Dear [Name]

Colour Vision Deficiency (CVD)

Thank you for your recent emails in which you raise concerns about the letter you recently received from the Civil Aviation Safety Authority (CASA) concerning colour vision deficiency (CVD).

At the outset, let me emphasise that CASA has not grounded any pilots with known CVD issues, nor have we said that it is unsafe for those pilots to continue to fly.

Why if this article (the Watson article) does not disclose any new risks associated with CVD did you issue the letters to AOC holders and CVD pilots?

If there is no evidence of an increased risk (please provide if there are) when will the letters will be withdrawn?

CASA is considering a range of recent international research in relation to CVD, and in particular a large body of specialist expert opinion and other scientific evidence that has been obtained in preparation for a case that is presently before the Administrative Appeals Tribunal (AAT). I have attached a list of the scientific references that CASA and its experts have had regard to, however as the specialist reports are currently before the AAT, CASA is unable to provide you with copies at this time.

The material before the AAT includes studies conducted in the United Kingdom (UK) for the UK Civil Aviation Authority, which specifically consider perception of the colours that are relevant to aviation (including colours inside and outside the cockpit). On the basis of this important scientific work, a new aviation-specific colour vision test and testing protocols have been developed, which represent a significant improvement over current practices and procedures. Notably, about a third of pilots who previously failed other non-aviation-specific colour perception tests pass this aviation-specific test.

The article by Dr Dougal B. Watson, principal medical officer of the New Zealand Civil Aviation Authority, which appeared in the February 2014 issue of the Journal of Aviation, Space, and Environmental Medicine assessed various approaches taken globally to pilot colour perception testing. On reviewing the paper, Australia would appear to be the most flexible jurisdiction when it comes to allowing pilots with CVD to continue flying.
Why has CASA implemented these very significant changes to the colour vision assessment procedures without first undertaking public consultations?

CASA recently amended the procedures for the initial issue of class 1 and 2 medical certificates for applicants with a CVD in order to re-align with the requirements of Part 67 of the Civil Aviation Safety Regulations (CASR) 1998.

CASR Part 67 clearly identifies the process that is required to be carried out in deciding whether the pilot meets the applicable standard. Stage 1 is the Ishihara test. If the applicant fails this test, they proceed to stage 2 the Farnsworth Lantern test, and failing that test, the final option is stage 3, a relevant test determined by CASA that simulates an operational situation.

During a review of our procedures following the AAT evidence, it was recognised that CASA’s processes had not been fully aligned with Part 67. It was agreed that it was important to adhere to the requirements of Part 67, and accordingly this was implemented. As this was implementing the existing regulations, rather than a change to the regulations, there was no requirement for prior consultation.

In reality, what has changed is that every new pilot now has to undergo the regime for testing prescribed in the regulations. What happens after the tests are complete is still open to individual determination.

Other comments

CASA believes it is prudent to examine the extent of CVD in affected pilots who currently hold an aviation medical certificate in the context of evolving medical understanding of colour vision issues in aviation.

Thus far, all CASA has done is to advise pilots and operators of this potential issue to ensure they are aware that CASA is examining the CVD issue and asked them to consider if there may be any safety issues in relation to current operations. CASA has looked closely at the application of the relevant regulations for initial entrants and included some more information on the CASA website for them.

For now, it is important to understand that CASA has taken no action to change or introduce new conditions on existing medical certificates of holders with CVD. No further action at all may be taken as a result of CASA’s review of the medical evidence. Of course, if it becomes apparent that further action is necessary in the interests of safety, CASA will initiate that action, on a case by case basis, in full accord with the applicable requirements of the regulations. If changes to the regulations should become necessary, any change will follow the full regulatory consultation process.

Yours sincerely

Peter Fereday
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