operators	21 Local and 9 Foreign
Maintenance organizations	22 Local and 17 Foreign
Total hours flown by Aircraft	91,291.54 (31 Dec 2025)
Total number of pilots	1353
Total number of Aircraft Maintenance Engineers	850
Total Number of Air Traffic Controllers	104
Total number of DAMEs	11 (7 Local and 4 Foreign)
Total number of Medicals per year	Circa 700

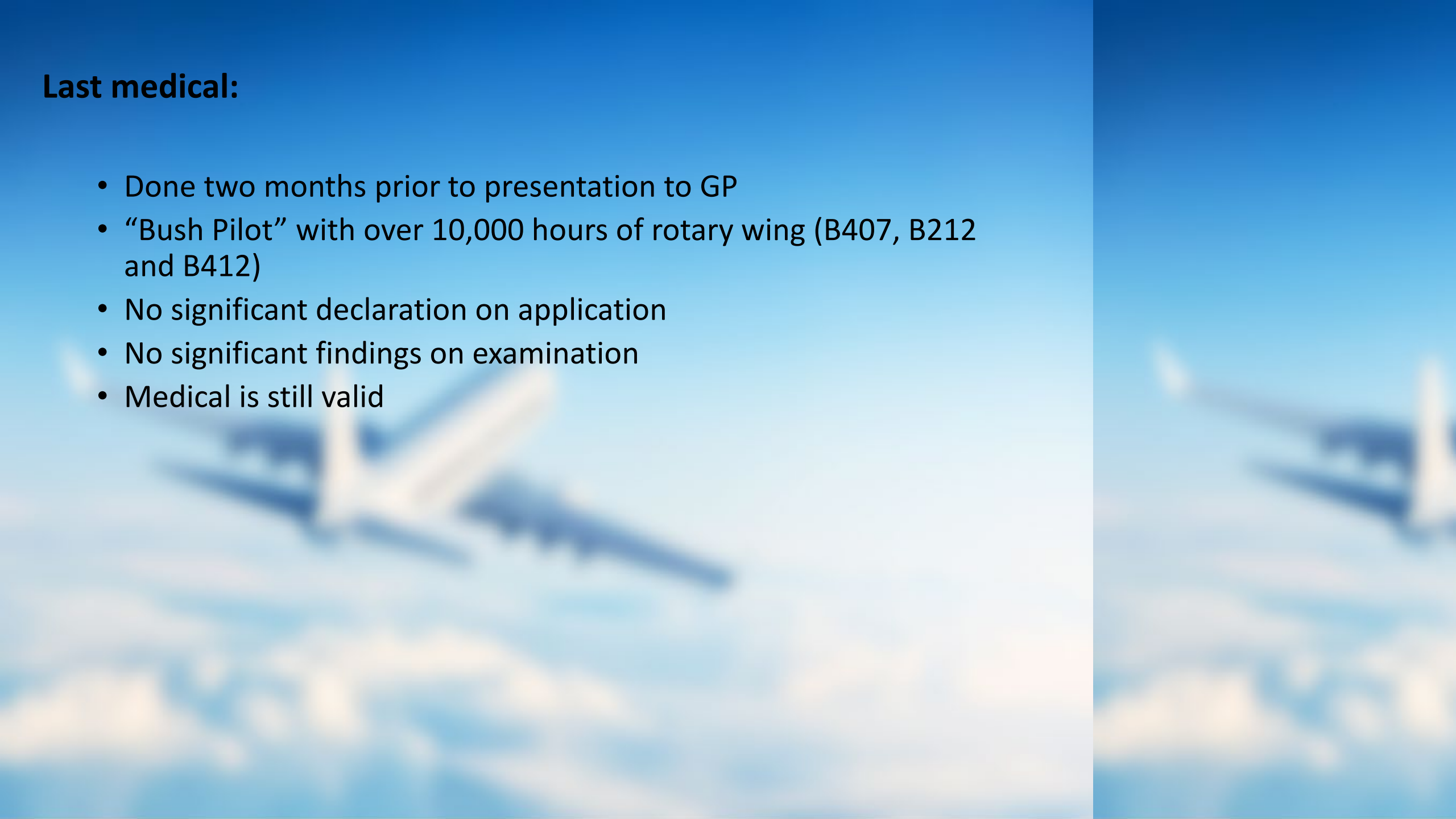
Report received via confidential reporting line:

- A 61-year-old pilot who holds a class 1 medical, and flies single crew on the rotary wing consulted his GP for low mood and anxiety and had retired from flying. He did not express any suicidal ideations.
- As per GP report..... “we discussed the pros and cons of starting antidepressant medication and he was open to the idea of starting medicine. We started escitalopram 10mg and titrated up to 20mg after 1-2 weeks. Since then he has experienced an improvement in mood and anxiety and again has no suicidal ideation and presents with a normal mental state exam”.

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- On review 6 weeks after commencement of treatment he mentioned to the GP may return to flying in PNG.
 - GP consulted with a Medical Examiner for the regulatory authority in their country and was advised on contacting CASA PNG.
 - This was communicated to the license holder and he agreed for the GP to communicate his issue with CASA.

Last medical:

- Done two months prior to presentation to GP
- “Bush Pilot” with over 10,000 hours of rotary wing (B407, B212 and B412)
- No significant declaration on application
- No significant findings on examination
- Medical is still valid



Civil Aviation Rule (CAR) Part 67:

67.103 General requirements

- (a) Impairment or sudden incapacity: Applicants must be free from any risk factor, disease or disability which renders them either unable, or likely to become suddenly unable to perform assigned duties safely. These may include adverse effects from the treatment of any condition and effects of drugs or substance of abuse.

Civil Aviation Rule (CAR) Part 67:

67.105 Class 1 medical certificate

.....

Physical and mental standards

(b) Applicants must have no established medical history or clinical diagnosis of –

- 1. (1) Psychiatric: any of the following conditions that are of a severity which makes the applicant currently unable to safely use the license or likely that within two years of the assessment the applicant will be unable to safely use the license:

- (i).....

.....

- (v) Mental abnormality or psychoneurosis of a significant degree

ICAO Doc 8984

Appendix 2 - Specific Guidance concerning the use of antidepressant medication

“states may, on a case-by-case basis, certificate applicants who are prescribed (and are taking) an approved SSRI antidepressant medication for an established diagnosis of depression which is in remission. Conditions necessary for air safety may be imposed on the certificate as appropriate, for example “holder to fly as or with co-pilot”, thus limiting operations to multi-crew aircraft.....”

Clinical Guidelines – CAA NZ

“This section is based on a similar document published by the Civil Aviation Safety Authority (CASA Australia). That Document, in turn, was based on (open usage) training material developed by the Federal Aviation Administration.....”



FAA Guidelines

Decision Considerations – Aerospace Medical Dispositions Item 47. Psychiatric Conditions – Use of Antidepressant Medications;

- An individual may be considered for an FAA Authorization of a Special Issuance (SI) or Special Consideration (SC) of a medical certificate if:
 -
 - For a minimum of 3 months prior, the applicant has been clinically stable as well as on a stable dose of medication without any aeromedically significant side effects and/or an increase in symptoms. If the applicant has been on medication under 3 months, the Examiner must advise that 3 months of continuous use is required before SI/SC.
- ❖ Note - FAA requires the use of a Human Intervention Motivation Study Aviation Medical Examiner (HIMS AME) – we do not have one.

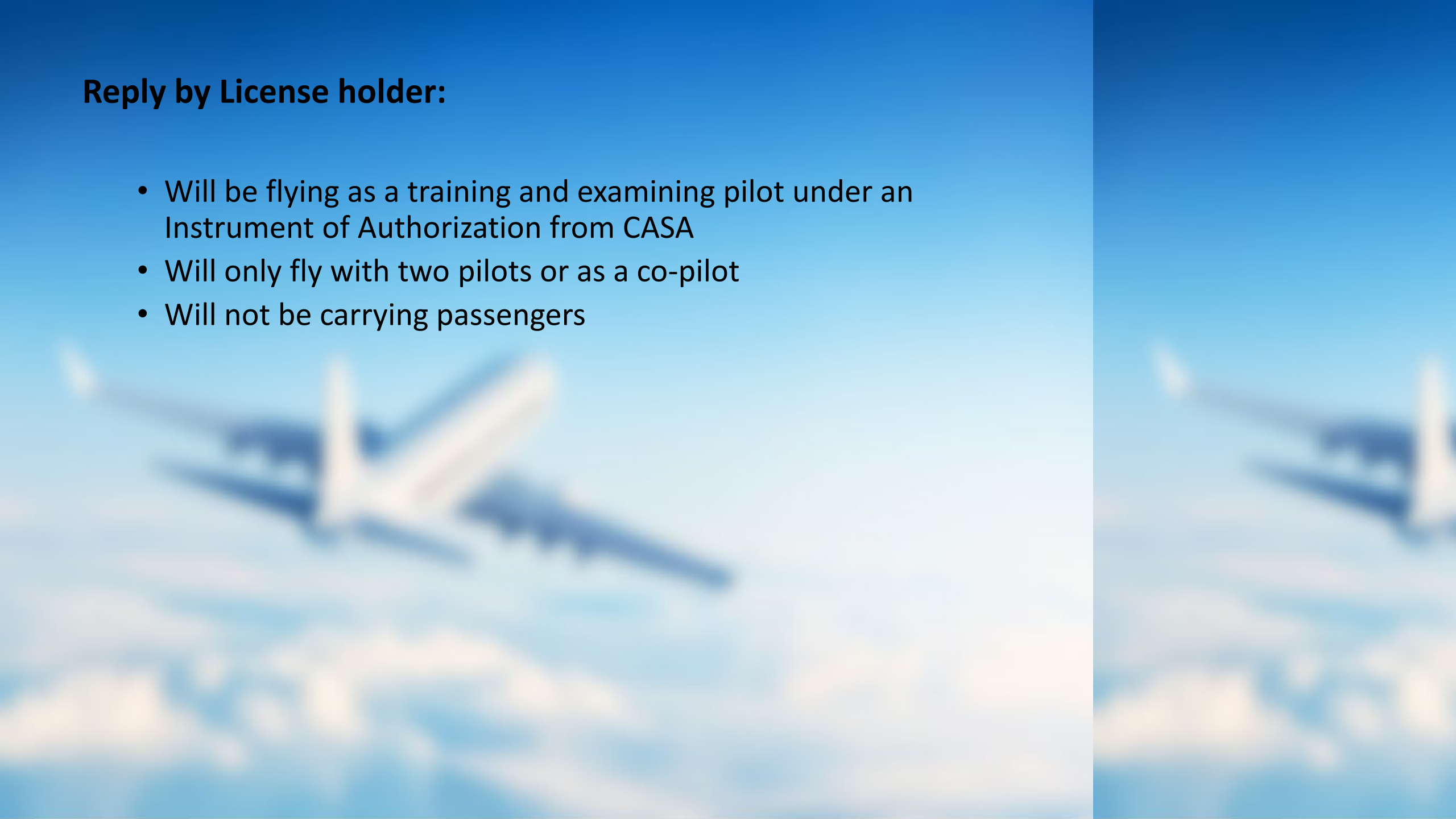
Actions by CASA

Email to license holder with the following restrictions on his medical:

1. Suspend medical
2. Advised that ground trial for escitalopram will be for 6months
3. After the ground trial he is to be reviewed by a psychiatrist and cognitive screening done with reports to be sent to CASA and your DAME for recertification

Reply by License holder:

- Will be flying as a training and examining pilot under an Instrument of Authorization from CASA
- Will only fly with two pilots or as a co-pilot
- Will not be carrying passengers

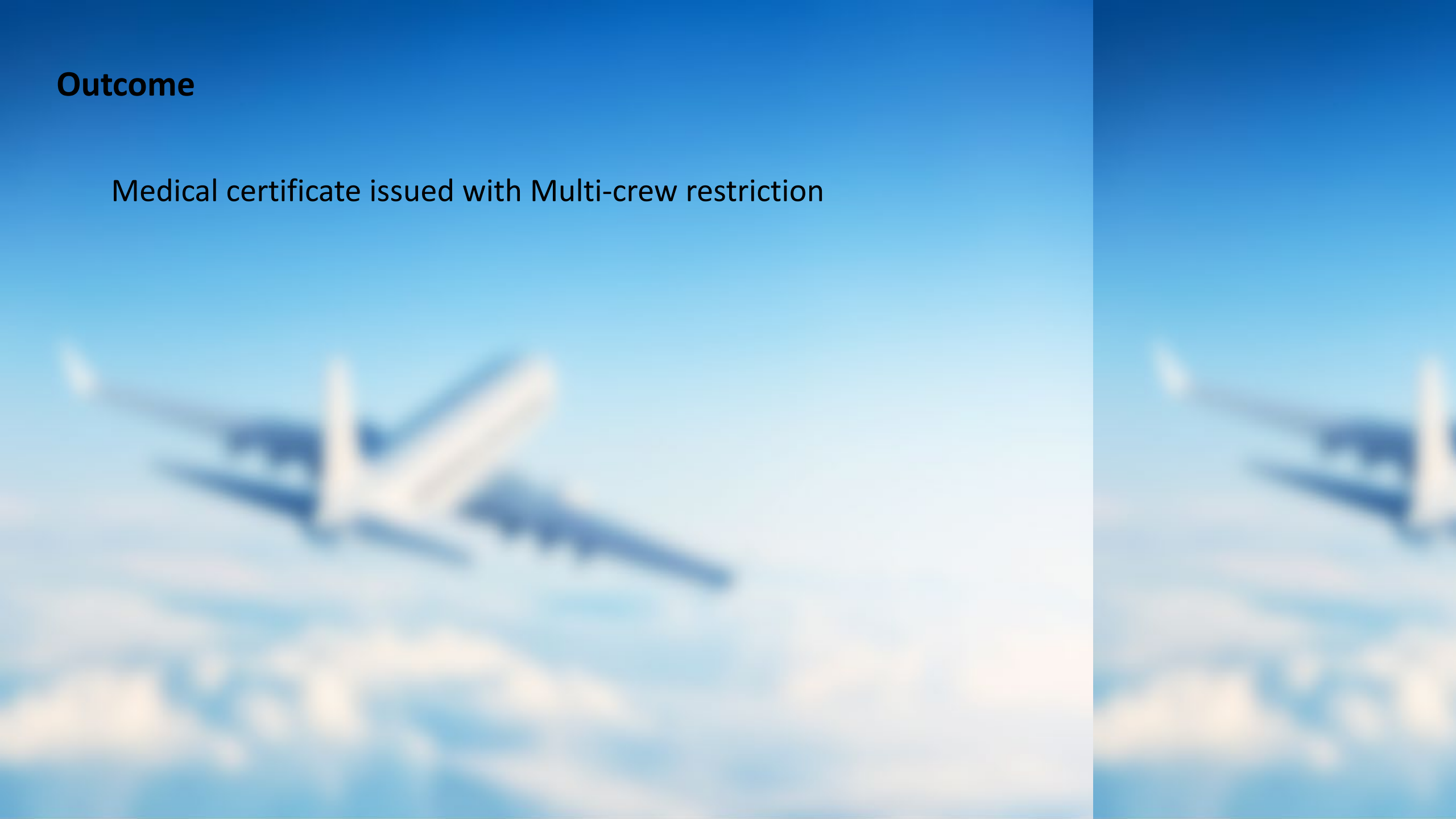


Psychiatrist report :

- Report – good review
- Brief Mental state examination (MSE) form – Appearance, Attitude, Behaviour, Speech, Affect, Mood, Thought process, Thought Content, Perception, Orientation, Memory/Concentration, Insight/Judgement – All were good
- Brief Cognitive Assessment Tool (BCAT) – Orientation, Attention, Memory, Language, Visuospatial Skills, Executive Functioning, Contextual Memory, Attention Capacity Items – scores 20/20 signaling “Normal Cognitive Function”

Outcome

Medical certificate issued with Multi-crew restriction



Discussion points:

1. Would you approach this differently?
2. Would you certify if the request was for single crew operations?
3. Would you certify if this was for a commercial operation – fixed with a lot of passengers?

Thank you tru!

