Diabetes & Travel

If you are planning to travel overseas take note of the following, especially if you are on insulin:

Before leaving

1. Make an appointment with your GP, hospital consultant or diabetic nurse to review your diabetes and to discuss your self-treatment plan in the light of your overseas trip. Agree together your schedule for monitoring your diabetes and set strategies for changing your insulin dosage.

2. You will need to take the following into consideration:
   - Change of climate
   - Change of food & drink
   - What different drinks will be available?
   - What is the staple food?
   - When do people eat their regular meals?
   - What will you do when you are invited to someone’s home for a meal?
   - Change of routine & activity levels
   - Will you take more or less exercise?
   - What about field trips into remote rural areas?
   - Change of time
   - How will you manage your diabetes during a long haul flight especially when you cross time zones?
   - What food will you eat during the flight?
   - Change in your exposure to infection - in general you will be more likely to get a gastrointestinal upset while overseas and may be exposed to unfamiliar tropical infections e.g. malaria.

3. Check before travelling that that there are good local health facilities in the event of an emergency. If you are going abroad as an employee or volunteer, discuss this with your team leader or manager. Once you arrive, visit the local health facility to confirm arrangements.

4. Take adequate supplies of insulin with you and all the other supplies you need e.g. needles, lancets, test strips etc to cover the whole duration of your stay overseas, unless this is longer than 6 months. Ideally take considerably more than you need in case of loss or theft or because of in increase in dose or frequency of testing.

5. If you are away for more than 6 months, plan how you will obtain continued supplies. Before you travel try to find out if your current insulin preparation/pen is available locally. If not, will you have visitors who can bring further supplies? If not, you may need to consider changing to a
different insulin preparation that will be available locally. It is wise to do this some months before
departure so you can stabilise the dose before travel.

6. Take a back-up low-tech system for monitoring your blood glucose on top of your automated
system e.g. lancets & a box of blood glucose sticks with visual analogue scale.

7. Have all travel vaccines in plenty of time before leaving

8. Medication
If travelling to a malarious areas be very strict about taking malaria prevention tablets and
avoiding mosquito bites (malaria can upset diabetic control) Also take standby ciprofloxacine, an
antibiotic which cures most cases of travellers diarrhoea (normal adult dose 500mg daily for 3
days): diarrhoea can lead to dehydration. Take anti sickness pill, again because vomiting may
affect your control.

9. Take a first aid kit to treat minor injuries

10. Obtain a doctor’s letter explaining that all the medication you are carrying is for your personal
use as a diabetic. It should give details of your insulin dosage. Wear a Medic Alert bracelet or
pendant, and if insulin-dependent, obtain a Diabetic Identification Card from Diabetes UK or your
national diabetes organisation. (www.diabetes.org)

11. Make sure that your health insurance covers pre-existing medical conditions including diabetes

During Travel

1. Keep all your insulin in your hand luggage; it will freeze in the aeroplane’s hold. Keep some of
your other supplies in a different part of your luggage in case of loss or theft.

2. Treating hypos. Avoiding hypos is a top priority.

Always carry a form of sugar e.g. dextrose tablets in case of hypo attacks. Running “a bit high” for
a few days is unlikely to cause any harm, however hypos are much more serious and need
immediate action. Hypos commonly occur when flying and if a meal is delayed. Avoid drinking
alcohol on an empty stomach.

3. Airline meals

Many experienced diabetics suggest it is usually better not to order a diabetic meal (they can be
too low in carbohydrate) but to pick and choose from a normal meal.

4. Always carry a good supply of food and drink, and be prepared for stopovers, re-routing and
cancellations.

At your destination

1. If you are an employee or volunteer, make sure that whoever is responsible for your health and
welfare knows you are diabetic in case you run into problems with your diabetes and require
emergency treatment. If you are going for a longer trip check out local reliable supplies you may
be able to obtain.

2. Foot care. Take special care of your feet, treating any fungal or other infection immediately.
Keep your toenails short and wear-in new shoes before travelling. Inspect your feet regularly.
3. **Storage.** For trips over a month, take with you an unbreakable stainless steel vacuum flask if your supplies will be outside the 1 - 25°C range. Never put insulin into a glove compartment or boot of a car. Keep your insulin in the fridge (but don’t allow it to freeze) or in as cool a place as possible, out of the direct sunlight - consider purchasing FRIO™ Cooling Wallets which would help to keep insulin cool when out of a fridge. ([www.frio.uk.com](http://www.frio.uk.com))

4. **Fever, malaria and diarrhoea.** You will probably need more insulin than usual. Monitor your blood sugar more frequently and immediately see a doctor if you suspect malaria or develop severe diarrhoea or vomiting.

5. **Dehydration.** Take extra precautions to prevent and treat dehydration caused by diarrhoea, heat or exercise. Take strict precautions to minimise your risk of diarrhoeal disease. Maintain a high fluid intake when in hot climates. Drink plenty of fluids.

6. **Sunburn.** Take care to avoid sunburn, especially to feet and legs

7. **Local food and drink.** Obviously this may be different from what you are used to. In many countries normal drinks such as tea have large amounts of pre-added sugar.

8. **Hypos in hot climates.** Because insulin is often absorbed more quickly when it’s hot you may be at slightly greater risk of getting hypos as a result. If you are going to a remote area or are prone to attacks, as well as taking dextrose or your favourite equivalent, take glucagon or Hypostop Gel, but make sure your travelling companion knows how to use these. Tell them it is usually better to make sure you take something sweet by mouth unless you are unconscious.

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**Further Guidance and Information**

In the UK see: Diabetes UK Travel Advice Tel: 020 7323 1531; Careline 020 7636 6112 ; info@diabetes.org.uk

More information can be found in: The Traveller’s Good Health Guide’, Ted Lankester; 3rd Edition 2006

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