

Tonio Borg

Member of the European Commission, responsible for Health

Commissioner Borg delivers speech on road safety: "Wake-up Europe – Don't sleep at the wheel"

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Tonio Borg, European Commissioner for Health, addresses the European Parliament at an event organised by the European Sleep Research Society

Brussels, Belgium, 15 October 2013

OPENING SESSION OF THE EVENT

"WAKE-UP EUROPE – DON'T SLEEP AT THE WHEEL"

**HOSTED BY MEP PAULO RANGEL
ORGANISED BY THE EUROPEAN SLEEP RESEARCH SOCIETY**

**TUESDAY 15 OCTOBER 2013, 17:00HRS
EUROPEAN PARLIAMENT - BRUSSELS**

OPENING SPEECH

Honourable Members of Parliament,

Ladies and Gentlemen,

I am delighted to be here with you today in this meeting to say a few words about "not sleeping at the wheel" and what the EU is doing to help.

I would first like to thank Mr Paulo Rangel for inviting me and convening this important event.

Falling asleep while driving can have serious consequences which we all know: health problems, disability, or worse.

The EU has addressed the issue of road safety for many years together with the Member States. And there has been real progress.

The latest EU road safety figures show that, in 2012, there were 9 per cent fewer people killed on Europe's roads than in 2011.

However, a lot remains to be done to reduce the toll of road accidents.

We must take action both to protect the drivers and the other road users. Despite declining rates of road traffic deaths, the percentage of road users fatalities remains stable.

Sleepiness at the wheel has many causes.

Fatigue is an important cause. It is estimated that sleepiness is responsible for about 20 - 25% of traffic accidents in Europe.

The Commission acknowledges that sleepiness, in particular Obstructive Sleep Apnea Syndrome, is a risk factor in road safety; a factor that needs to be taken into

account in the delivery of driving licences and in the working conditions of professional drivers.

Firstly we need to be clear.

Drivers themselves must take responsibility in this matter. Drivers need to be made aware of the potential risk of fatigue when driving, and the need to take sufficient breaks or rest to help mitigate its effect.

People who are not fit to drive should not drive.

People who are already driving when they become unfit, should stop driving.

It is a simple message which needs to be passed across widely in national road safety campaigns.

What can the EU do to help?

First we can support Research on sleep, sleep disorders and how to address them for example through road and vehicle design.

As early as 1998, with the Fifth Research Programme, the Commission supported a project called "AWAKE".

This project developed a driver monitoring system that was able to detect driver drowsiness in real-time; and warn the driver through visual warning on rear-view mirror, seat-belt vibration, and sounds, all to wake up the driver and prevent accidents.

Since then, systems of this type have been introduced in cars, coaches and commercial vehicles.

The Commission has also supported a number of studies. One recent study noted that the time of day - early hours of the morning and late afternoon - and the nature of the road contributed to the likelihood of fatal accidents from fatigue.

In addition to supporting research on drowsiness, the current Framework Programme for Research has also invested some 5.5 million Euros to deepen our understanding of the role of sleep in brain functioning, memory and mood disorders.

The new research and innovation programme, Horizon 2020, which will begin next year, recognises road safety as a critical factor. Horizon 2020 will offer opportunities:

- to specifically address research on causes of road accidents and on actions for their prevention and mitigation; and
- to develop evidence-based strategies for the prevention, diagnosis and treatment of diseases, including sleep disorders.

Our action does not stop here.

In addition to the support we are providing on research, there are a number of actions we are undertaking in the field of health which I would like to mention.

I said earlier that fatigue is an important cause of sleeping at the wheel. Another important cause is alcohol intake.

We know that one in four deaths on EU roads is linked to alcohol, resulting in 8.000 lives lost due to drink-driving every year.

We also know that alcohol is a risk factor for sleep disorders. Sleep disruption resulting from excess alcohol intake can lead to daytime fatigue and sleepiness and also cause accidents in this way.

Helping to reduce the harmful and inappropriate use of alcohol is therefore one important area for action.

Alcohol intake is so important in relation to road traffic accidents, that we have made progress in this area - one of the top priorities of the EU alcohol strategy.

We are working hard with Member States, with the alcohol and hospitality industry and with other stakeholders to address this issue.

Our action includes campaigns to raise awareness on the risks of alcohol, voluntary curbs on marketing of alcohol, exchange of best practice and support for projects.

A number of Member States report encouraging progress in this area, and we are currently considering what further actions we need to take.

Yet another cause of sleeping disorders which fewer people know about is obesity.

Obesity is a very important cause of sleep disorders, such as sleep apnea, which can cause exhaustion and fatigue: again risk factors for road accidents.

Under the 2007 Strategy for Europe on Nutrition, Overweight and Obesity-related Health, Member States, Stakeholders and the European Commission are undertaking action to promote healthy diets and physical activity.

I am confident that our action in this area can help reduce obesity, and, as such, also contribute to reducing its consequences – sleep disorders being one of them.

Finally, allow me a few words on yet another cause of sleepiness at the wheel: mental health problems.

The interrelation between sleep disorders and major depressive episodes is undeniable: people with insomnia are more likely to have a major depressive disorder.

On the other hand people with anxiety or depressive disorders experience high rates of sleep disturbances. Plus depression is in itself a risk factor for increased alcohol consumption.

In this regard, I have launched earlier this year a Joint Action on Mental Health and Well-being with 25 Member States – led by Portugal - to help prevent depression, to promote its early detection and to improve access to treatment and self-management tools.

Ladies and Gentlemen,

Let me conclude.

Sleeping disorders are not very well known, compared to other diseases. And yet they can severely impact on people's quality of life, on their safety and on the safety of others.

Sleeping or not sleeping at the wheel can make the difference between life and death.

We need to work together to address this important issue. And this is why we are here today.

I wish you a fruitful discussion.

Thank you.