



K44 Corresponding Impairment With Hydrocodone and Driving Under the Influence Investigations

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After attending this presentation, attendees learn more information about the impairing effects of hydrocodone, alone, and in combination with illicit and legal drugs for the purposes of driving.

This presentation will impact the forensic science community by providing a possible tool for court when testifying in DUID cases.

There has been extensive debate over whether opiates, especially Hydrocodone, impair driving. Publications have not yet examined driving behaviors, driving under the influence (DUI) cases, and drug recognition evaluations (DRE) where toxicological results indicated hydrocodone was present. A retrospective three year study of DUI and DRE investigations involving hydrocodone, in Orange County, CA, was conducted. Driving behavior, the number of cues missed on the validated Standard Field Sobriety Tests (SFST), the demeanor of the driver, speech pattern, eye response, and physical appearance were evaluated. From over 150 cases evaluated, five cases were observed with only hydrocodone present. However, there was a high correlation between the officer reported impairment and hydrocodone when combined with muscle relaxants (n=81) and/or benzodiazepines (n=103). The most frequently occurring muscle relaxant was carisoprodol with alprazolam and diazepam as the most prevalent benzodiazepines. It was also determined that poly-drug use concurrent with hydrocodone was not limited to prescription drugs. An increased rate of vehicular collisions, of poor performance on psychological tests

and necessitated additional DRE evaluation was noted when hydrocodone and a central nervous system depressant were present. Furthermore, the psychological tests administered by the investigating officer appear to be a reliable measure of impairment for poly-drug cases involving hydrocodone with and without other drugs present. **Hydrocodone, DUID, DRE**