

# Le sostanze psicoattive ed il regolamento EASA in materia

a cura di:  
**CAVOK Medical Center**



Dott.ssa Anna Fachinetti  
Dott.ssa Elisa Pozzi  
Dott.ssa Camilla Sigurtà



## PREMESSA

I contenuti che seguono sono stati sviluppati a cura di  
**CAVOK MEDICAL CENTER:**  
**il primo ed unico Centro Aeromedico Civile Italiano ad aver  
ottenuto la Certificazione EASA IT-004-AeMC (AeroMedical Center)  
da parte dell'Ente Nazionale per l'Aviazione Civile (ENAC).**

Gli argomenti trattati vogliono essere un approfondimento specifico sul tema degli accertamenti tossicologici e sulle sostanze psicoattive.

L'uso di qualsiasi farmaco deve comunque essere valutato da un medico competente in materia e si sconsiglia al personale navigante di attivare strategie di automedicazione non autorizzata e supervisionata.

# CHI PUO' ESSERE SOTTOPOSTO AI TEST?

## *Whom to test*

5.15 Although the aviation environment is one that mandates safety at all times, it is possible that not all aviation employees can or should be subjected to biochemical testing. As with anything else, of course, the decision on the appropriate scope of the programme will depend on the situation for which the decision is being made. An employer that has a “one population, one policy” rule would apply a testing programme either to none of its employees or to all of them. Alternatively, some regulatory authorities or employers may choose to adopt a programme that applies only to those employees performing functions deemed to be sufficiently safety-sensitive to warrant the intrusion on privacy that testing unavoidably brings. The categories selected should include: flight crew members (pilots, flight engineers and flight navigators); flight attendants; maintenance personnel (including repair and inspection personnel); flight instructors; dispatchers; passenger and baggage screeners; ground security co-ordinators; and air traffic controllers. Other categories of personnel, among them airport security and firefighters, could also be considered for inclusion.

Doc 9654-AN/945

MANUAL ON PREVENTION OF  
PROBLEMATIC USE OF SUBSTANCES IN  
THE AVIATION WORKPLACE

FIRST EDITION — 1995



Approved by the Secretary General  
And published under his authority

INTERNATIONAL CIVIL AVIATION ORGANIZATION

# QUANDO POSSO ESSERE SOTTOPOSTO AD ACCERTAMENTI?

1. DURANTE VISITA MEDICA EASA
2. DURANTE ACCERTAMENTI RANDOMICI DA PARTE DELL' AUTORITA' COMPETENTE IN RAMPA
3. DURANTE GLI ACCERTAMENTI PREVISTI PER LA MEDICINA DEL LAVORO

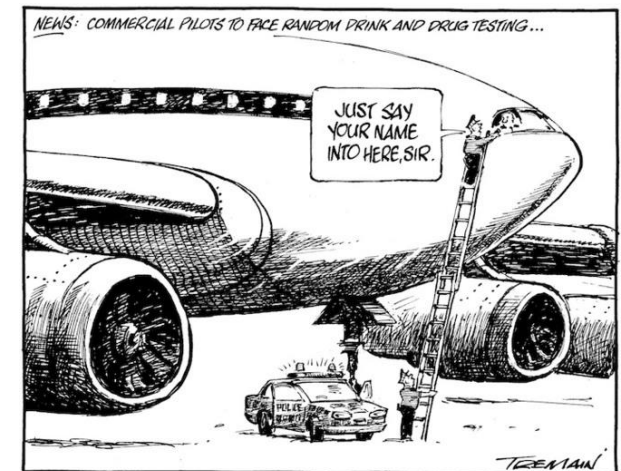
Visita preventiva

Visita periodica

Visita di rientro al lavoro

Ragionevole sospetto

Dopo incidente



# QUANDO POSSO ESSERE SOTTOPOSTO AD ACCERTAMENTI?

*European Union Aviation Safety Agency*

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## 1. VISITA EASA INIZIALE 1 – 3 CLASSE

- (d) Psychoactive substance testing
- (1) Drug tests should screen for opioids, cannabinoids, amphetamines, cocaine, hallucinogens and sedative hypnotics. Following a risk assessment performed by the competent authority on the target population, screening tests may include additional drugs.
  - (2) For renewal/revalidation, random psychoactive substance screening test may be performed based on the risk assessment by the competent authority on the target population. If random psychoactive substance screening test is considered, it should be performed and reported in accordance with the procedures developed by the competent authority.
  - (3) In the case of a positive psychoactive substance screening result, confirmation should be required in accordance with national standards and procedures for psychoactive substance testing.
  - (4) In case of a positive confirmation test, a psychiatric evaluation should be undertaken before a fit assessment may be considered by the medical assessor of the licensing authority.

**Acceptable Means of Compliance (AMC)**

**and**

**Guidance Material (GM)**

**to Part-MED**

**Medical requirements for air crew**

Issue 2  
28 January 2019\*

**GM2 MED.B.055 Mental health**

- (a) Drugs and alcohol screening tests used should:
- (1) provide information regarding medium-term consumption;
  - (2) be accepted on national level by the competent authority based on the availability and suitability for the scope mentioned in point(a)(1) above.
- (b) Statistical data of the screening campaign mentioned in AMC1 MED.B.055(d)(1) should be made available to the Agency on a yearly basis.

# QUANDO POSSO ESSERE SOTTOPOSTO AD ACCERTAMENTI?



## **Alcohol testing during ramp inspection**

### **Chapter 10.3**

The Competent Authority (CA) should include alcohol tests as part of the annual ramp inspection programme. CA should ensure a reasonable coverage of operators from the priority list for alcohol testing.

The planned annual number of alcohol tests to be performed on a given operator should be adjusted based on the priority for alcohol testing assigned to the operator by the CA. The priority for alcohol testing assigned to an operator should take into account the priority list for alcohol testing established by the Agency.

The annual target of the number of alcohol tests to be performed on a given operator can be set by either adjusting the number of inspections with alcohol tests and/or adjusting the proportion of crew members to be tested during an inspection with alcohol test.

# TIPOLOGIA DI TEST – alcohol test

- ANAMNESI
  - ESAMI DI LABORATORIO
  - USO DI QUESTIONARI
  - ESAMI STRUMENTALI
  - VISITA GENERALE
  - ESAME OBIETTIVO CON CARATTERISTICHE CLINICHE SPECIFICHE
- dell'intossicazione acuta e cronica



# QUALE TIPOLOGIA DI TEST – DRUG TEST

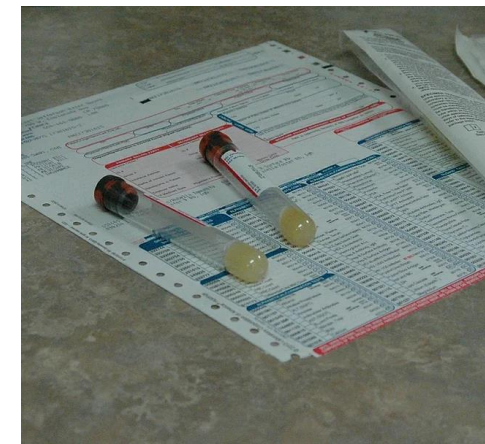
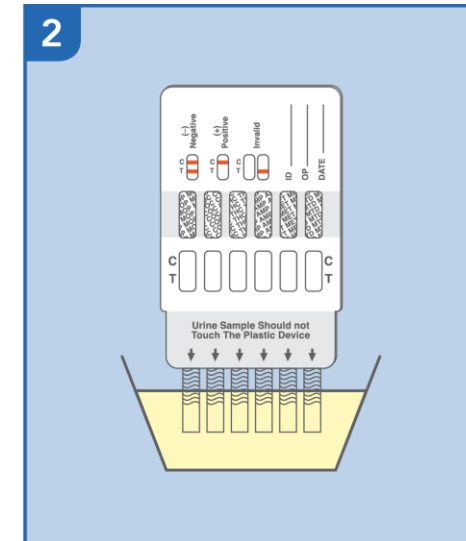
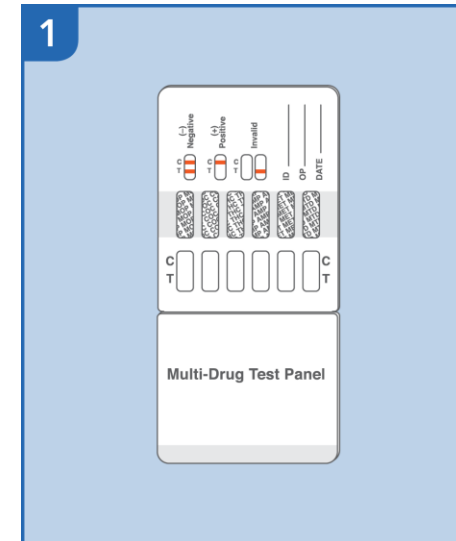
- DRUG TEST URINARIO DI SCREENING
- DRUG TEST SALIVARE DI SCREENING
- DRUG TEST EMATICO

## TEST DI CONFERMA

ASSOCIAZIONE SCIENTIFICA  
Gruppo Tossicologi Forensi Italiani (GTFI)

LINEE GUIDA PER LA DETERMINAZIONE DI SOSTANZE  
STUPEFACENTI E PSICOTROPE SU CAMPIONI  
BIOLOGICI CON FINALITÀ TOSSICOLOGICO-FORENSI E  
MEDICO-LEGALI

Revisione n. 6 del 8 giugno 2022





# AIRCREW AND AIR TRAFFIC CONTROLLERS MEDICAL CERTIFICATION AFTER USE/ABUSE OF ALCOHOL AND/OR PSYCHOTROPIC SUBSTANCES

CERTIFICAZIONE DELL'IDONEITÀ PSICOFISICA  
DEL PERSONALE DI VOLO E CONTROLLORE  
DEL TRAFFICO AEREO A SEGUITO DI USO/  
ABUSO DI ALCOL E/O SOSTANZE PSICOTROPE

## ■ ANTONELLO FURIA MD

Ente Nazionale per l'Aviazione Civile  
Direzione Centrale Regolazione Tecnica  
Ufficio Medicina Aeronautica – Roma



## CORRESPONDING AUTHOR/CONTATTI

Dr. Antonello FURIA

ENAC

Direzione Centrale Regolazione Tecnica  
Ufficio Medicina Aeronautica  
Via del Castro Pretorio, 118 - 00185 Roma  
Tel. +39 06 4459 6597  
a.furia@enac.gov.it

Descrizione dettagliata delle  
linee guida a seguito di  
riscontro di positività ad  
alcool test – drug test

## INTERAZIONI ESAMI URINE di SCREENING - FALSI POSITIVI

### **Amfetamine**

- Pseudoefedrina (decongestionanti)
- Efedrina (prodotti dimagranti, sciroppi)
- Fenilefrina (decongestionanti)
- Bupropione (antidepressivo)
- Trazodone (antidepressivo)
- Ranitidina (ritirata, ma storicamente rilevante)
- Labetalolo (antipertensivo)

### **Benzodiazepine**

- Sertralina (SSRI)
- Oxaprozin (FANS)
- Tolmetina (FANS)

### **Opiacei**

- Codeina (antidolorifici, sciroppi)
- Tramadolo
- Chinina (tonici)
- Dextrometorfano (sciroppi per la tosse)
- Fluorochinoloni (es. levofloxacina)

**NB: Molti farmaci/ sostanze interferenti sono UNFIT per il volo, Prestare attenzione ai farmaci interferenti che invece possono essere FIT per il volo e dare FALSI POSITIVI**

**Non esitate a contattare il vostro AME in caso di dubbi**



*I test immunochimici (immunoassay) sono soggetti a falsi positivi.*

*Si raccomanda sempre la conferma con test di secondo livello (GC-MS o LC-MS/MS).*

*Fornire sempre un'anamnesi farmacologica completa prima del test.*

## INTERAZIONI ESAMI URINE di SCREENING- FALSI POSITIVI

### **Cannabis (THC)**

- Ibuprofene (alte dosi)
- Naproxene (FANS)
- Pantoprazolo / Lansoprazolo (IPP)
- Efavirenz (antiretrovirale)

### **Fenciclidina (PCP)**

- Dextrometorfano
- Tramadolo
- Ketamina
- Venlafaxina
- Difenidramina (antistaminico)
- Clorpromazina (antipsicotico)

### **Metadone**

- Quetiapina (Seroquel)
- Difenidramina
- Verapamil

### **Barbiturici**

- Ibuprofene (evidenza non certa)
- Fenilefrina

**NB: Molti farmaci/ sostanze interferenti sono UNFIT per il volo,  
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## Acceptable Means of Compliance (AMC)

and

## Guidance Material (GM)

to Part-MED

## Medical requirements for air crew

Issue 2  
28 January 2019<sup>1</sup>

AMC1 MED.A.015	Medical confidentiality .....	8
GM1 MED.A.020	Decrease in medical fitness .....	8
	MEDICATION — GUIDANCE FOR PILOTS AND CABIN CREW MEMBERS .....	8

### **GM1 MED.A.020 Decrease in medical fitness**

#### **MEDICATION — GUIDANCE FOR PILOTS AND CABIN CREW MEMBERS**

- (a) Any medication can cause side effects, some of which may impair the safe performance of flying duties. Equally, symptoms of colds, sore throats, diarrhoea and other abdominal upsets may cause little or no problem whilst on the ground but may distract the pilot or cabin crew member and degrade their performance whilst on duty. The in-flight environment may also increase the severity of symptoms which may only be minor whilst on the ground. Therefore, one issue with medication and flying is the underlying condition and, in addition, the symptoms may be compounded by the side effects of the medication prescribed or bought over the counter for treatment. This guidance material provides some help to pilots and cabin crew in deciding whether expert aero-medical advice by an AME, AeMC, GMP, OHMP or medical assessor is needed.

Per approfondimenti su questo  
argomento potete fare riferimento a:

**CAVOK MEDICAL CENTER**

Via Del Gregge, 100  
21015 Lonate Pozzolo (VA)  
03311160008  
info@cavok.it  
<https://www.cavok.it/>

Direttore Sanitario:  
Dott.ssa Camilla Sigurtà