There are many types of epilepsy. Generally, to be diagnosed as having epilepsy you must have had more than one seizure (fit or turn).

Seizures may result in involuntary and uncontrolled movements and a change in your state of consciousness (anything up to unconsciousness).

Am I legally allowed to drive?
Because of the wide range in types of epilepsy and types of driver licence, the NZ Transport Agency (NZTA) doesn’t apply one rule in all situations.

Instead, we urge anyone who has recently had even one seizure to check with their doctor before driving.

A single seizure doesn’t necessarily mean you have epilepsy, but it does mean you will need to stop driving for 12 months. In exceptional circumstances the 12-month stand-down period may be reduced if there is a clearly identified non-recurring cause for the seizure. The 12-month stand-down period can be reviewed in consultation with a neurologist and your general practitioner.

Guidelines for private drivers

You’re a private driver if you don’t earn a living from your driving (eg you don’t have a P, V, I or O endorsement on your licence and you don’t drive Class 2-5 work vehicles). You can follow these simple guidelines, but you still need to check with your doctor for more details.

Controlled epilepsy: No seizures

Once you’ve been given suitable treatment (usually regular medication) you may reach a stage where the epilepsy seems controlled and you haven’t had a seizure for a substantial time.

Normally we’d need the period without seizures to be 12 months before we’d consider your epilepsy to be controlled. Under certain circumstances this may be reviewed in consultation with a neurologist and your general practitioner. It may be reduced to six months at the discretion of the NZTA.

The NZTA may consider granting a commercial driver licence to individuals who aren’t on medication if they have been free of seizures for five years.

Controlled epilepsy: sleep epilepsy

If you’ve got an established pattern of sleep epilepsy, and for the last 12 months you’ve not had any seizures when you’re awake, then you should be able to drive a private motor vehicle. (An established pattern means at least three years where you only have seizures or turns when you’re asleep or upon waking.)

If you do ever have a seizure when you’re awake, the guidelines described earlier in this factsheet under ‘Controlled epilepsy: No seizures’ would apply.

Uncontrolled epilepsy

Epilepsy is considered uncontrolled when:

- there have been seizures (fits, turns) in the last 12 months
- treatment has changed and the new treatment has to be monitored for a period of time to assess its impact
- people don’t take their medication to prevent seizures.

Note: When your epilepsy is uncontrolled, you must get medical advice to establish when it will be safe for you to resume driving.

Other conditions

Anyone with head injuries severe enough to have caused unconsciousness, or loss of memory and tumours of the brain, may develop epilepsy. In these circumstances you must stop driving until you have consulted a neurologist about your fitness to resume.

Driving for work

When drivers with private vehicle licences do a lot of driving as part of their work (eg sales people, couriers) the risks from epilepsy are higher. Talk with your doctor about it. There may be insurance problems, or it may be unwise for other reasons to continue such driving.

As long as your epilepsy is controlled (see above), then your private driver licence itself should not be at risk, provided you follow medical advice.

P, V, I or O endorsements and heavy vehicle licence classes

These classes of driver licence and occupational endorsements are not usually available to anyone with a history of epilepsy.

Febrile convulsions in childhood, which stopped before the age of five years, don’t count as a history of epilepsy.

Precautions while driving

Once you’re able to drive again, there are some important things to do and know:

- Check that your insurance policies are valid. Tell your insurer of your condition.
- If your work is going to involve driving, tell your employer of your condition.
• Don’t drive sooner than 12 hours after even one drink of alcohol. There is a danger period following alcohol consumption which is greatest when the blood alcohol level has fallen to near zero. It isn’t safe for you to drive for 12–24 hours following even moderate alcohol consumption, or longer if you’ve had more to drink.

• When you change or stop your medication suddenly, stop driving until a doctor confirms that you’re safe.

• If you have a seizure (fit or turn) for the first time in years, stop driving and consult your doctor. The same applies to those with sleep epilepsy who suddenly have a seizure (fit, turn) while they’re awake.

• You are more likely to have a seizure (fit, turn) when you’re overtired or ill.

• If anyone (regardless of whether they’ve had epilepsy) suffers a head injury severe enough to cause unconsciousness or amnesia, they must stop driving until they have consulted a neurologist about their fitness to resume.

• If you have more than one seizure-related crash you may be subject to a five-year period without any seizures before you can return to driving.

Where you can find out more

Your doctor is the best person to ask further questions about epilepsy. A handbook, Medical aspects of fitness to drive (which includes advice on licensing drivers with epilepsy), has been issued to all doctors.

The information in this factsheet is a general guide only. It is not the source of the law and should not be used in place of authoritative legal documents. Some factsheets are updated frequently and print versions can quickly become out of date. If the currency of the information you are reading is important, check the factsheet index on our website (www.nzta.govt.nz/factsheets) or call us on 0800 822 422.

Contact details

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