



Drowsy Driving Fact Sheet

- It is difficult to attribute crashes to sleepiness because there is no test to determine its presence as there is for intoxication (i.e., a “breathalyzer”). In addition, there are no standardized criteria for determining driver sleepiness and there is little or no police training in identifying drowsiness crash factors. Also, to date, six states (Alabama, Missouri, Arkansas, Delaware, Massachusetts, and Wisconsin) do not have a code for sleepiness on their crash report forms.
- The U.S. National Highway Traffic Safety Administration (NHTSA) estimates that approximately 100,000 police-reported crashes annually (about 1.5% of all crashes) involve drowsiness/fatigue as a principal causal factor. A conservative estimate of related fatalities is 1,500 annually or 4% of all traffic crash fatalities. At least 71,000 people are injured in fall-asleep crashes each year. NHTSA estimates these crashes represent \$12.5 billion in monetary losses each year.
- Drowsiness/fatigue may play a role in crashes attributed to other causes. About one million crashes annually – one-sixth of all crashes – are thought to be produced by driver inattention/lapses. Sleep deprivation and fatigue make such lapses of attention more likely to occur.
- In a 1999 NSF poll, 62% of all adults surveyed reported driving a car or other vehicle while feeling drowsy in the prior year. Twenty-seven percent reported that they had, at some time, dozed off while driving. Twenty-three percent of adults stated that they know someone who experienced a fall-asleep crash within the past year.
- People tend to fall asleep more on high-speed, long, boring, rural highways. New York police estimate that 30% of all fatal crashes along the New York Thruway occurred because the driver fell asleep at the wheel.

WHO IS MOST AT RISK?

All Drivers who Are:

- Sleep-deprived or fatigued
- Driving long distances without rest breaks
- Driving through the night, the early afternoon, or at other times when they are normally asleep
- Taking medication that increases sleepiness or drinking alcohol
- Driving alone
- Driving on long, rural, boring roads
- Frequent travelers, e.g., business travelers

WHO IS MOST AT RISK?

Young People

- Sleep-related crashes are most common in young people, who tend to stay up late, sleep too little, and drive at night. In a North Carolina state study, 55% of fall-asleep crashes involved people 25 years old or younger. 78% were males. The peak age of occurrence was 20.

Shift Workers

- 25 million Americans are rotating shift workers. Studies suggest that 20 to 30% of those with non-traditional work schedules have had a fatigue-related driving mishap within the last year. The drive home from work after the night shift is likely to be a particularly dangerous one.

Commercial Drivers

- Truck drivers are especially susceptible to fatigue-related crashes. In addition to the high number of miles driven each year, many truckers may drive during the night when the body is sleepest. Truckers may also have a high prevalence of a sleep and breathing disorder called sleep apnea. Studies suggest truck driver fatigue may be a contributing factor in at least 30 to 40 percent of all heavy truck accidents.

People with Undiagnosed Sleep Disorders

- The presence of a sleep disorder increases the risk of crashes. Disorders such as chronic insomnia, sleep apnea and narcolepsy, all of which lead to excessive daytime sleepiness, afflict an estimated 30 million Americans. Most people with sleep disorders remain undiagnosed and untreated. Sleep apnea occurs in 4% of middle-aged men and 2% of middle-aged women. The disorder is associated with a three- to seven- time increase in crash risk.

WHAT ARE EFFECTIVE COUNTERMEASURES?

Before motorists embark on their trips, they should:

- Get a good night's sleep. While this varies from individual to individual, the average person requires about 8 hours of sleep a night.
- Plan to drive long trips with a companion. Passengers can help look for early warning signs of fatigue or switch drivers when needed. Passengers should stay awake to talk to the driver.
- Schedule regular stops, every 100 miles or 2 hours.
- Avoid alcohol and medications (over-the-counter and prescribed) that may impair performance. Alcohol interacts with fatigue; increasing its effects — just like drinking on an empty stomach.
- Consult your physician or a local sleep disorders center for diagnosis and treatment if you suffer frequent daytime sleepiness, have difficulty sleeping at night often, and/or snore loudly every night.

Once driving, motorists should look for the following warning signs of fatigue:

- You can't remember the last few miles driven
- You drift from your lane or hit a rumble strip
- You experience wandering or disconnected thoughts
- You yawn repeatedly
- You have difficulty focusing or keeping your eyes open
- You tailgate or miss traffic signs
- You have trouble keeping your head up
- You keep jerking your vehicle back into the lane

If you are tired, recognize that you are in danger of falling asleep and cannot predict when a microsleep may occur.

- Don't count on the radio, open window or other "tricks" to keep you awake.
- Respond to symptoms of fatigue by finding a safe place to stop for a break.
- Pull off into a safe area away from traffic and take a brief nap (15 to 45 minutes) if tired.
- Drink coffee or another source of caffeine to promote short-term alertness if needed.
(It takes about 30 minutes for caffeine to enter the bloodstream.)

For More Information, Contact:

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