

Background

- Driving requires the ability to **receive** sensory information, **process** the information, and to **make proper, timely judgments** and responses
- Various motor, visual, cognitive and perceptual deficits can affect the ability to drive and **lead to reduced driver fitness and increased accident probability**
- More specifically, diseases **affecting a person's brain functioning** may significantly impair the person's driving performance
- Parameters associated with driving performance** are reaction time, visual attention, speed of perception and processing, and general cognitive and executive functions
- Driver distraction** is estimated to be an important cause of vehicle accidents, and when combined with a brain pathology it can lead to significant deterioration in driving performance



Objective and scope

- The analysis of the **accident probability** of drivers with **cognitive impairments** due to brain pathologies, through a large driving simulator experiment
- The investigation of the **impact of driver distraction** on the accident probability
- The brain pathologies examined include early **Alzheimer's disease (AD)**, early **Parkinson's disease (PD)**, and **Mild Cognitive Impairment (MCI)**
- Groups of patients are compared to a **control group** with no brain pathologies of similar age, driving experience and education

Experimental Design

- Distract** and **DriverBRAIN** research projects
- Neurologists - Medical/neurological assessment:**
 - administration of a full clinical medical, ophthalmological and neurological evaluation
- Neuropsychologists - Neuropsychological assessment:**
 - administration of a series of neuropsychological tests and psychological - behavioural questionnaires to the participants which cover a large spectrum of Cognitive Functions
- Transportation Engineers - Driving at the simulator**



"Driving at the simulator assessment"

- Concerns the **assessment of driving behaviour** by means of programming of a set of driving tasks for different driving scenarios
- Quarter-cab driving simulator** manufactured by the FOERST Company
- 3 LCD wide screens 42"** (full HD: 1920x1080pixels) - total F.O.V. 170 degrees
- Validated** against a real world environment

- 1 practice drive** (usually 15-20 minutes)
- 1 rural route** (2,1km long, single carriageway, 3m lane width)
- 1 urban route** (1,7km long, at its bigger part dual carriageway, 3.5m lane width)
- 2 traffic scenarios** for each route:
 - Q_L: Low traffic conditions (Q=300 vehicles/hour)
 - Q_H: High traffic conditions (Q=600 vehicles/hour)
- 3 distraction conditions** for each route:
 - Undistracted driving
 - Driving while **conversing with a passenger**
 - Driving while conversing on a hand-held **mobile phone**
- 2 unexpected incidents** occur during each trial:
 - Sudden appearance of an **animal** on the roadway
 - Sudden appearance of a **child chasing a ball** on the roadway or of a **car suddenly getting out** of a parking position.



Sample Scheme

- 125 participants** (all more than 55 years of age and of similar demographic characteristics):
- 34 Healthy Controls** (aver. 64.1 y.o., 25 males)
 - 91 Patients** (aver. 71.2 y.o., 59 males):
 - 43 MCI patients (aver. 70.1 y.o.)
 - 28 AD patients (aver. 75.4 y.o.)
 - 20 PD patients (aver. 66.1 y.o.)

Results - Overview

- We examined and compared the accident probability of:
 - 4 examined groups** (Controls vs MCI vs AD vs PD)
 - in 2 driving areas** (Rural vs urban)
 - in 2 traffic volumes** (Moderate vs high traffic)
 - in undistracted condition at first**
 - and then in 3 distraction conditions** (No distraction vs Conversation with passenger vs Mobile phone use)
- Regression analysis by **generalized linear modeling (GLM) techniques**



| Parameter Estimates of the GLM | | | | | | | | | | |
|---|-------------------|------------|-----------------|----|-------|-------------------|------------|-----------------|----|-------|
| Dependent variable: Accident Probability | | | | | | | | | | |
| Model: (Intercept), Disease, No distraction Condition | | | | | | | | | | |
| Parameter | Low Traffic | | | | | High Traffic | | | | |
| | B | Std. Error | Wald Chi Square | df | Sig. | B | Std. Error | Wald Chi Square | df | Sig. |
| (Intercept) | 0,13 | 0,0 | 11,2 | 1 | 0,001 | 0,04 | 0,0 | 1,4 | 1 | 0,238 |
| MCI | -0,01 | 0,1 | 0,0 | 1 | ,916 | 0,09 | 0,0 | 3,2 | 1 | ,072 |
| AD | 0,15 | 0,1 | 5,4 | 1 | ,020 | 0,19 | 0,1 | 11,6 | 1 | ,001 |
| PD | -0,03 | 0,1 | 0,2 | 1 | ,691 | 0,04 | 0,1 | 0,4 | 1 | ,521 |
| Controls | 0 ^a | | | | | 0 ^a | | | | |
| (Scale) | ,066 ^b | 0,0 | | | | ,055 ^b | 0,0 | | | |

Accident probability GLMs

- AD participants in all 4 driving conditions had **significantly higher accident probability** by more than 15% compared to healthy controls of similar demographics
- PD participants had significantly higher accident probability than controls **only in urban area in high traffic volume** (the most complex driving environment of all four)
- MCI patients didn't have significant differences with the control group in rural road, but on the other hand they had **higher accident probability in urban driving environment**

The effect of distraction

- Mobile phone use had a **detrimental impact on the accident probability** of all patient groups whereas conversation with passenger had significant impact on the accident probability in **urban area for PD group**
- MCI drivers' accident probability was **more than 20%** while conversing through mobile phone
- The accident probability of AD drivers **was 43%(!)** and of PD drivers **was 38%** in rural area while conversing through mobile phone

| Parameter Estimates of the GLM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------------------|------------|-----------------|----|-----------------|----------------|-------------------|------------|-----------------|-----------------|-------|----------------|-------------------|------------|----------------------|----|-------|----------------|-------------------|------------|-----------------|----|-------|----------------|-------------------|-----|-----|---|------|
| Dependent variable: Accident Probability | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Model: (Intercept), Distractor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MCI group | | | | | AD group | | | | | PD group | | | | | Control group | | | | | | | | | | | | | | |
| Parameter | B | Std. Error | Wald Chi Square | df | Sig. | Parameter | B | Std. Error | Wald Chi Square | df | Sig. | Parameter | B | Std. Error | Wald Chi Square | df | Sig. | Parameter | B | Std. Error | Wald Chi Square | df | Sig. | | | | | | |
| (Intercept) | 0,12 | 0,0 | 14,4 | 1 | 0,000 | (Intercept) | 0,27 | 0,0 | 31,4 | 1 | 0,000 | (Intercept) | 0,08 | 0,0 | 3,6 | 1 | 0,057 | (Intercept) | 0,08 | 0,0 | 20,7 | 1 | 0,000 | | | | | | |
| Conversation | -0,01 | 0,0 | 0,0 | 1 | ,888 | Conversation | -0,09 | 0,1 | 1,5 | 1 | ,219 | Conversation | 0,06 | 0,1 | 0,8 | 1 | ,361 | Conversation | -0,02 | 0,1 | 0,3 | 1 | ,593 | | | | | | |
| Mobile phone | 0,19 | 0,1 | 10,3 | 1 | ,001 | Mobile phone | 0,43 | 0,2 | 7,6 | 1 | ,006 | Mobile phone | 0,38 | 0,1 | 10,9 | 1 | ,000 | Mobile phone | 0 ^a | | | | | Mobile phone | -0,05 | 0,1 | 1,8 | 1 | ,176 |
| No distraction | 0 ^a | | | | | No distraction | 0 ^a | | | | | No distraction | 0 ^a | | | | | No distraction | 0 ^a | | | | | No distraction | 0 ^a | | | | |
| (Scale) | ,055 ^b | 0,0 | | | | (Scale) | ,066 ^b | 0,0 | | | | (Scale) | ,053 ^b | 0,0 | | | | (Scale) | ,072 ^b | 0,0 | | | | (Scale) | ,072 ^b | 0,0 | | | |

Conclusions

- The presence of a brain pathology had a **detrimental impact on accident probability** and especially for the AD patients who crashed approximately **1 out of 5 incidents**
- The **traffic volume** didn't have any significant effect on the accident probability
- Urban area leads to increased** accident probability for the group of patients with brain pathologies (especially for the PD patients)
- The **control group seemed unaffected** regarding their accident probability when being distracted
- The **use of the mobile phone had a deleterious effect** on the accident probability of all three groups of patients in almost every examined condition

AD drivers had the worst "accident probability profile" followed by the PD group but only in urban area which constitutes a more complex driving environment. MCI group had an overall lower accident probability compared to AD and PD groups, but not compared to the healthy drivers.

