

INTRODUCTION

AEROMEDICAL CONCERNS: Aircrew-members should be evaluated for restriction from flying duties when initiating any medication and also be advised of potential side effects. When using a medication, the following should be considered: (1) Medication and/or the underlying medical condition is compatible with aviation duty, (2) Medication is effective and essential to treatment, (3) Aircrew member is free of aeromedically significant side effects after a reasonable observation period.

WAIVERS: The Commander, U.S. Army Aeromedical Center, has reviewed and classified a wide range of medications for use in the aviation environment. Medications are designated Class 1, 2A, 2B, 3 and 4. Medications not on this list are currently incompatible with the aviation environment or little information of its safe use in the aviation environment exists. New medications are reviewed constantly and waiver requests are considered on a case- by-case basis but often take a great deal of time. Flight surgeons are encouraged to use the medications on this list to avoid lengthy delays in the waiver action process.

Class 1: Over-the-counter medications which may be used without a waiver. Occasional and infrequent use of these over-the-counter medications does not pose a risk to aviation safety or violate the intent of AR 40-8, Temporary Flying Restrictions Due to Exogenous Factors, August 1976, when a flight surgeon is not available. These are approved for acute non-disqualifying conditions and do not require a waiver. Use in accordance with standard prescribing practices.

Class 2A: These medications require a prescription and may be used short term under the supervision of a flight surgeon without a waiver. **CAUTION:** The underlying medical condition may be disqualifying and require a waiver.

Class 2B: These medications require a prescription and may be used for short-term or chronic use under the supervision of a flight surgeon without a waiver. **CAUTION:** The underlying condition may require a waiver. These medications must be noted annually on the FDME for Information Only and the flight surgeon must comment on usage and dosage. First time use requires an initial 24-hour grounding period to ensure the aircrew member is free of significant side effects. Subsequent use does not require grounding.

Class 3: These medications require a prescription and may receive favorable waiver recommendation only on an individual basis for treatment or control of certain chronic conditions. The underlying disease process may also require a waiver.

Class 4: Use of these medications necessitates grounding the aviator and is not waivable for flying duty.

Herbal Preparations/Supplements: The majority are prohibited for aviation duty as many are used in cases of self-diagnosis and self treatment. In many cases, studies do not reveal significant clinical efficacy. Some preparations may be used under the guidance of the flight surgeon. See the Herbals/Dietary Supplements APL (TBP).

INFORMATION REQUIRED :

- ❖ AMS listing:
 - Dosage,
 - Frequency of use,
 - Any side effects; and,
 - Complete summary of the aircrew-members medical condition.

- ❖ If a new drug is being recommended, forward a complete justification of the medication, i.e., rationale for use, safety considerations, availability of the drug during mobilization of the unit, and any studies supporting its use in the aviation environment. Bear in mind that all FS/APAs can be contributors to policy change.

FOLLOW-UP: Appropriate follow-up is predicated upon the specific medication and the underlying medical condition. These requirements are given under specific reference to the applicable medication or medical condition.

TREATMENT: N/A

DISCUSSION: Medication side effects are very hard to predict. They occur with irregularity and often differently in any given population group. The side effects relating to central nervous, cardiogenic, ophthalmologic, and labyrinthine systems are understandably the most troubling in the aircrew member. One must also consider the unique environmental considerations present in the aviation environment, i.e., G-forces, hypoxia, pressure changes, noise, heat, cold, acute and chronic fatigue; and how these effect the medication or the underlying medical condition.

REFERENCE:

Physicians Desk Reference, 56th Edition, Medical Economics, Montvale, NJ, 2002.

American Hospital Formulary Service Drug Information 2001, American Society of Health System Pharmacists, Bethesda, MD, 2001.