

CIVIL AVIATION MEDICAL ASSOCIATION

December 1, 2013

The Honorable Michel P. Huerta
Administrator, Federal Aviation Administration
800 Independence Avenue SW
Washington, D.C. 20591

Re: Obstructive Sleep Apnea (OSA)

The Civil Aviation Medical Association (CAMA) serves as the “voice of civil aviation medicine” and is composed of aviation medical examiners (AMEs) that help certify the nation’s pilots.

The Federal Air Surgeon recently announced a proposed policy that would task AMEs to determine body mass index (BMI) on all pilot applicants. Over a set value (initially 40) would require evaluation by a board certified sleep specialist. If obstructive sleep apnea (OSA) is found, treatment is required before medical certification. On behalf of CAMA, we object to the proposal for the following reasons:

- § The FAA is not tasked to provide long term prognoses, but rather to determine the likelihood of pilot incapacitation for the duration of the medical certificate
- § No scientific body of evidence has demonstrated that undiagnosed obesity or OSA has compromised aviation safety
- § Although obesity is a national health issue that should be addressed, unified educational efforts are likely to be far more successful than regulatory measures
- § The proposed policy would greatly burden a critically taxed medical certification system already suffering from very significant processing delays
- § There is a critical shortage of accredited sleep centers and board certified sleep medicine specialists, presenting formidable quality assurance challenges for a national policy
- § Sleep studies are costly, and specialists asked to render opinions potentially affecting aviation safety will likely order expensive, two-night studies as opposed to less costly home studies
- § A cost-benefit analysis of the economic and regulatory burden on the pilot population should be essential to a proposed policy that would further hinder general aviation

CAMA supports the development of a multilateral, unified educational initiative with the FAA, AMEs, pilots, and pilot organizations along with other stakeholders to address the health issues of obesity and OSA. A broadly based, educational effort would reach many, advancing the goal of a cultural change in pilot obesity. Education of the many would have far greater public health impact than regulation of the few. The FAA and the aviation community would then work together toward aviation safety.

The Civil Aviation Medical Association stands ready and willing to work with the Federal Aviation Administration in all aerospace medically related safety concerns.

Sincerely,

Mark C. Eidson, MD
President CAMA