

Effects of Central Nervous System Depressant
Drug Overdose on Cognitive Functions and
Driving

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This thesis is submitted for the degree of Doctor of Philosophy,

The University of Newcastle, Australia

Submitted: March 2012

Declarations

Statement of originality

*This thesis contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. I give consent to this copy of my thesis, when deposited in the University Library**, being made available for loan and photocopying subject to the provisions of the Copyright Act 1968.*

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Thesis by Publication

I hereby certify that this thesis is in the form of a series of published papers of which I am a joint author. I have included as part of the thesis a written statement from each co-author, endorsed by the Faculty Assistant Dean (Research Training), attesting to my contribution to the joint publications.

Tharaka Dassanayake

(Date)

Acknowledgements

First I wish to thank the people and the institutions that helped me to get this PhD position at the University of Newcastle. The Department of Physiology at the Faculty of Medicine, University of Peradeniya granted me a generous 4-year leave. Thanks you to my work colleagues back in Sri Lanka for encouraging me in many ways to pursue this PhD and sharing the departmental workload in my absence. I am grateful to the Department of Education, Employment and Workplace Relations of the Australian Government for supporting my PhD with an Endeavour Postgraduate Scholarship.

I cannot express enough of my gratitude to my supervisors Emeritus Professor Patricia Michie, Professor Alison Jones and Professor Gregory Carter. Pat had always been an exemplary figure of academic rigor and integrity that I could look up to. Pat, thanks for your guidance throughout the progress of this work, and many more thanks for backing me up when things were not progressing. Alison played a pivotal role in inception of this research, and continued to drive from Sydney for our fortnightly research meetings for more than two years despite all her commitments. Greg had been constantly tracking and supporting my work: countless ad hoc meetings and discussions that I had with him proved extremely fruitful.

This thesis would not have become a reality without support of many other people. My co-authors Professor Ian Whyte, Dr. Trevor Mallard, Dr. Patrick McElduff and Mr. Barrie Stokes helped me at different stages of study design, data collection and analysis, and manuscript preparation. Dr. Colin Page, Dr. Michael Downes, Dr. Geoff Isbister and all members of the Clinical Toxicology Team and the Consultation-Liaison Psychiatry Team at Calvary Mater Newcastle helped in participant recruitment. Special thanks to Dr. Jane Robertson, Professor Catherine D'Este, Mr. Phil Sparks and Ms Kerry Rogers who helped in the epidemiological study and NSW Roads and Traffic authority and Centre for Health Record Linkage who undertook data-linkage in that study. To Members of the Department of Clinical Pharmacology and Toxicology and my lab-mates at School of Psychology: thank you for your comments, suggestions and friendship. I greatly appreciate the goodwill of the patients who participated in my research at a turbulent time of their lives.

Finally, thanks to my wife Deva, for her love, friendship and commitment during the four long years of my PhD research.

Dedication

...To my mother

Berney Dassanayake...

List of publications included as part of the thesis

Paper 1 (Chapter 3): Dassanayake TL, Michie P, Carter G, Jones A. Effects of benzodiazepines, Antidepressants and opioids on driving: a systematic review of epidemiological and experimental evidence. *Drug Safety* 2011, 34 (2): 125-156. doi:10.2165/11539050-000000000-00000

Paper 2 (Chapter 5): Dassanayake TL, Michie PT, Jones AL, Carter GL, Mallard T, Whyte IM. Cognitive impairment in patients clinically recovered from central nervous system depressant drug overdose. *Journal Clinical Psychopharmacology*. In press (accepted: 12/01/2012)

Paper 3 (Chapter 6): Dassanayake TL, Michie PT, Jones AL, Mallard T, Whyte IM, Carter GL Cognitive skills underlying driving in patients discharged following self-poisoning with central nervous system depressant drugs. *Traffic Injury Prevention*. In press (accepted: 28/02/2012)

Paper 4 (Chapter 7): Dassanayake TL, Jones AL, Michie PT, Carter GL, McElduff P, Stokes BJ, Whyte IM. Risk of road traffic accidents in patients discharged following treatment for psychotropic drug overdose: a self-controlled case series study in Australia. *CNS Drugs* 2012, 26 (3): 269-76. doi: 10.2165/11599790-000000000-00000

Statement of contribution of others

Co-author statement

We, Patricia Therese Michie, Alison Linda Jones and Gregory Leigh Carter attest that Research Higher Degree candidate Tharaka Dassanayake contributed to the following papers/publications of which we are co-authors.

- Dassanayake TL, Michie P, Carter G, Jones A. Effects of benzodiazepines, Antidepressants and opioids on driving: a systematic review of epidemiological and experimental evidence. *Drug Safety* 2011, 34 (2): 125-156.

All authors designed the study. Tharaka did the literature search, evaluated the papers, performed meta-analyses and wrote the initial manuscript. All authors revised the paper.

- Dassanayake TL, Michie PT, Jones AL, Carter GL, Mallard T, Whyte IM. Cognitive impairment in patients clinically recovered from central nervous system depressant drug overdose. *Journal Clinical Psychopharmacology*. In press
- Dassanayake TL, Michie PT, Jones AL, Carter GL, Mallard T, Whyte IM. Cognitive skills underlying driving in patients discharged following self-poisoning with central nervous system depressant drugs. *Traffic Injury Prevention*.

Tharaka took the leading role in designing this project, collected all data and performed the statistical analyses. He wrote the two manuscripts that were revised by the all authors.

- Dassanayake TL, Jones AL, Michie PT, Carter GL, McElduff P, Stokes BJ, Whyte IM. Risk of Road Traffic Accidents in Patients Discharged Following Treatment for Psychotropic Drug Overdose: a Self-Controlled Case Series Study in Australia. *CNS Drugs*. 2012; 26 (3): 1-8

This study was jointly developed by Tharaka and other co-authors. Tharaka handled data acquisition. Tharaka and Patrick McElduff performed data analysis and interpretation. Tharaka wrote the first manuscript which was revised by all authors.

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- Dassanayake TL, Michie PT, Jones AL, Carter GL, Mallard T, Whyte IM. Cognitive impairment in patients clinically recovered from central nervous system depressant drug overdose. *Journal Clinical Psychopharmacology*. In press
- Dassanayake TL, Michie PT, Jones AL, Mallard T, Whyte IM, Carter GL. Cognitive skills underlying driving in patients discharged following self-poisoning with central nervous system depressant drugs. *Traffic Injury Prevention*.

Tharaka took the leading role in designing this project, collected all data and performed the statistical analyses. He wrote the two manuscripts that were revised by the co-authors.

- Dassanayake TL, Jones AL, Michie PT, Carter GL, McElduff P, Stokes BJ, Whyte IM. Risk of Road Traffic Accidents in Patients Discharged Following Treatment for Psychotropic Drug Overdose: a Self-Controlled Case Series Study in Australia. *CMS Drugs*. 26 (3): 1-8

This study was jointly developed by Tharaka and other co-authors. Tharaka handled data acquisition. Tharaka and Patrick McElduff performed data analysis. Tharaka wrote the manuscript and which was revised by all co-authors.

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- Dassanayake TL, Michie PT, Jones AL, Carter GL, Mallard T, Whyte IM. Cognitive impairment in patients clinically recovered from central nervous system depressant drug overdose. *Journal Clinical Psychopharmacology*.
- Dassanayake TL, Michie PT, Jones AL, Carter GL, Mallard T, Whyte IM. Cognitive skills underlying driving in patients discharged following self-poisoning with central nervous system depressant drugs. *Traffic Injury Prevention*.

Tharaka took the leading role in designing this project, collected all data and performed the statistical analyses. He wrote the two manuscripts that were revised by the co-authors.

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- Dassanayake TL, Jones AL, Michie PT, Carter GL, McElduff P, Stokes BJ, Whyte IM. Risk of Road Traffic Accidents in Patients Discharged Following Treatment for Psychotropic Drug Overdose: a Self-Controlled Case Series Study in Australia. *CNS Drugs*. In press

This study was jointly developed by Tharaka and other co-authors. Tharaka acquired data from primary sources. Tharaka and I performed data analysis. Tharaka wrote the initial manuscript which was reviewed by all co-authors.

Co-author statement

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- Dassanayake TL, Jones AL, Michie PT, Carter GL, McElduff P, Stokes BJ, Whyte IM. Risk of Road Traffic Accidents in Patients Discharged Following Treatment for Psychotropic Drug Overdose: a Self-Controlled Case Series Study in Australia. *CNS Drugs* 2012; 26 (3): 1-8

This study was jointly developed by Tharaka and other co-authors. Tharaka made the main contribution to data acquisition and analysis and wrote the manuscript which was revised by all authors.

List of additional publications

Journal abstracts:

- Dassanayake T, Michie PT, Jones A, Carter G, Whyte I, Mallard T. Incomplete recovery of cognitive functions in patients discharged following sedative drug overdose. *Clinical Toxicology* 2010, 48(6): 636.

Conference presentations:

- Cognitive function in patients with sedative psychotropic drug overdose. *Centre for Brain and Mental Health Research Postgraduate and Postdoctoral Conference*. October 2009, University of Newcastle, Australia
- Cognitive functions in Patients with sedative psychotropic drug overdose. *Annual Conference of Australasian Society for Psychiatric Research*. 2-4 December 2009. Canberra, Australia.
- Incomplete recovery of cognitive functions at discharge in patients with CNS depressant drug overdose. *North American Congress of Clinical Toxicology*. 7-12 October 2010. Denver, Colorado USA.
- Increased risk of road traffic accidents in patients discharged following treatment for psychotropic drug overdose. *Priority Research Centre for Brain and Mental Health Fourth Annual Postgraduate and Postdoctoral Conference*. 30 November 2011, Newcastle
- Cognitive impairment in patients discharged following CNS-depressant drug overdose, and its implications in driving. *Australasian Society of Psychiatric Research Conference*. 5-8 December 2011, Dunedin, New Zealand

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Synopsis

Self-poisoning with pharmaceutical agents is very common across the world. Central nervous system depressant drugs (CNS-Ds) are among the most common substances taken in overdose in hospital-treated episodes of self-poisoning in Australia, the UK and the US. The majority of the patients with CNS-D overdose treated in hospitals in Australia and the UK are discharged within 24-48 hours of their admission, when they still could potentially have subclinical effects of those drugs.

This thesis systematically reviews published evidence on the effects of CNS-Ds on cognitive functions (Chapter 2), automobile driving and traffic accidents (Chapter 3, Paper 1), and presents original research conducted to examine the effects of CNS-D overdose on cognitive functions underpinning daily activities (Chapter 5, Paper 2), surrogate bedside tests of driving skills (Chapter 6, Paper 3) and risk of traffic accidents (Chapter 7, Paper 4) of patients discharged from hospital following treatment.

Comprehensive neuropsychological assessment shows that patients discharged after treatment for CNS-D overdose have significant residual impairments in multiple cognitive functions including visual attention and visuomotor skills, decision-making, and executive functions and working memory (Chapter 5). The impairments, as estimated by regression models, were equivalent to a 'cognitive ageing' of 10-20 years depending on the domain tested. Furthermore, executive dysfunction of the patients tends to worsen with increasing task demands.

Converging evidence from the neuropsychological assessment and epidemiological approach indicates that CNS-D overdose has deleterious effects on driving. In particular, the performance of Trail-Making Test B, when interpreted with

respect to its correlation with driving performance and traffic accident risk, suggests that nearly two-thirds of the patients with CNS-D overdose may be grossly impaired ($\leq 10^{\text{th}}$ percentile) at the time of discharge from hospital (Chapter 6, Paper 3). The epidemiological evidence (Chapter 7, Paper 4) shows that the traffic accident risk of these individuals increases by 3-4 times in the immediate post-discharge period, and remains nearly twice their baseline risk after one week following overdose.

In the concluding chapter (Chapter 8), we examine the impact of these impairments on daily activities that the discharged patients are expected and likely to carryout during the post-discharge period, and discuss the clinical implications in post-discharge management of patients treated for CNS-D overdose.