

The detrimental effect of mobile phone use on the driving competence of patients with neurological diseases affecting cognitive functions

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Structure of the presentation

- Background
- Objective
- Experiment Design
 - Data
 - Analysis methods
- Results
- Discussion & Conclusions





Driving Behaviour and Road Safety



- **Driving in traffic** is more than just knowing how to operate the mechanisms which control the vehicle
- Road accidents constitute a major social problem in modern societies (8th leading cause of fatalities globally and the leading cause of fatalities for young people aged 15-29 years), in 2015:
 - 1.2 million fatalities worldwide
 - 26.000 in the European Union
 - 805 in Greece

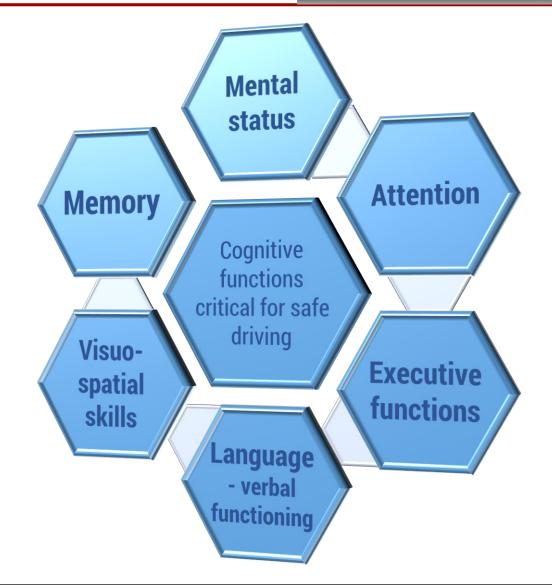


Cognitive functions critical for safe driving



 The task of driving requires the ability to receive sensory information, process the information, and to make proper, timely judgments and responses

 Cognitive functions related to driving may be categorized into six neuropsychological domains





Cerebral diseases and driver distraction



- Diseases affecting a person's brain functioning affect the ability to drive and lead to reduced driver fitness and increased accident risk
- **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
- The interaction of brain disorders and driver distraction, which has not been adequately investigated so far, makes the assessment of their driving competence a very challenging task





Objectives

• The analysis and quantification of the effect of mobile phone use on the driving competence of patients with Mild Cognitive Impairment (MCI), Alzheimer's Disease (AD),

and Parkinson's Disease (PD).

Basic research hypothesis is that the effect
 of the mobile phone use is detrimental on
 their driving performance and the question
 is to what extend their driving competence
 is compromised by this type of distraction.





Experiment Design

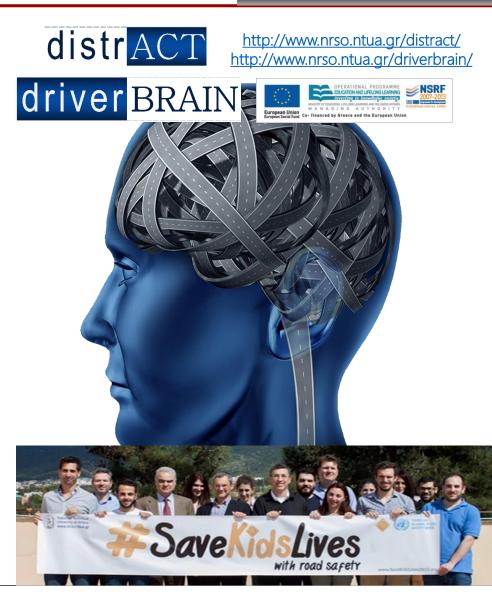
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- Distract and DriverBRAIN research projects
- Neurologists Medical/neurological assessment:
 - administration of a full clinical medical, ophthalmological and neurological evaluation
- Neuropsychologists Neuropsychological assessment:
 - administration 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 simulator





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

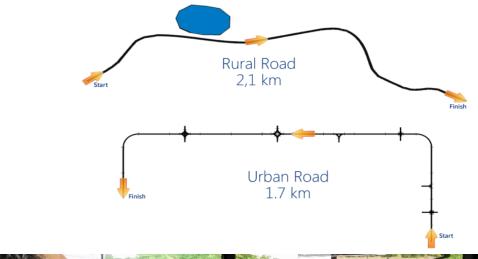
- 3 LCD wide screens 42" (full HD: 1920x1080pixels) total F.O.V. 170 degrees
- Validated against a real world environment



"Driving at the simulator assessment"



- 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:
 - Q₁: Moderate 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 or of a car suddenly getting out of a parking position.

















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.)

Table 1 Comparison of patients with neurological diseases affecting cognitive functions and of the Control group without neurological history on various demographics with the use of the Wilcoxon Rank Sum Test (age >55 y.o.)

	"MCI, AD, PD	"Control" group	P-values
	Patients" group		
Age, y, mean±SD	71.2 ± 7.2	64.1 ± 6.6	0.122
N, M/F (Gender)	91, 59/32	34, 25/9	0.141
Driving experience, y, mean±SD	41.3±5.8	38.7 ± 2.8	0.271
Days/week, median (range)	4 (2-7)	5 (2-7)	0.359
Kilometers driven/weeka, median (range)	3 (2-5)	3 (2-5)	0.416
Accidents (2 years) - reported, median (range)	0 (0-0)	0 (0-0)	1.000
Education, y, mean±SD	12.1±3.5	13.5 ± 2.2	0.812
Simulator sickness ^b - reported, median (range)	0.23 (0-3)	0.18 (0-3)	0.726
^a 1=1-20km; 2=21-50km; 3=50-100km; 4=100-150 and 5>150			
^b Question: Did you feel dizzy at the simulator? 0=Not at all, 1=Just a little, 2	=To some extent, 3=A lo	t	



Analysis Overview

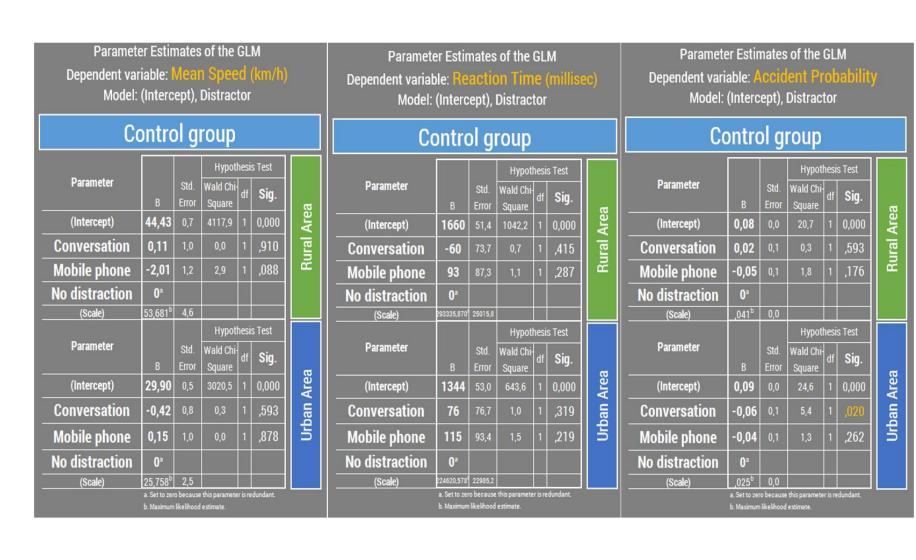
- 4 group of participants
 - Controls vs. MCI vs. AD vs. PD
- 2 driving environments
 - **Rural and Urban**
- 3 distraction conditions
 - No distraction condition
 - **Conversation with passenger**
 - Conversation through handheld mobile phone
- 3 critical driving performance measures
 - **Mean speed**
 - **Reaction time**
 - **Accident probability**
- Regression analysis method:
 - generalized linear modeling (GLM) techniques



Results - Controls



In general terms, the distraction conditions (even the mobile phone use while driving) don't have a significant impact on mean speed, reaction time and accident probability in the group of controls overall, compared to their undistracted driving performance





Results - MCI



In rural area mobile phone use leads to:

- 8% lower speeds,
- 0,34 sec worse reaction time
- 20% higher accident risk for the MCI group compared to their undistracted driving

In urban area mobile phone use leads to:

• 23% higher accident probability

The effect of conversation with passenger isn't that

Parameter Estimates of the GLM
Dependent variable: Mean Speed (km/h)
Model: (Intercept), Distractor

MCI group

			Hypoth	Hypothesis Test			
Parameter		Std.	Wald Chi-	df	Sig.		
	В	Error	Square	ŭ.	Olg.	ea	
(Intercept)	38,20	0,8	2144,2	1	0,000	Are	
Conversation	-1,20	1,2	1,1	1	,304	Rural Area	
Mobile phone	-2,95	1,5	3,7	1	,056	۳ ا	
No distraction	0 ª						
(Scale)	55,815 ^b	5,6					
			Hypoth	nesi	s Test		
Parameter		Std.	Wald Chi-	df	Sig.		
	В	Error	Square	ui	oig.	B	
(Intercept)	26,76	0,6	2144,0	1	0,000	Are	
Conversation	-0,37	0,8	0,2	1	,660	Urban Area	
Mobile phone	0,91	1,3	0,5	1	,475	5	
No distraction	0 ª						
(Scale)	22,041 ^b	2,6					
	a. Set to zer	o because	this paramete	r is re	dundant.		
	b. Maximum	likelihood	estimate.				

Parameter Estimates of the GLM Dependent variable: Model: (Intercept), Distractor

MCI group

			Hypoth	nesi	s Test	
Parameter	В	Std. Error	Wald Chi- Square	df	Sig.)a
(Intercept)	2096	71,3	863,6	1	0,000	Are
Conversation	-91	100,8	8,0	1	,365	Rural Area
Mobile phone	343	135,5	6,4	1	,011	۳
No distraction	0 ª					
(Scale)	411902,492 ⁸	41930,6				
			Hypoti			
Parameter		Std.	Wald Chi-	df	Cia	
	В	Error	Square	uı	Sig.	ا ر
(Intercept)	1505	48,6	960,8	1	0,000	<u> ĕ</u>
(пистоери)		,.	300,0			
Conversation	199	70,2	8,0	1	,005	oan A
						Urban Area
Conversation	199	70,2	8,0	1	,005	Urban A
Conversation Mobile phone	199 -56 0 ^a	70,2 104,7	8,0	1	, <mark>005</mark> ,595	Urban A

Parameter Estimates of the GLM Dependent variable: Accident Probability Model: (Intercept), Distractor

MCI group

Conversation	в 0,12 -0,01	Std. Error 0,0	Hypoth Wald Chi- Square	nesi df	s Test Sig .
(Intercept) Conversation	0,12	Error	Square	df	Sig.
Conversation	0,12			uı	Jiy.
Conversation	-	0,0			
	-0.01		14,4	1	0,000
Mohile nhone	-0,01	0,0	0,0	1	,888,
Monile bilone	0,19	0,1	10,3	1	,001
No distraction	0ª				
(Scale)	,065b	0,0			
			Hypoth	nesi	s Test
Parameter		Std.	Wald Chi-	df	Cia
	В	Error	Square	ui	Sig.
(Intercept)	0,26	0,0	77,5	1	0,000
Conversation	0,21	0,0	25,6	1	,000
Mobile phone	0,23	0,1	13,1	1	,000
No distraction	0 ª				
(Scale)	,051b	0,0			

detrimental



Results - AD



Mobile phone use worsen the reaction times of AD patients by 1.2 sec and more importantly catapults their accident probability to more than 40%.

In urban area no significant differences were detected regarding the effect of distraction to the driving competence of the AD group.

Dependent variable: Mean Speed (km/h) Model: (Intercept), Distractor						Dependent varia Model:			on Tim Distrac			ec)		
	AD	gro	up					AD	groi	up				
Parameter	В	Std. Error	Hypot Wald Chi- Square			a	Parameter	В	Std. Error	Hypot Wald Chi Square		s Test Sig.	а	
(Intercept)	33,89	1,2	864,0	1	0,000	Are	(Intercept)	2489	126,5	387,5	1	0,000	Are	
Conversation	0,06	1,6	0,0	1	,969	Rural Area	Conversation	-33	181,9	0,0	1	,857	Rural Area	
Mobile phone	-3,82	3,4	1,2	1	,265	E E	Mobile phone	1246	403,9	9,5	1	,002	~	
No distraction	0ª						No distraction	0 ª						
(Scale)	62,480 ^b	8,8					(Scale)	735576,750	107294,9					
			Hypot							Hypot	hesi	s Test		
Parameter	В	Std. Error	Wald Chi- Square	df	Sig.		Parameter	В	Std. Error	Wald Chi Square	df	Sig.	æ	
(Intercept)	24,80	0,9	772,7	1	0,000	₽¥.	(Intercept)	1782	81,9	473,3	1	0,000	Are	
Conversation	-1,06	1,4	0,6	1	,440	Urban Area	Conversation	65	135,5	0,2	1	,629	Urban Area	
Mobile phone	-0,11	2,4	0,0	1	,962	돌	Mobile phone	164	208,8	0,6	1	,431	j	1.0
No distraction	0°					E	No distraction	0 ª						
(Scale)	28,655 ^b	4,9					(Scale)	221345,075	41102,7					
	a. Set to zer b. Maximum		e this paramete l estimate.	er is re	dundant.			a. Set to ze b. Maximun		this paramete estimate.	er is re	dundant.		

Parameter Estimates of the GLM

Parameter Estimates of the GLM

Dependent variable: Accident Probability

Model: (Intercept), Distractor

AD group

	-W. 1800 - 10 A	_		_		
			Hypotl	nesi	s Test	
Parameter		Std.	Wald Chi-	df	Sig.	
	В	Error	Square	uı	Jig.	G
(Intercept)	0,27	0,0	31,4	1	0,000	Are
Conversation	-0,09	0,1	1,5	1	,219	Rural Area
Mobile phone	0,43	0,2	7,6	7,6 1 ,		<u>~</u>
No distraction	0ª					
(Scale)	,109b	0,0	, j	70		
			Hypoti			
Parameter		Std.	Wald Chi-	df	Cia	
	В	Error	Square	aı	Sig.	
(Intercept)	0,30	0,1	29,7	1	0,000	Are
Conversation	-0,12	0,1	1,7	1	,196	Urban Area
Mobile phone	-0,14	0,1	0,9	1	,336	ᆙ
No distraction	0 ª					
(Scale)	,102b	0,0				
			this paramete	r is re	dundant.	
	b. Maximum	likelihood	estimate.			



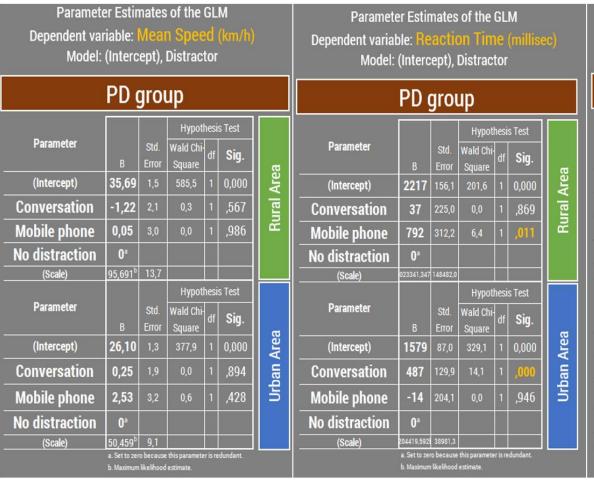
Parameter Estimates of the GLM

Results - PD



PD patients in rural area, when using the mobile phone, have **0.8 sec larger reaction time and 40% higher accident probability** compared to the undistracted driving.

In urban area, they have significantly larger reaction time and higher accident probability compared to the undistracted driving, but not when using their mobile phone.



Parameter Estimates of the GLM

Dependent variable: Accident Probability

Model: (Intercept), Distractor

PD group

		910		_			
			Hypotl	hesi	s Test		
Parameter		Std.	Wald Chi-	df	Sig.		
	В	Error	Square	uı	oly.		
(Intercept)	0,08	0,0	3,6	1	0,057		
Conversation	0,06	0,1	0,8	1	,361		
Mobile phone	0,38	0,1	18,9	1	,000		
No distraction	0°						
(Scale)	,087b	0,0					
			Hypothesis Test				
Parameter		Std.	Wald Chi-	df	Sig.		
	В	Error	Square	u	oly.		
(Intercept)	0,22	0,0	27,6	1	0,000		
Conversation	0,14	0,1	4,7	1	,030		
Mobile phone	-0,14	0,1	2,0	1	,161		
No distraction	0°						
(Scale)	.053b	0.0					

Urban Area



Conclusions 1/2



Drivers with MCI, AD or PD tried to compensate their driving behaviour by reducing, at an important extent, their speed when using a mobile phone, but this self-regulated strategy was unsuccessful.

Conversation with a passenger, had a detrimental effect, but only for the MCI and the PD groups in urban area.

MCI, AD and PD drivers compared to their undistracted driving							
	Conversation with passenger	Mobile phone use	Comment				
Mean speed		1	Lower speed for MCI group in rural road when using mobile phone				
Reaction time	1	1	Larger reaction time for all groups in all conditions when using mobile phone and for the MCI and PD groups when conversing with passenger in urban road				
Accident probability	1	1	Higher accident probability for all groups in all conditions when using mobile phone and for the MCI and PD groups when conversing with passenger in urban road				

The execution of two tasks simultaneously, namely of driving and using a hand-held mobile phone, placed the group of drivers with neurological diseases affecting cognition in a vulnerable position due to the need to effectively divide their attention under this demanding driving condition, confirming our initial research hypothesis.



Conclusions 2/2

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The presence of an in-vehicle distractor while driving such as conversing through a handheld mobile phone, has a significantly deleterious effect on accident probability of drivers with cognitive impairments (AD, PD and in a lesser extend MCI).

Observations of considerable practical importance as they provide quite useful information for the development of policies that aim at reducing the risk for car accidents and at improving aspects of driving performance (restrictive measures, training and licensing, information campaigns, medical and neuropsychological monitoring), especially in a sensitive group of car drivers, such that of drivers with MCI, AD or PD









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